Stress and labor satisfaction in nursing, critical services of a clinic from Lima

Estrés y satisfacción laboral en enfermeros de servicios críticos en una clínica de Lima

ABSTRACT. Objectives: To determine the relationship between work stress and job satisfaction in nurses of the critical services of the International Clinic - Lima Headquarters. Methodology: Descriptive, non-experimental, correlational, quantitative approach study. The instrument used was Maslach Burnout Inventory to measure the level of work stress and La Font Roja to measure the level of job satisfaction. The sample consisted of 41 nurses who worked in the critical areas of ICU, emergency and urgency. Results: 46% of nurses show a high level of work stress; in the depersonalization dimension there is a high level of work stress in 39%, in job satisfaction dimension 76% of nurses presented a medium level, and there is high level 52% of job satisfaction. Conclusions: There is no relationship between level of stress and job satisfaction.

Keywords: Stress, satisfaction, work stress, job satisfaction, nurses, critical areas.

RESUMEN. Objetivo: Determinar la relación entre estrés laboral y satisfacción laboral en enfermeros de los servicios críticos de una clínica de Lima. Metodología: Estudio descriptivo, no experimental, correlacional, de enfoque cuantitativo. Se utilizó el Maslach Burnout Inventory para medir el nivel de estrés laboral y La Font Roja para medir el nivel de satisfacción laboral. La muestra estuvo constituida por 41 enfermeras que trabajaban en las áreas críticas de unidad de cuidados intensivos, emergencia y urgencia. Resultados: El 46% de enfermeros muestra un nivel alto de estrés laboral; en cuanto a las dimensiones, se encontró que según la dimensión despersonalización hay un nivel alto de estrés laboral en 39%, en cuanto a la dimensión satisfacción por el trabajo 76% de enfermeras presentaron un nivel medio; mientras que existe nivel alto 52% de satisfacción laboral. Conclusiones: No existe relación entre nivel de estrés y satisfacción laboral.

Palabras clave: Estrés, satisfacción, estrés laboral, satisfacción laboral, enfermeras, áreas críticas.

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INTRODUCTION

According to the World Health Organization (WHO), stress negatively influences the psychological and physical health of any worker and when stress is taken to a high level, it is called Burnout Syndrome, a state characterized by severe saturation that affects health and could lead the worker to a decrease in their work output.1

Nursing is one of the professions that suffers the greatest stress due to exposure to various biological and physical stressors due to inadequate working conditions, especially in Latin America. One study shows that nurses who work more than 5 years in difficult and painful situations, an unpleasant work environment, inadequate installations, lack of infrastructure and poor interpersonal relationships, have a high level of stress.3

On the other hand, job satisfaction is one of the pillars of working life quality. If one has a low level of satisfaction, it is evident that fatigue and monotony can damage the quality and quantity of work by incurring absenteeism or abandonment of work.4 Hence, there are studies that relate job satisfaction with Burnout syndrome in order to intervene in the search for quality in workplaces.5

It is not unknown, then, the fact that health professionals face situations that exceed the work for which they were prepared, thus, creating a stressful work environment where the quality of care provided is affected.6 As with nurses who work in clinics and hospitals, they face countless problems related to the care of the patient and family.7

This conclusion is admitted after consulting several international studies carried out in Ecuador, Colombia, and Spain8-12, in which, it is mentioned that 44.2% of the nursing staff presents labor stress and 23% presents Burnout syndrome; in addition, they conclude that the greater the satisfaction, the less stress and the better the quality of care.

Similarly, in Peru, studies conducted in Lima, Huancavelica, and Tarapoto found that 55% of nurses have middle levels of stress and that in turn, 28.3% are affected in their work performance.13-17

The term stress means to cause tension that generates a non-specific response of the organism, as a consequence of the imbalance between the demands of the environment and the resources available to the person. If these are usually answering that adapt to human physiology, it is called eustress; but if they are excessive (which the body does not support), it is called a distress.18 For the WHO, stress is a physiological reaction that prepares the organism for the action demanded by the environment; if it is produced in excess, overload of tension occurs; fact that causes the appearance of diseases that potentially impede the normal functioning of the organism.19 The causes and consequences of stress will depend on the resilience and personality of the nurse.20 Nevertheless, this profession tends to show chronic work stress due to overload and constant relationship with critical patients, problematic or anxious family members, death, pain; events that bring about Burnout syndrome.21

In view of the above and considering that job satisfaction is an indicator of the worker’s position in relation to his or her working environment; nevertheless, the current concern of health care institutions is the satisfaction of users with the quality of care, and they rarely worry about the satisfaction of their staff, especially nurses, who are often the face of the institution.22 A study was conducted to determine the relationship between stress and job satisfaction in nurses of critical services in a clinic in Lima. The information provided seeks to give importance to critical care nursing professionals who face complex situations arising from the criticality and complexity of patients; serving as a source of information to establish mechanisms to help cope with stress by reducing the risk of contracting occupational diseases.

MATERIALS AND METHODS

The study corresponded to the quantitative approach, non-experimental with cross-sectional design, and correlational descriptive level. The population consisted of 55 nurses from the critical services of a clinic in Lima during the 2017 period. The technique used for data collection was the survey and the instrument for measuring stress was the Maslach Burnout, which consists of 22 questions with 7 alternatives. In order to measure job satisfaction, the instrument was the Font Roja with 26 questions and 5 alternatives with 9 dimensions. The instruments were validated by expert judgement and obtained an average approval of 80%. A pilot test was carried out to determine reliability. The analysis of these results with Cronbach’s alpha obtained 0.812 for Maslach Burnout’s instrument and 0.771 for Font Roja.
RESULTS

Nurses in the critical services of a clinic in the city of Lima present, in a greater proportion, a 46% high level of job stress. High job stress is presented in the dimension of depersonalization (39% of nurses) and personal fulfillment (34% of nurses).

The highest percentage of critical care nurses have a middle level of job satisfaction (76%), while 12% have a low level of satisfaction. Similar behavior is repeated in the dimensions of job satisfaction (work-related stress, work-related pressure, career advancement, interpersonal relationship with upper members, interpersonal relationship with colleagues, extrinsic characteristics of job status and monotony); except in two of them. In terms of professional competence, 70% of nurses have low job satisfaction. While in the job satisfaction dimension, 52% of nurses present high satisfaction and only 2% indicate low satisfaction.
DISCUSSION

According to the study, the highest percentage of nurses in the Clinic’s critical services have a high level of job stress and a middle level of job satisfaction. These findings are similar to those found by Mancilla and Olarte in emergency nurses because 60.5% had high job stress, likewise the study conducted by Taipe in neonatal nurses shows that 45% have middle to high job satisfaction and 55% have a middle level of job stress. Different results were found by Torres in public sector nurses where the majority had 56.5% of a low stress level. Likewise, Conchago found 42% of middle stress level in emergency service nurses. Stress will negatively influence the psychological and physical health of nurses, and it may test their ability to withstand the situation. The high level of stress can be perceived when the nurse feels that she/he is working too much, feels tired and it is probably going to neglect priorities in the needs of the patients in her/his charge and at the same time, she/he could present psychosomatic manifestations, such as headaches, dizziness, vertigo, anxiety. The middle stress level would mean that although nurses feel emotionally exhausted, they can cope with stress through relationship and distraction techniques, this would indicate that in private institutions the pressure from managers to provide quality care is more constant. This situation could be contrary to public institutions where nurses do not work under excessive pressure and patients are not so demanding.

The middle job satisfaction, i.e. partial satisfaction, could lead to the assumption that the nurse can work in the different services without restrictions. Nevertheless, it must be remembered that job satisfaction is the affection that the nurse develops with her/his work environment, which will allow her/him to develop broadly. An unsatisfied nurse (even partially) is prone to health problems, but will also lead to poor care, absenteeism, and poor work performance. In this sense, the job dissatisfaction in the aspect of job competence calls the attention since the nurses are not going to feel comfortable at the time of developing their different functions; perhaps they do not come to feel comfortable in the area of work by the inadequate behaviors of competition between colleagues.

Although in the present study no significant relationship was found between the variables, there are previous studies that do demonstrate such a relationship, such as Figuereido, Grau and García, who found a relationship between both variables. This leads to a recommendation that the results of this study cannot be generalized, so it would be necessary to apply these instruments to larger samples and in studies with probability sampling.

In this study, as nurses working in a private clinic, the results would be explained under Peplau’s model of interpersonal relations as well as with Callista Roy’s theory in a model of adaptation. In order to first understand the behavior of nurses and their willingness to support others, the nurses are adapted to work in environments with high demands, fulfilling the assigned responsibilities and providing humanistic care regardless of the overload condition they perceive.

It can be concluded that, especially in critical areas, the nurse requires a pleasant environment and optimal conditions; with material, resources and adequate spaces to perform their daily tasks. The health institution is called to pay attention to the emotional well-being of its professionals, especially the nurses in these areas.

CONFLICTS OF INTERESTS: The authors declare that there are no conflicts of interests.
BIBLIOGRAPHIC REFERENCES


