

The Perception of Psychological Stress in The Nursing Profession at Daro Hospital, Sarawak: A Case Study

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Abstract

Nursing is a professional field in health care. Nurses assume responsibility for the healing and maintenance of safety for those who are terminally ill, for the maintenance of health for those who are healthy, and for managing anxiety in all life-threatening situations in all areas of healthcare. Nurses need to be given psychosocial support so that their mental well-being is maintained because they are workers who protect the interests of society. This case study involved two nurse supervisors as informants who were serving in health facilities and the input was study data in the form of audio-verbal interviews which had been transcribed into case study material. Participating observation is also documented as secondary data. Significant literature highlights and the results of freelance studies are used as secondary sources before the training process is carried out. The objective of this study is to examine qualitative cases of perceptions about the level of psychological stress in the nursing profession at Daro Hospital, Sarawak. The studies are carried out in the form of qualitative investigations, namely case studies, to absorb data from open-ended questions. It can provide in-depth information about the causes of psychology and is appropriate to get a true picture of the themes and sub-themes that have been set. Its use also allows the development of the concepts and understanding necessary to make judgments and provide suggestions regarding the issues under study. In relation to the results of the study, several important factors formed from the main themes of the study will be submitted to the Ministry of Health Malaysia in an effort to explore the qualitative process of psychological stress in the nursing profession.

Keywords: Case Study, Perception, Psychological Pressure, Nursing Profession, Hospital Daro, Sarawak

Introduction

A nurse is a health care professional who provides care and care to individuals, families, and communities in a variety of care settings, such as hospitals, health centers, clinics, and long-term care facilities.

The main duties of a nurse include

Patient monitoring and care: The nurse is responsible for monitoring the patient's condition, conducting evaluations, and providing appropriate care. They can administer medications, treat wounds, monitor vital signs, and keep patients clean.

Patient and family education: Nurses provide education to patients and their families about the disease, treatment, and preventive measures. They also provide information about post-hospital care and ensure good understanding of medical instructions.

Collaboration with the medical team: Nurses work closely with doctors, therapists and other medical personnel to plan and carry out patient care. They communicate regularly to monitor the patient's progress and adjust the treatment plan as needed.

Providing emotional support: In addition to physical care, nurses also provide emotional support to patients and their families. They listen to and encourage patients during the healing period and help reduce the anxiety and fear that patients may feel.

Documentation and administration: Nurses are also responsible for recording patient medical information, maintaining treatment records, and managing related administrative documents.

In addition to the above duties, nurses must also have good communication skills, professional ethics, knowledge of the use of medical technology, and the ability to work in stressful situations. They must be prepared to face various emergency situations and be able to work in teams.

Education to become a nurse generally involves formal education at a health education institution, such as a nursing school or nursing college. After graduation, nurses can obtain a certification or license to practice in the country or region where they work.

Nurses play an important role in providing holistic health care and supporting patients in their healing process. They are the backbone of the health care system and make a significant contribution to improving the quality of life of individuals and society as a whole.

Literature Review

Today's world is moving in an era of knowledge-based economy driven by rapid development in information and communication technology (ICT). Industrial Revolution 4.0 (IR4.0) is one of the important changes in social transformation based on emerging digital technologies such as drones, artificial intelligence (AI), block chain (blockchain), big data (big data), performance computing high performance computing), mobile platforms and so on (Cornelius, 2022). The concept of digital

healthcare is also increasingly being adopted in the health sector around the world including Malaysia. Through digital health, this has improved the provision of health care through the use of ICT to monitor and improve the well-being and health of patients in addition to empowering patients in the management of their own and family health (Maier et al., 2021). These changes taking place in the health sector drive the urgent need for health personnel to also prepare themselves and equip themselves with the necessary knowledge and skills to provide high quality healthcare services.

Psychological stress happens to every individual with the environment especially in the workplace. Maintaining a healthy lifestyle because it is necessary for survival (Dulhamid et al., 2023). According to Snyder (1999), psychological burden is associated with stressful life events as well as daily complexity. This applies to individuals who work in the nursing profession either in the government or private sector. Psychology refers to the scientific study of human

thought and its functions, especially those that influence behavior in a specific context. While stress refers to the individual's response to challenging or difficult situations that appear in an individual's life. Stress can be positive or negative depending on how it affects a person and how a person manages the stress. According to the Oxford Dictionary, stress is a concern that stems from problems faced in an individual's life (Muhiddin Ishak and Saiful Effendi Syafruddin, 2021).

Beehr and Newman (1978) defined stress as a condition resulting from interaction with people and their work and characterized by changes in individuals that force them to deviate from normal functioning. According to Panigrahi (2016), stress and pressure are often associated as the same term but in fact, stress is a subjective feeling that is triggered by a stressful situation and when this pressure overcomes the individual's ability to deal with it, stress will be produced. Operationally, stress is defined as a feeling of depression that makes an individual irritable, easily angry, loses focus on work and affects his work (Lovibond & Lovibond, 1995).

Methodology

Area of Research Study

In Mukah Division, Sarawak, Malaysia, there is a district known as the Daro District. The town of Daro itself is located in the district. Daro is closest to Matu, a town (Majlis Daerah Matu & Daro, 2023). The Majlis Daerah Matu-Daro (Matu-Daro District Council), which is also the local government for Matu District, is responsible for managing Daro. With Melanau making up the majority, Daro had a population of 37,900 in 2020. Ferries that used the Rejang River's channel to travel from Sibul to this location took about two hours.

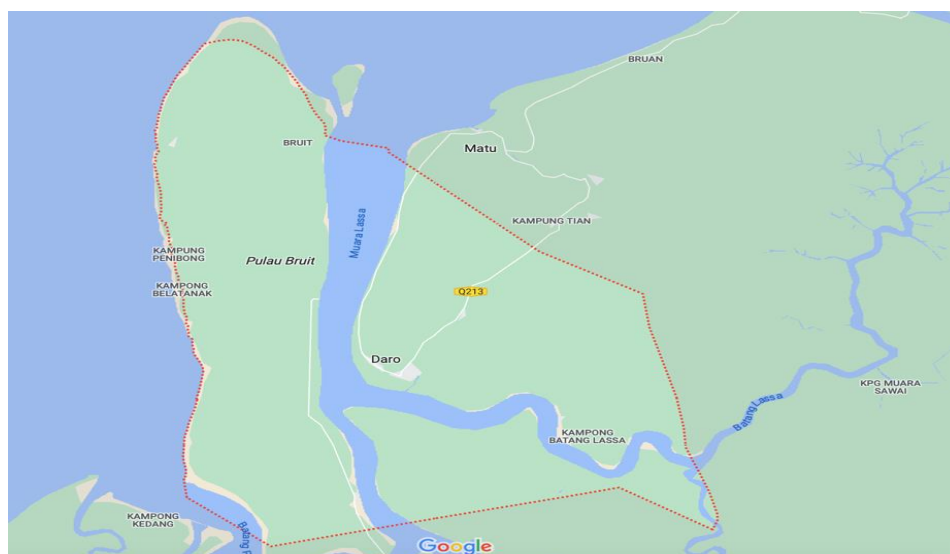


Figure 1: Area of research study

Instrument and Sampling

This study is qualitative in nature by applying ethnographic methods to collect the required data throughout the study. A qualitative study was chosen to describe nurses' perceptions of psychological stress. According to Grbich (2007), qualitative research is an approach that focuses on meaning or meaning in a real context. The research sample used in this research is using convenience sampling by using this technique of purposeful sampling which is for those who are willing to be informants. In the context of this study, the subjects or informants selected are those who are nurses.

Data Analysis

Questions of inquiry and sampling

1. First I want to ask you, what do you think the term "work pressure" actually means.
2. Have you ever experienced work pressure yourself? Cue: Have you seen other people depressed?
3. In your opinion, what causes you to be depressed? Cues: Specific incidents, or general hassles from day to day. Any other examples?
4. What is the effect on you from work pressure? Cue: Any impact on physical health, mental health, or home life?
5. How do you usually try and handle pressure at work? Signs: Face and focus on the problem, talk to people, ignore them, don't bring work home?
6. Why do you think some people handle pressure well and others not so well? Cues: Age, gender or personality differences?
7. Who do you think is responsible for handling pressure? Cues: Self-employed, management, university, job title, supervisor?

8. In your opinion, what can be done to help deal with stress? Both in general, and in your work situation.
9. Do you think your job is less stressful than the average overseas? Cue: What type of work do you think is most stressful?
10. In your opinion, what is the impression on the oppressed staff? Cue: Affect co-workers or sick, home life?

Finding and Discussions

Based on interviews with respondents (Jururawat), the results showed that all nurses who were met with respondents gave almost the same information. The following is a transcript of a chat interview that was conducted between the reviewer and 3 nurses at Daro Hospital, Sarawak, with the aim of getting feedback about their opinion regarding perceptions about the level of psychological distress in the nursing profession. Note: Abbreviations used in transcription: N = Nurse

The formulation of the information provided is as follows:

Definition of working pressure:

N1: Burdened with many work assignments.

N2: Excessive workload at work.

N3: Occurs when receiving directions beyond the capabilities or there is a communication failure between the parties involved.

Work pressure experience:

N1: Experiencing work pressure which makes him down and absent because the time limit for completing tasks is not balanced with the time allotted.

N2: Ever experienced work pressure at work.

N3: Have you ever experienced work pressure and seen co-workers also under pressure?

Causes of working pressure:

N1: Lack of flexibility in work tasks causing stress.

N2: Limited time to complete the task.

N3: When dealing with people who fail to communicate or directions that require help from others.

Impact of working pressure:

N1: Not focused on work, worried, and anxious because there are many unfinished tasks, and decreased performance.

N2: Causes a decrease in physical health and emotional disturbances such as frequent headaches, irritability and sensitivity.

N3: Lack of enthusiasm, avoidance, affects emotions, reduces time with family. However, it can also be an opportunity to learn new things if the direction is new to the individual.

Strategies for handling work pressure:

N1: Dividing tasks to other staff and helping each other in work.

N2: Not bringing work home and trying to get enough rest.

N3: Seeking opinions or expressing feelings to colleagues, trying to solve problems rationally at work.

Factors that affect the ability to handle work pressure:

N1: Depends on one's mental and emotional acceptance of the task and workload.

N2: Age and maturity play an important role in managing stress.

N3: Individual motivation is a factor that can affect the ability to handle pressure, not depending on gender, age, or personality.

Responsibilities for handling work pressure:

N1: The department head and counseling specialist should be involved in helping to deal with stress, and there needs to be discussion in overcoming the problem.

N2: The atmosphere of the workplace, management and supervision from superiors including the relationship between colleagues play an important role in managing pressure.

N3: The responsibility rests with the individual, management and supervisors.

Efforts to help deal with work pressure:

N1: Collaboration from all parties and helping each other in tasks.

N2: Cooperation between superiors and subordinates in the division of tasks can help smooth work and reduce the risk of work pressure. Apart from that, stick to each other's spiritual activities and religious beliefs.

N3: Assign tasks to more competent individuals or divide tasks into groups. The importance of professional communication relationships and avoiding people who cause pressure.

Comparison of the level of work pressure with other countries:

N1: Problems with assignments that are beyond their actual responsibility.

N2: Jobs that involve interacting with the community have a high risk of experiencing stress due to dealing with various community situations.

N3: State that there is balance, and that nursing is the most stressful job because it has to deal with patient needs and supervisor decisions that sometimes do not involve nurses.

Impact on depressed individuals:

N1: The impact is that performance and staff are affected, and affect relations and discipline in the workplace.

N2: No increase in performance, unstable emotions, bad relationships with co-workers, and ongoing pressure can lead to an inharmonious work atmosphere in the family environment.

N3: The quality of work is affected and the partner's relationship is also affected.

Discussion

Perceptions of psychological stress in the nursing profession can vary depending on the individual and the situation experienced. As a nurse, the high demands and responsibilities can be a significant source of stress. The following are some of the factors that can influence the perception of psychological stress in the nursing profession:

Workload: Nurses often face a high workload, with long hours and complex assignments. The increasing number of patients, the pressure to provide high-quality care, and the responsibility for patient safety can cause stress. **Uncertainty and Uncontrollability of the Situation:** Nurses are often faced with situations that are unexpected or uncontrollable, such as a patient's condition deteriorating suddenly. This uncertainty can cause psychological stress and increase the need to make quick decisions.

Interaction with Patients and Families: Nurses have an important role in providing emotional support to patients and their families. However, interactions with terminally ill patients, conflicts with family, or intense emotional situations can cause additional stress. **Lack of Resources:** Limited resources such as time, manpower, and facilities can cause stress for nurses. The inability to provide the desired care due to limited resources can be a source of frustration and stress.

Violence and Trauma: Nurses are often confronted with traumatic situations, including witnessing the physical and emotional suffering of patients. Verbal or physical violence directed at nurses can also cause psychological stress and affect their perception of work.

Work-Life Balance: The high work demands of the nursing profession can disrupt the balance between work and personal life. If caregivers find it difficult to meet their personal needs, such as family time or self-care, it can cause additional stress.

Perceptions of psychological stress in the nursing profession can also be influenced by individual factors, such as their level of experience, ability to deal with stress, and the social support they receive. It is important for caregivers to be aware of the stress they are dealing with and seek effective stress management strategies, such as relaxation exercises, social support, and good time management. Health care organizations can also provide employee support programs and implement policies that support the mental and emotional wellbeing of caregivers.

Conclusion

Based on the interviews with nurses at Daro Hospital, Sarawak, it is evident that there is a consensus among respondents regarding the presence and impact of psychological distress within the nursing profession. Here are some key conclusions drawn from the discussions:

Consistency in Perceived Stress Factors: Nurses unanimously identified factors contributing to work pressure, including excessive workload, time constraints, communication challenges, and lack of flexibility in tasks.

Variety of Work Pressure Experiences: While each nurse had their own experiences with work pressure, they all acknowledged its negative impact on their well-being, ranging from decreased performance and physical health issues to emotional disturbances and strained relationships. **Common Coping Strategies:** Nurses highlighted various strategies for handling work pressure, such as task delegation, seeking support from colleagues, avoiding bringing work home, and maintaining a balance between work and personal life.

Factors Influencing Stress Management: Individual factors like age, maturity, and motivation, as well as external factors such as workplace atmosphere, management support, and relationships with colleagues, were identified as crucial in determining one's ability to manage work pressure effectively.

Shared Responsibility for Stress Management: While the responsibility for managing work pressure was seen as both individual and organizational, there was a consensus on the

importance of collaboration between different parties, including management, supervisors, and colleagues, in addressing this issue.

Global Perspective on Nursing Stress: Respondents highlighted the universal nature of nursing stress, though perceptions on the severity varied. Some noted similarities with other countries in terms of excessive workload and challenging patient interactions, while others emphasized unique stressors inherent in nursing duties.

Impact on Individual and Work Environment: Psychological distress not only affects individual nurses' well-being and performance but also has broader implications for workplace dynamics, including relationships with colleagues, work atmosphere, and patient care quality.

Need for Support and Resources: It is crucial for healthcare organizations to recognize and address the psychological stress experienced by nurses by providing adequate resources, support programs, and policies promoting work-life balance and mental well-being. In conclusion, the findings from the interviews underscore the significance of acknowledging and addressing psychological distress within the nursing profession. By understanding the factors contributing to work pressure and implementing effective support systems, both individuals and organizations can strive towards a healthier and more sustainable work environment for nurses.

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