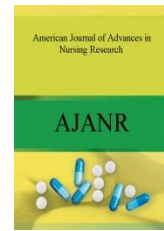




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PERCEIVED STRESS AMONG NURSES WORKING IN PSYCHIATRIC UNIT

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ABSTRACT

Stress in the workplace has become a significant concern, particularly in healthcare settings, where psychiatric nurses are uniquely vulnerable to stress due to the nature of their work. The study was undertaken to assess the perceived stress among nurses working in the psychiatric unit. The objectives were to assess the perceived stress and to find the association of perceived stress with selected demographic variables. Using convenience sampling technique, 20 nurses working in the psychiatric unit at tertiary care hospital in Ernakulum district were enrolled in the study. Sociodemographic proforma and perceived stress scale were used to collect the data. Findings of the study showed more than half of the nurses 55% had moderate perceived stress, and only 45% had low perceived stress. The mean score for perceived stress is 12.5 ± 6.4 . Among the selected socio-demographic variables, age ($\chi^2=11.021$, $p=0.00271$), type of family ($\chi^2=3.2997$, $p=0.0379$), marital status ($\chi^2=8.2155$, $p=0.0106$) and years of experience ($\chi^2=13.388$, $p=0.00053$) was found to be significantly associated with perceived stress.

INTRODUCTION

Stress in the workplace has become a significant concern, particularly in healthcare settings, where employees are often exposed to high demands and emotionally taxing situations. Among healthcare professionals, psychiatric nurses are uniquely vulnerable to stress due to the nature of their work. They manage patients with mental illnesses, often in acute distress or crises, which requires both physical and emotional resilience. The intensity of their responsibilities, coupled with the need for constant vigilance and empathy, makes them susceptible to high levels of perceived stress [1].

Kerala, the healthcare sector, especially tertiary care hospitals, plays a pivotal role in addressing the

increasing burden of mental health disorders. As per the “Healthy people program” (2007) prevention of problems of diabetic foot are the major goal. Peripheral In Nurses in psychiatric wards are exposed to challenges such as aggressive patient behaviors, stigmatization of mental health conditions, limited resources, long working hours, and high patient-nurse ratios. These stressors can adversely affect their physical health, mental well being, job satisfaction, and the quality of care they provide. [2, 3] Central Kerala, known for its well-established healthcare systems and tertiary care hospitals, serves as a critical region for studying occupational stress among psychiatric nurses. Cultural factors, healthcare policies, and the patient demographic in this region may uniquely influence the stress levels of nurses. Understanding their perceived stress levels is crucial for developing effective

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Research Article



interventions, improving their mental wellbeing, and ensuring high-quality patient care [4].

Research highlights that prolonged occupational stress among nurses can lead to burnout, absenteeism, and high turnover rates. Additionally, stress may impair critical thinking, decision making, and therapeutic communication skills, which are essential in psychiatric care. Despite the growing awareness of occupational stress among healthcare professionals, studies focusing on psychiatric nurses in Kerala are limited, making it crucial to explore this area in depth [5, 6].

This study aims to assess the perceived stress levels among psychiatric nurses in tertiary care hospitals in central Kerala. By identifying stressors and their impact, the research seeks to contribute to better workplace strategies, enhance job satisfaction, and support mental health among this vital group of healthcare workers [7].

Nurses working in psychiatric wards face unique challenges due to the complex nature of mental health care. Managing patients with severe psychiatric disorders often involves dealing with unpredictable behaviors, emotional exhaustion, and stigmatization. This can lead to heightened occupational stress, which, if not addressed, may result in burnout, reduced job satisfaction, and compromised patient care quality [8].

In Kerala, the rising prevalence of mental health issues has increased the demand for psychiatric care in tertiary hospitals, placing additional pressure on nursing staff. Despite their critical role, limited studies have been conducted to assess the perceived occupational stress among psychiatric nurses in central Kerala. Understanding their stress levels, triggers, and coping mechanisms is essential for designing effective interventions that can enhance their wellbeing and improve patient outcomes [9].

Statement of the problem

A descriptive cross-sectional study to assess the perceived stress among nurses working in the psychiatric unit at Ernakulam District.

Objectives

1. To assess the perceived stress among nurses working in the psychiatric unit
2. To find the association of perceived stress with selected socio demographic variables.

Operational definitions

Perceived stress: refers to the subjective feelings and thoughts of a psychiatric nurse about the level of stress experienced in life and at work, specifically relates to the challenges of providing care to individuals with mental health issues which is evaluated using the

Perceived Stress Scale.

Nurses: refers to the registered nurses who are working in the psychiatric unit for more than 6 months and providing comprehensive care to the patients who are suffered from mental health issues.

Psychiatric unit: refers to the specialized area of S3, K3 and F&G wards of M.O.S.C Medical College Hospital, that provide treatment and support for an individual to overcome mental illness to maintain personal and social life.

Assumptions

- Perceived stress may vary among the nurses who are working in the psychiatric unit

Hypotheses

H_{A1}) There is significant association between perceived stress and selected demographic variables among nurses working in the psychiatric unit

MATERIALS AND METHODS

Research approach

The approach used in the present study was quantitative non-experimental approach

Research design

The research design used was descriptive cross-sectional design

Variables

Outcome variables: Perceived stress

Sociodemographic variables: Gender, age in years, religion, type of family, marital status, qualification and years of experience

Setting of the study

S3, K3, and F&G wards of M.O.S.C. Medical College Hospital, Kolen Chery, Ernakulum District

Population

Target population

Nurses who are working in the psychiatric units in Ernakulam District

Accessible population

Nurses who are working in S3, K3, and F&G wards of M.O.S.C Medical College hospital, Kolenchery in Ernakulam District.

Sample

Nurses who are working in S3, K3 and F&G wards of M.O.S.C Medical College hospital, Kolenchery, in Ernakulam District who met the inclusion criteria.

Sampling technique



Nonprobability convenience sampling technique

Sample size

Based on the results of previous study conducted by Davood E et al¹³, the sample size was estimated statistically based on estimation of mean using the formula $n = \frac{(Z_{1-\alpha/2})^2 S^2}{d^2 \mu^2}$ where, σ – Relative Standard deviation, d – Absolute precision, $Z_{1-\alpha/2}$ – Statistical table value. When, $Z_{1-\alpha/2} = 1.96$, $d = 10\%$ of mean, Mean \pm SD = 47.95 \pm 10.09 and $n = 17$. Therefore the sample size is 20 nurses who were working in the psychiatric unit.

Sample selection criteria

Inclusion criteria

- a. Nurses who are working in the psychiatric unit
 - Nurses who have the years of experience in psychiatric unit for 6 months and more
 - Nurses who are still working in the psychiatric unit
- b. Exclusion Criteria
 - Nurses who are presently working in the other department for last 1 month
 - Tools and techniques

Tool 1

Sociodemographic proforma

Socio demographic proforma include socio demographical characteristics of nurses who are working in the psychiatric unit. The socio demographic proforma consisted of 7 items that includes gender, age, religion, type of family, marital status, educational qualification and years of experience.

Tool 2

Perceived stress scale

It is a standardized scale developed by Sheldon Cohen in 1983. This scale measures perceived stress by asking about feelings and thoughts during the last 1 month. The scale has 10 items. Each item of the scale has 5 -point options (0-never to 4- very often). The scale ranges from 1-40 with higher scores indicating higher perceived stress. Scores ranging from 0-13 would be considered low stress, scores ranging from 14-26 would be considered moderate stress and scores ranging from 27-40 would be considered high perceived stress. The reliability of the tool was established by using Cronbach's Alpha method and the tool was found to be reliable with $r = 0.78$.

Ethical clearance

The investigator has considered the following ethical principles while proceeding with the project. This study protocol was approved by the Institutional Ethics

Committee of M.O.S.C. Medical College Hospital, Kolen Chery. Formal administrative permission was obtained from the Administrative Director, M.O.S.C Medical College Hospital and Principal, M.O.S.C College of Nursing. A letter explaining the purpose of the study was handed over to the study subjects and informed written consent was taken from the participants before data collection. Confidentiality and anonymity of the data were ensured using subject coding system.

Data collection procedure

The study was conducted after obtaining ethical clearance from the institutional ethics committee. Formal administrative permission was obtained from the Administrative Director, M.O.S.C Medical College Hospital. Total of 20 subjects who fulfilled the inclusion criteria were selected by convenience sampling technique from the psychiatric setting of M.O.S.C. Medical College Hospital, Kolen Chery, Ernakulum district. After a brief self-introduction, the subjects were explained regarding the purpose of the study. The subjects were allowed to read the participant information sheet and made provision to clarify the doubts. Following this, informed consent was obtained from the participants. After that, sociodemographic data was collected by using sociodemographic proforma. Following this, perceived stress was assessed using the Perceived stress scale. Confidentiality and anonymity were ensured during and after the study. Data were collected in the month of December 2024. Approximate time taken for data collection from each client was 5 – 10 minutes. The investigator thanked each subject for their cooperation for the study.

Plan for data analysis

The data were analyzed by using R software. Socio demographic variables and study variable were presented in terms of frequency and percentage. Continuous variables were summarized using mean and SD. Chi-square test/Fishers' exact test were performed to determine the association of self-esteem and demographic variables. Data were presented using tables and figures.

Analysis and Interpretation

Description of sample characteristics among nurses working in psychiatric unit

All nurses 100% were females. Among the nurses most of them 45% belongs to the age group of 21 – 30 years and all of them 100% were followed Christian religion. Among the nurses, 75% were belongs to nuclear family. More than half of the nurses 60% were married, and 60% had educational qualification of G.N.M. Most of them 55% have years of experience more than 11 years. (Table: 1).



Perceived stress among nurses working in psychiatric unit

Perceived stress was presented in terms of frequency and percentage distribution. Mean and standard deviation were computed as the data followed normal distribution. 55% had moderate perceived stress, while 45% had low perceived stress, and nobody experienced high perceived stress. The mean score for perceived stress is 12.5 ± 6.4 . (Figure 1).

To determine the association of perceived stress with sociodemographic variables among nurses working in psychiatric unit Chi – square and Fisher's exact test were performed to determine the association of perceived

stress with selected demographic variables like gender, age, religion, type of family, marital status, educational qualification and years of experience. Perceived stress score was categorised as low stress (0-13), moderate stress (14-26) and high perceived stress (27-40).

The observation showed that age ($\chi^2=11.021$, $p=0.00271$), type of family ($\chi^2=3.2997$, $p=0.0379$), marital status ($\chi^2=8.2155$, $p=0.0106$) and years of experience ($\chi^2=13.388$, $p=0.00053$) were associated with perceived stress. The null hypothesis was rejected with regard to the variable of age, type of family, marital status and years of experience. (Table:2).

Table 1: Frequency and percentage distribution of socio demographic variables among nurses working in psychiatric unit (n=20)

Sl no:	Socio personal variables		Frequency (f)	Percentage (%)
1.	Gender	Male	0	0
		Female	20	100%
2.	Age in years	Below 20	6	30%
		21 - 30	9	45%
		31 - 40	5	25%
		41 and above	0	0
3.	Religion	Hindu	0	0
		Christian	20	100%
		Muslim	0	0
4.	Type of family	Nuclear Family	15	75%
		Extended family	5	25%
		Joint Family	0	0
5.	Marital status	Married	12	60%
		Unmarried	6	30%
		Divorced/separated	2	10%
		Widow / Widower	0	0
6.	Education qualification	G.N.M	12	60%
		B.Sc. Nursing	8	40%
		M.Sc. Nursing	0	0
7.	Years of experience	< 1 year	6	30%
		1– 5 years	0	0
		6 – 10 years	3	15%
		11 years and above	11	55%

Table 2 Association of perceived stress with selected socio demographic variables (n=20)

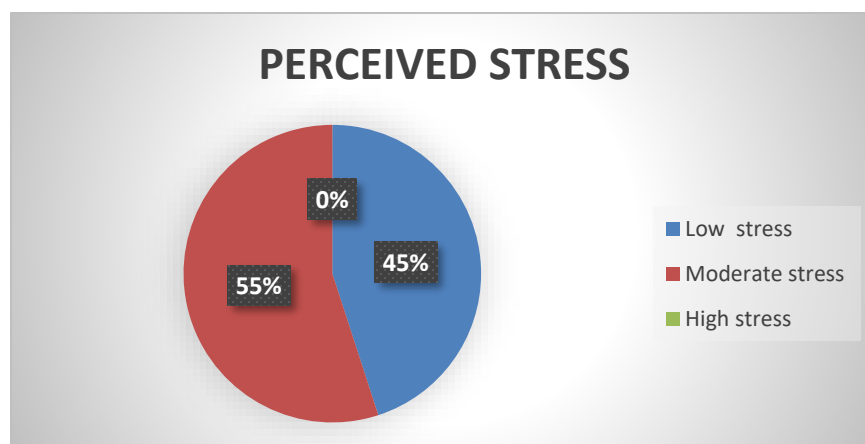
Sl. no	Sociodemographic variables	Perceived stress			Chi square /Fisher's exact	p value
		Low	Moderate	High		
	Gender				0.2	0.6547
	Male	0	0	0		
	Female	9	11	0		
	Age in years				11.021	0.00271*
	Below 20	0	6	0		



Sl. no	Sociodemographic variables	Perceived stress			Chi square	p value
	21 – 30	4	5	0		
	31 – 40	5	0	0		
	Religion				0.2	0.6547
	Christian	9	11	0		
	Type of family				3.2997	0.0379*
	Nuclear family	9	6	0		
	Extended family	0	5	0		
	Marital status				8.2155	0.0106*
	Married	7	5	0		
	Unmarried	0	6	0		
	Divorced / Separated	2	0	0		
	Educational Qualification				1.0185	0.197
	G.N.M	7	5	0		
	B.Sc. Nursing	2	6	0		
	Years of experience				13.388	0.00053*
	< 1 year	0	6	0		
	1– 5 years	0	0	0		
	6 – 10 years	0	3	0		
	11 years and above	9	2	0		

Significant at $p < 0.05$

Figure 1: Pie diagram depicting the percentage distribution of perceived stress among nurses working in psychiatric unit (n = 20).



DISCUSSION

The present study revealed among the nurses 55% had moderate perceived stress, while 45% had low perceived stress, and nobody experienced high perceived stress. The mean score for perceived stress is 12.5 ± 6.4 . The present findings are supported by Hamaideh SH et al. The study found that the total mean score of the perceived stress was 22.73 (SD = 3.54) indicating a moderate level [10].

The present study found that there is significant association of age ($\chi^2=11.021$, $p=0.00271$), type of family ($\chi^2=3.2997$, $p=0.0379$), marital status ($\chi^2=8.2155$, $p=0.0106$) and years of experience ($\chi^2=13.388$, $p=0.00053$) with perceived stress. The present

findings were supported by the findings of Opoku Agyemang S et al. the study found that a negative association existed between educational level and stress [11]. Another study supported the findings conducted by Conradie M et al. The study found that most participants were aged between 46 and 55 (41.2%), female (93.2%) and black (93.2%), and 76.7% had children or dependant minors. The main stressors among participants were pressure providing financially for their children and dependant minors (71.2%), caring for them (39.4%) and fearing them moving away (25.8%) [12].

Nursing implications

The present study has significant implications in



the field of nursing administration, nursing education, nursing practice, and nursing research.

Nursing administration

- Collaborate with governing bodies in formulating policies to employ stress relieving work environment for nurses in a psychiatric unit
- Develop psycho-education protocols for educating the nurses to managing their stress.
- Train the nurses who are working in the psychiatric units to identify the stress inducing factors and to provide them adequate support and education.
- Adapt the screening tools used in the study for screening the perceived stress among nurses working in the psychiatric unit.

Nursing education

- Train the student nurses to identify the factors affecting perceived stress among nurses working in the psychiatric unit based on which appropriate training to manage the stress.
- Train the nursing students to use the screening tools to gain adequate knowledge in assessing perceived stress among nurses working in the psychiatric unit and thereby providing training the nurses regarding how to improve their coping strategies which results in long term positive outcome.

Nursing practice

- Identify the areas where the nurses need more help, support and confidence building.
- Identify the hidden factors that make high stress among psychiatric nurses and can refer them to an appropriate support system.
- Implement employee focused training programs to

improve coping abilities of the psychiatric nurses.

- Can play a supportive role in psychiatric nurses in the unit for their emotional issues.

Nursing research

Based on the findings of the present study, nurses can undertake interventional studies to understand the effectiveness of strategies designed for improving stress management. The findings of the present study can be considered as a cornerstone for future researches.

Recommendations

- Similar studies can be conducted in different settings.
- A comparative study regarding perceived stress among nurses working in the psychiatric units and other patient care units.
- A qualitative study can be conducted to assess perceived stress among nurses working in the psychiatric unit
- Interventional studies can be undertaken to assess the effectiveness stress management strategies in alleviating the perceived stress of nurses working in the psychiatric unit.

CONCLUSION

Study has its importance in the present scenario of rising prevalence of mental health issues has increased the demand for psychiatric care in tertiary hospitals, placing additional pressure on nursing staff.

The result of the study showed that more than half of the nurses working in the psychiatric unit (55%) had moderate perceived stress. There is significant association of perceived stress with selected demographic variables.

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