

# Comparison of Stress Level Among Single and Double Jobber Nurses

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## Abstract

**Objective:** The aim of the study was to identify level of stress among nurses according to their job status. **Background:** Stress is highly associated with nursing profession. This stress is caused by several factors both personal and organizational such as educational level, gender, nature of work environment and work overload etc. These factors directly or indirectly expose nurses to a considerable level of stress. If a nurse works at two places, their stress level will predictably be much higher than that of those who work at a single place. **Methodology:** Quantitative analytical cross-sectional study design was applied in a private tertiary care hospital at Peshawar, Pakistan. Study population included all nurses working in the mentioned hospital. Universal sampling technique was used for double jobber nurses, while convenient sampling technique was used for single jobber nurses. An adopted questionnaire was used for data collection. Chi-square test was applied to analyze the data. **Result:** Among double jobber nurses, 23.33% had severe, 63.34% had moderate, and 13.33% had mild level of stress. On the other hand, there was no severe level of stress among single jobbers; only 20% had moderate and 80% had mild level of stress. **Conclusion:** The current study identified that level of stress was higher in double jobber nurses as compared to single jobber nurses. The study would have been more generalizable if more tertiary care hospitals were included for data collection.

**Keywords:** Stress level of nurses; Stress related to job status of nurses; Nurses' job and level of stress; Burnout in nurses; Stress due to organizational factors.



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## 1. Introduction

Research has shown that mild to moderate stress is a normal part of human life [1]. According to Mohite, *et al.* [2] "Eustress" is a mild and normal level of stress that is essential for routine life, but if stress level increases, and if it remains continuous and happens repeatedly, it becomes "Distress," which can then lead to physical illness as well as psychosocial distress.

Due to certain factors, nursing professionals are generally more exposed to stress than any other professionals. Such factors include: the work environment, workload, different organizational characteristics and psychosocial aspects associated with nursing profession [3, 4]. The prevalence of more stress in nursing leads to different consequences like affecting job performance and disruption of psychosocial life [5]. As researchers of this study, we had noticed that nurses, who work for longer hours or visit two different organizations, always remain panicked, short tempered and less social. In one of the hospitals, staff members were observed sleeping during duty timings as they were supposed to report to another job placement after that duty; that ultimately affected patient care. If such stress is not managed or avoided, patient care, personal and social life of a nurse, job motivation and satisfaction, and many other aspects of life and health can be affected.

Hence, the nurses comparatively face more stress than other professionals. If they do double jobs, this can be hypothesized that their stress level will be presumably higher than those doing single job.

The main goal of this study was to identify level of stress among nurses according to their job status and to compare level of stress between single and double jobber nurses. Research questions of the study were as followed:

Do nurses have any stress regarding their job status?

Do double jobbers have higher stress level than single jobber nurses?

This study would appear to reveal stress level among nurses regarding their job status. Consequently, this study might help higher authorities in making policies to reduce stress level of nurses.

## 2. Literature Review

Work or job related stress is defined as stimuli that may lead to physical, behavioral or psychological consequences that affect both health and wellbeing of employee and reputation of organization [6, 7].

A person who works and provides services to one organization is known as single jobber. On the other hand, a nurse holding full time staff position in one department and also having additional appointment in another organization or attending classes at alternate timings are considered as double jobbers.

A cross-sectional study, conducted in Karachi, Pakistan, showed that 61.5% of nurses had high level of stress because of their long working hours [8]. Similarly, a study conducted on a sample of 225 nurses in Yazd, showed that 73.4% of nurses had severe stress due to high work load [9]. Also, a quantitative cross-sectional study showed that nurses reported moderate (51%) to severe (3%) level of job-related stress in India [10]. The above mentioned findings show that stress could be of different levels but its occurrence is quite prevalent in nursing profession.

“Stress has strong association with poor mental and physical health” [11]. Moreover, it has been established that effect of stress could lead to well-known risk factors like physical inactivity, tobacco use, alcohol addiction and social isolation [5, 12]. Occupational stress has high impact on person's health such as bodily pain and feeling of fatigue at work [13].

A quantitative cross-sectional study conducted by Mosadeghrad, *et al.* [14], showed that major sources of stress were inadequate pay, inequality in work distribution, high workload, staff shortage, time pressure, job insecurity, extra work and responsibilities, and unjust long working hours. Likewise, other studies have identified that patient work overload and full week work affected nurses' stress level [15, 16]. Also, high workload and lack of management support with employees were included in key causes of job related stress [17]. Long working hours, care of critical patients, and emotional suffering in health environment may add to severity of stress level in nurses [18]. On the other hand, a correlational descriptive study has identified that ‘social support from co-workers enhanced the level of reported job performance and decreased the level of reported jobs stress’ [19]. Hence, stress occurrence is expected in nursing profession, but its level can be minimized through different strategies.

### 2.1. Literature Gap

The above mentioned literature review shows that only one study has been conducted on stress level in nurses. Also, to the researchers' knowledge, all previous studies have been conducted on stress among nurses regardless of their job status. Thus, to the extent of literature review conducted by researchers, there is no study conducted that explains the prevalence of stress level related to job status among nurses. Therefore, the current study has been planned as first of its kind study in the country, and the study is titled as “Comparison of Stress Level among Single and Double Jobber Nurses”.

## 3. Methodology

Quantitative, analytical cross-sectional study design was used in this study. In cross-sectional study, data are collected from sample and measured in single point of time. According to policy of institution, the study was conducted in a short period of time; therefore, the particular study design was preferred for the project. Study was conducted during March and April 2018.

The study population included nurses according to their job status i.e. single jobber and double jobber nurses in a private tertiary care hospital, Khyber Pukhtoonkhwa, Pakistan.

Sample size was calculated by Raosoft. 95 % of confidence interval and 5 % margin of error were considered. Sample size was 60 in population size of 210. 30 participants were taken as single jobber and 30 as double jobber nurses.

Universal sampling technique was used for double jobber nurses while convenient sampling technique was used for single jobber nurses because it was less time consuming, inexpensive and easy to approach the participants.

Data were collected by using a modified questionnaire developed after merging two stress scales; one was perceived stress scale adopted from Cohen, *et al.* [20] and second was stress management scale adopted from Emmons and Rollnick [21]. Prior to implementation, questionnaire was checked by three Assistant Professors and their expert driven pretest feedback was implemented accordingly. Questionnaire was consisted of seventeen questions representing the level of stress among nurses because of their job status.

Before collecting data from staff nurses, permission letter was signed from Chief Nursing Services (CNS). Informed consent was given to each participant and was also verbally explained. Confidentiality and anonymity of the participants was maintained throughout the study. Besides, nurses working as single or double jobber for minimum three months were included in this study. In addition, regular students who were also working as single jobber were included as double jobbers.

## 4. Findings

Among 60 participants, 26 were male and 44 were female (shown in table no 1). Mean age of the participant was  $25.8 \pm 5.928$ .

**Table-1.** Gender distributions in study sample

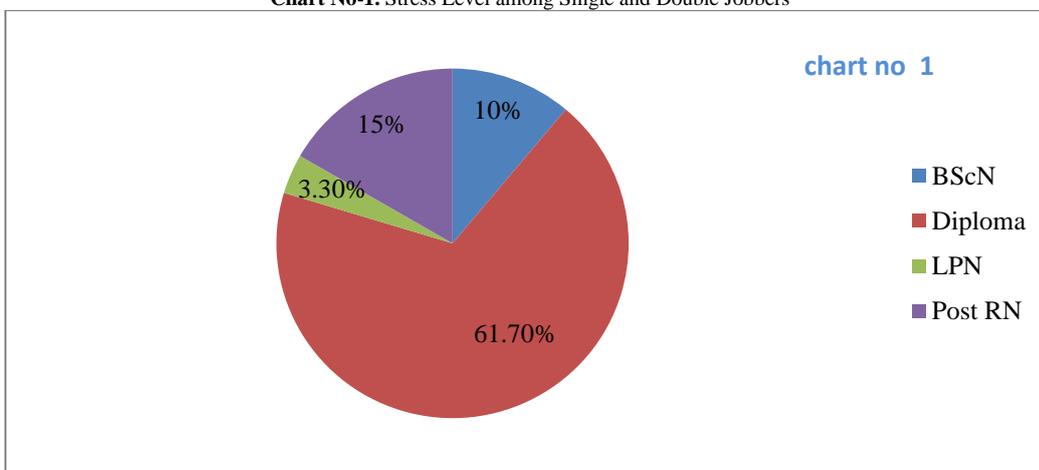
Gender	Frequency	Percent
Male	16	26.7%
Female	44	73.3%
Total	60	100%

Besides, 30 participants were single jobber nurses who were working in private hospital, while 30 participants were double jobber nurses in which seven nurses were working in two different private hospitals, and 23 nurses were working as one shift in private and another shift in government hospitals (shown in table no 2). Moreover, 10 % participants were BSN degree holders, 61.7% participants were Diploma holders, 3.3% participants were LPN and 15% participants were Post RN BScN degree holders (Shown in chart no 1)

**Table-2.** Department or Organization

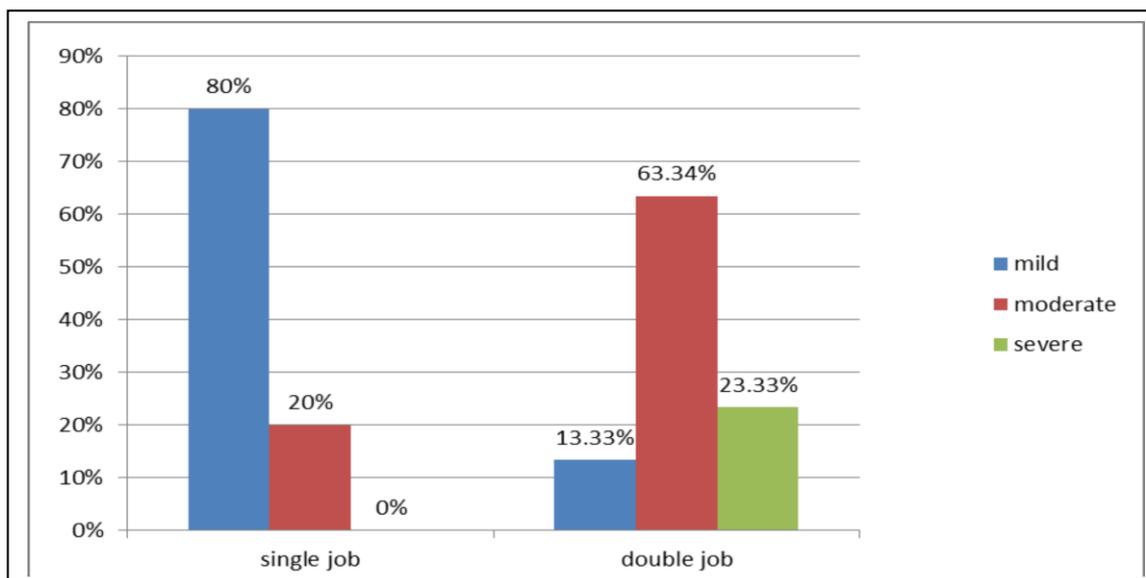
Department or Organization	Job Status		Total
	Single Jobber	Double Jobber	
Private Only	30	7	37
Private & Government both	0	23	23
Total	30	30	60

**Chart No-1.** Stress Level among Single and Double Jobbers



Stress scale was obtained to identify the level of stress. Score from 1-3 was considered as mild level of stress; 4-6 moderate and 7-10 as severe level of stress. Chi-square test was applied to check association between job status and level of stress. Among single jobbers, 80% had mild level of stress, 20% had moderate level of stress, while no one had severe level of stress. On the other hand; among double jobbers, 13.33% had mild level of stress, 63.34% had moderate level of stress, while 23.33% had severe level of stress (Shown in chart no 2).

**Chart No-2.** Level of stress



## 5. Discussion

The Current study identifies that double jobbers have higher stress level than that of single jobbers. A study previously conducted on stress level of nurses has identified that workload leads to higher stress in nurses [8]. Similarly, studies have also identified that factors like age, excessive responsibility of care provision, lack of management support and consistent work may increase the level of stress among nurse [9, 15, 16]. The above mentioned factors may be associated with current study's finding as a double jobber nurses face more of such factors than single jobber nurses; thus turning double jobber nurses to face higher stress than single jobbers.

The scope of current study could not measure specific factors leading to higher stress in double jobbers; therefore, further explanation of the topic is required.

## 6. Conclusion

The study was conducted to compare level of stress among single and double jobber nurses. The study results identified that 23.33% double jobber nurses had severe stress, 63.34% had moderate stress; while, among single jobber nurses, 80% nurses had mild stress and 20% had moderate stress levels. Hence, the study showed that double jobbers had higher level of stress as compare to single jobber nurses.

One of the strengths of this study was conducting the procedure under close supervision of senior researchers. Also, the study was conducted in due time which was given for conducting the project. This type of study has been conducted for the first time in Pakistani context.

Among limitations, convenient sampling technique and conduction of study in one private tertiary care hospital might have affected generalizability of the findings.

Based on finding, few recommendations are set forth. Public health sector management should offer attractive salaries that may ultimately lead to lesser need of double jobs. Hospitals should hire sufficient staff to reduce workload on nurses. Nurses should have assistants as they may help in many ways.

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