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Assessment of Coping Strategies for Nursing Teachers Regarding Work Stress at Cairo Health Directorate Nursing Schools

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Abstract

Background: Coping with work-related stress is crucial for nursing teachers, who often face significant occupational challenges that can lead to burnout and decreased job satisfaction. Effective coping strategies can enhance their resilience and overall well-being. Aim: This study aimed for assessment of coping strategies for nursing teachers regarding work stress at Cairo health directorate nursing schools. Research design: A descriptive design was used in this study. Setting: 14 nursing schools (schools of nursing affiliated to Cairo health directorate). Sample: Convenient sample equal 100 nursing teachers. Tool of data collection: One tool included four parts, 1st part: Demographic characteristics, 2nd part: Nursing teacher's health status, 3rd part: Work stress assessment, 4th part: Work stress coping strategies assessment. Results: 60 % of the studied nursing teachers had poor total assessment regarding work stress and 12 % of them had good total assessment regarding work stress. While, 70 % of them had negative total coping strategies, 30 % of them had positive total coping strategies toward work stress. Conclusion: Less than two third of the studied nursing teachers had poor total assessment regarding work stress, and more than quarter of them had average total assessment regarding work stress. More two third of the studied nursing teachers had negative, less than one third of them had positive total coping strategies toward work stress. There was highly statistically significant relation between studied nursing teachers' total coping strategies, total work stress level and all items of demographic characteristics. Recommendations: Provide health education program for nursing teachers about coping strategies regarding work stress.

Keywords: Assessment, Cairo Health Directorate, Coping Strategies, Nursing Teachers, Nursing Schools, and Work Stress

Introduction

Nursing teachers play a crucial role in shaping the future of healthcare by educating and inspiring the next generation of nurses. Nursing teacher possess a unique blend of clinical expertise and pedagogical skill, enabling them to impart knowledge effectively while fostering critical thinking and compassion in their students. These educators not only teach essential nursing skills and theoretical concepts but serve as mentors and role models, guiding students through the complexities of patient care and ethical decision-making. Their dedication to cultivating a supportive learning environment empowers aspiring nurses to develop confidence, competence, and a lifelong commitment to learning in the ever-evolving field of healthcare (*Farber et al.*, 2023).

Nursing teachers often face significant work stress due to the demanding nature of their roles in both education and clinical practice. Balancing the responsibilities of teaching, mentoring, and assessing students while also maintaining their own clinical skills can be overwhelming. The pressure to stay current with evolving medical practices and educational methodologies adds another layer of stress, as does the emotional toll of guiding students through challenging subjects and real-life patient scenarios (*Mohammed et al.*, 2023). Additionally, nursing educators may encounter large class sizes, limited resources, and administrative burdens that further complicate their workload. This combination of factors can lead to burnout, anxiety, and a sense of inadequacy, ultimately impacting their well-being and effectiveness in shaping competent, compassionate future nurses (*Dugger*, 2024).

The job stress of clinical nursing teachers was relatively high. The degree of life stress all over the world was mild (38.05 %), moderate (60.49 %), and severe (1.46 %). Clinical nursing teachers showed mild to moderate occupational





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burnout. Life stress and job stress were predictors of occupational burnout. Nursing teachers play a key role in preparing and training of the future nurses and responsible to meet standard competencies for the graduate student, while are facing many stressors in the daily in class and clinical teaching of the students. These stressors include various sources and different severities that result in teacher's burnout or other poor consequences if stress was not managed effectively and adequate coping strategies applied (*Farsi et al.*, 2021).

Stress levels for nursing teachers during teaching can vary significantly depending on several key factors, including classroom size, student engagement, and the complexity of the subject matter. When faced with large classes, educators may feel overwhelmed by the challenge of providing individualized attention and support to each student, leading to heightened stress (*Stephens & Clark*, 2024). The intensity of nursing curricula, which often includes high-stakes assessments and practical skills training, can create pressure for both students and teachers. The emotional demands of teaching sensitive topics, such as patient care ethics or mental health, can also contribute to stress levels, especially when teachers must navigate difficult discussions or support students facing personal challenges (*Vauhkonen et al.*, 2024).

Coping strategies for work stress facing nursing teachers are essential for maintaining their well-being and effectiveness in the classroom. One effective approach is to establish a strong support network, both within and outside the educational institution, allowing educators to share experiences, seek advice, and foster camaraderie with colleagues who understand the unique challenges of their roles (*Todaro-Franceschi*, 2024). Mindfulness practices, such as meditation, deep breathing exercises, or yoga, can help nursing teachers manage stress by promoting relaxation and mental clarity. Additionally, setting clear boundaries between work and personal life is crucial; prioritizing self-care and scheduling regular breaks can prevent burnout and enhance overall job satisfaction (*Alilyyani et al.*, 2024).

Community health nurses (CHN) play a vital role in supporting nursing teachers in their coping strategies for work stress by providing holistic care that encompasses both physical and mental well-being. By organizing wellness programs and workshops focused on stress management techniques, as mindfulness, exercise, and healthy living, community health nurses can empower educators to adopt healthier lifestyles that mitigate the effects of stress (*Jarosinski et al.*, 2022). CHN serve as advocates for mental health awareness, encouraging nursing teachers to recognize the importance of seeking help when needed and promoting access to counseling services. Additionally, community health nurses can facilitate peer support groups where nursing educators can share their experiences and coping strategies, fostering a sense of community and reducing feelings of isolation (*Al-Zoubi et al.*, 2024).

Significance of the study

Work stress of clinical nursing teachers was relatively high. The degree of life stress all over the world was mild (40.2%) and severe (4.6%). Clinical nursing teachers showed mild to moderate occupational burnout. Around 41.0% of nursing teachers report feeling extreme stress in Egypt that result high workload, emotional demands, complexity of the nursing curriculum, lack of institutional support, and impact of student behavior and classroom dynamics can contribute to stress levels, as nursing teachers must navigate diverse student needs and varying levels of engagement, which can affect their overall job satisfaction and mental health (*Moon et al.*, 2024).

The number of stressed nursing teachers in United States (US) is 35 %, that's 20 % lower than the percentage of Americans who have stress. Around 33 % of nursing teachers report feeling extreme stress in Egypt that result the role of work environment characteristics, job stress, indicated that big test, laboratory demonstrations, or clinical rotations, work environment characteristics lack of involvement, lack of work cohesion, lack of supervisor support, lack of autonomy, work pressure, lack of physical comfort and lack of innovation (*Sheu et al.*, 2022).

Assessing coping strategies for nursing teachers at Cairo Health Directorate Nursing Schools is crucial to identify how they manage work-related stress, which can directly impact their teaching effectiveness and student outcomes. Understanding these strategies can help pinpoint areas where support and resources are needed, ultimately fostering a healthier work environment. This assessment can also reveal best practices that can be shared among educators, enhancing their resilience and promoting overall well-being in the high-pressure field of nursing education. By delving into these strategies, we aim to provide targeted interventions that can lead to sustainable improvements in both teacher satisfaction and student learning.

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Aim of the study

This study aimed for assessment of coping strategies for nursing teachers regarding work stress at Cairo health directorate nursing schools through the following objectives:

- 1-Assessing nursing teachers' work stress level.
- 2- Determining nursing teachers' work stress coping strategies.

Research questions:

- 1-What are nursing teachers' work stress coping strategies?
- 2-What is nursing teachers' work stress level?

SUBJECTS AND METHODS:

Research design:

A descriptive research design was applied to achieve the aim of the study.

Study setting:

This study was conducted in 14 nursing schools (schools of nursing affiliated to Cairo health directorate).

Type Sample: A convenient sample was used in this study.

Sampling: The total number of all nursing teachers work in Cairo Health Directorate Nursing Schools equal 100 nursing teachers.

Inclusion Criteria:

- 1- Nursing teachers,
- 2- Have more than one year of experience in teaching,
- 3- Accept to participate in the study.

Tool for data collection:

Data was collected using the following one tool:

Tool: A structured interviewing sheet: This tool was developed by investigator after reviewing article, magazine, and periodic book to assess nursing teachers' work-related stress level, it consisting of four parts as the following:

Part (1): Demographic characteristics of nursing teachers included 12 items such as sex, age, marital status, number of family members, level of education, monthly income.

Part (2): Health status of nursing teachers included 8 closed ended question such as suffer from chronic diseases, number meals do eat daily, eat healthy food, average hours of sleep per day.

Part (3): Work stress assessment consisted of 8 sub items as:

- **A- Work stress assessment for general knowledge regarding work stress included 8 closed ended question as** meaning of work stress, cause of work-related stress, types of work-related stress.
- **B- Work stress assessment for work requirements included 8 closed ended question as** at work, asked to do things that are difficult to combine, have deadlines to complete unattainable tasks.
- C- Work stress assessment for extent of control over the work included 6 closed ended question as decide when to take a break, have a voice in determining the pace of own work.
- **D- Work stress assessment for supporting superiors included 5 closed ended question as** receive supportive comments on the work do, rely on direct manager to help solve a work problem.
- E- Work stress assessment for support colleagues included 4 closed ended question as the work gets complicated, colleagues will help, colleagues are willing to listen to work-related problems.

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- **F- Work stress assessment for relationships within work included 4 closed ended question as** exposed to personal harassment in form of unkind words or behavior, there is tension or anger among colleagues.
- **G- Work stress assessment for roles within work included 5 closed ended question as** clear about what others expect of at work, know how to get work done, clear about duties and responsibilities.
- **H- Work stress assessment for change at work included 3 closed ended question as sufficient opportunities to inquire from managers about the change at work.**

Scoring system:

Each statement was assigned score according to nursing teachers' response were: complete correct was scored 2 grades, incomplete correct was scored 1 grade and wrong or don't know was scored 0. Total score were 86 grades from 43 questions. The total scores each item summed up and then converted into percent score as the following:

- Poor knowledge (< 50 %) = < 43 grades, was considered poor.
- Average knowledge (50 < 75%) = 43 < 65 grades, was considered moderate score.
- Good knowledge ($\geq 75\%$) = ≥ 65 grades, was considered high score.

Part (4): Work stress coping strategies assessment consisted of 5 sub items as:

- A- Work stress coping strategies toward work stress by positive coping strategies included 12 closed ended question as try to look on the bright side of things, create an action plan and follow it, try to keep feelings (such as sadness and anger), find new solutions to the problem.
- **B-** Work stress coping strategies toward work stress by negative coping strategies included 8 closed ended question as follow fate, sometimes have bad luck, try to get rid of the situation for a while by resting or taking a vacation, accept this situation because there is nothing.
- C- Work stress coping strategies toward work stress by coping with exercise included 5 closed ended question as practice meditation, practice deep breathing, practices running.
- D- Work stress coping strategies toward work stress by coping strategies by eating stress-reducing nutrition included 7 closed ended question as eat wheat, eat pasta, eat vegetables, eats chicken, eat chocolate.
- E- Work stress coping strategies toward work stress by coping with avoiding foods that increase stress included 5 closed ended question as avoid eating red meat, avoid eating cheese, avoid eating sugars.
- F- Work stress coping strategies toward work stress by coping with avoiding foods that increase stress included 11 closed ended question as get enough sleep, determine priorities and organizer time, avoid multitasking, stay away from problems and conflicts at the workplace.

Scoring system:

Each statement was assigned score according to nursing teachers' response were "Always", "Sometimes", "Never", and were scored 2, 1, and 0. (always 2, sometimes 1, never 0), respectively. Total score were 96 grades for 48 items. The scores of items summed up and then converted into percentage score as the following:

- (>60) was considered negative = >58 grades.
- (≤ 60) was considered positive = ≤ 58 grades.

I. Operational Item:

It was included preparatory phase, content validity and reliability, pilot study and field work.

A. Preparatory phase:

Prepare the study tools based on related literature review and develop the study tool and test its content validity and reliability.





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Pilot study:

A pilot study conducted on 10% of the nursing teachers equal 10 nursing teachers under study to assess the feasibility, practicability, clarity and objectivity of the tool. Based on the results, no modification was done. Nursing teachers in the pilot study were included in the main study sample because no modifications were done.

Content validity:

Validity was ascertained by a panel of experts in branch of Community Health Nursing, who was review the tool for the format, layout, consistency, accuracy, and relevance.

Tool Reliability:

Reliability was tested statistically using the appropriate statistical tests to assure that the tools are reliable before data collection. Answers from the repeated testing were compared Test- re- test reliability was 0.87 for assessment regarding work stress, and Cronbach's Alpha reliability was 0.855 for coping strategies toward work stress.

Field work:

- An official letter issued from the dean of Faculty of Nursing Helwan University, and nursing teachers in Cairo health
 directorate nursing schools through visit of nursing schools including the aim of the study to obtain permission after
 establishing a trustful relationship, each subject interviewed individually by the investigator to explain the study purpose.
- Data collected within 3 months from first of February until end of April 2024 one days /week (Tuesday), from 9am -2pm, till the needed sample completed, interview of nursing teachers, informed consent obtained from nursing teachers after the investigator introduce herself for each nursing teacher, then explain the purpose of the study to assess work stress, and coping strategies toward work stress of nursing teachers. Study collected through structure face to face interview and the entire tool filled by the investigator.
- The investigator utilizes one tool, was need 20 -30 minutes and meeting the nursing teachers one days /week (Tuesday), from 9am -2pm.
- The investigator taken 8 nursing teachers each week consists, total number of nursing teachers = 100 nursing teachers.

Ethical Considerations:

The research approval was obtained from the Scientific Research Ethical Committee in the faculty of nursing, Helwan University before starting the study, The investigator was clarified the objective and aim of the study to nursing teachers included in the study, The investigator assured anonymity and confidentiality of subjects' data. Nursing teachers informed that they are allowed to choose to participate or not in the study and that they have the right to withdraw from the study at any time.

III- Administrative Item:

Approval to carry out this study was obtained from Dean of Faculty of Nursing, Helwan University and official permission was obtained from the Cairo health directorate nursing schools' manager.

IV- Statistical Item

The collected data from the studied sample was revised, coded and entered using personal computer (PC). Computerized data entry and statistically analyzed using SPSS program (Statistical Package for Social Science) version 24. Data were presented using descriptive statistics in the form of frequencies and relative percentages. Chi square test (X^2) was used to calculate difference between qualitative variables through this equation:

$$\chi^2 = \sum \frac{(O-E)^2}{E}$$

Where:

 Σ =sum O= observed value E= expected P=.0001

Degrees of Significance of the results were:

- Non-Significant (NS) if p > 0.05.
- -Significant (S) if p < 0.05.
- -High Significant (HS) if p < 0.01





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Result:

Table (1): Frequency Distribution of Studied Nursing Teacher's Demographic Characteristic (n= 100).

Items	No.	%
Sex	, , , , , , , , , , , , , , , , , , ,	
Male	70	70.0
Female	30	30.0
Age (year)	<u>"</u>	
<25	10	10.0
25 – 30	5	5.00
30 – 40	64	64.0
> 40	21	21.0
Mean ±SD	37.90 ± 1.46	
Marital status		
Single	28	28.0
Married	67	67.0
Divorced	5	5.0
Number of family members	"	
<u><</u> 4	75	75.0
≥5	21	21.0
≥6	4	4.0
Mean ±SD	3.45 ± 1.02	
Level of education		
Bachelor	22	22.0
Master	47	47.0
PhD	31	31.0
Monthly income	, , , , , , , , , , , , , , , , , , ,	
Sufficient and saved	30	30.0
Sufficient for basic needs	60	60.0
Not satisfy basic needs	10	10.0
Years of experience working in nursing schools		
1-3 years	12	12.0
4-6 years	13	13.0
7-10 years	60	60.0
> 10 years	15	15.0
Mean ±SD	8.16 ± 0.89	
Number of working hours/days		
≤ 8 hours	15	15.0
> 8 hours	85	85.0
Number of students/classes taught	!	
≤ 30 students	15	15.0
≤ 60 students	72	72.0
≤ 90 students	13	13.0
Mean ±SD	68.16 ± 1.20	
Number of subjects you teach		
1-3 subjects	85	85.0





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4-6 subjects	15	15.0
The stage you are teaching:		
Only one stage	15	15.0
Only two stages	72	72.0
Only three stages	13	13.0

Table (1): Reveals that, the mean age of the studied nursing teachers was 37.90 ± 1.46 years, 70.0 % of them were males, 67.0 % of them were married and 75.0 % of them were number of family members were ≤ 4 people. Also, 47.0 % of the studied nursing teachers had bachelor's nursing, 85.0 % of them number of working hours/days > 8 hours and 72.0 % of them the stage teaching were only two stages.

Table (2): Frequency Distribution of Studied Nursing Teachers regarding Health Status (n= 100).

Items	No.	%
Do you suffer from chronic diseases?	<u>-</u>	
Yes	30	30.0
No	70	70.0
If the answer is yes, what chronic disease do you suffer from:	"	
Diabetes	5	5.0
Hypertension	8	8.0
Gastrointestinal diseases	17	17.0
How many meals do you eat daily?		
One meal	5	5.0
Two meals	28	28.0
Three meals	67	67.0
Do you eat healthy food?		
Yes	75	75.0
No	21	21.0
I don't know	4	4.0
Average hours of sleep per day		
Less than 6 hours a day	47	47.0
6:7 hours a day	22	22.0
More than 7 hours a day	31	31.0
Do you practice exercise?		
Yes	40	40.0
No	60	60.0
If yes, what types of sports do you practice		
Running	5	5.0
Football	25	25.0
Walking	10	10.0
Do you usually smoke:		
Yes	15	15.0
No	85	85.0
If the answer is yes, what is smoking?		
Cigarettes	13	13.0
Shisha	2	2.0
Do you drink tea?	·	
Yes	85	85.0
No	15	15.0
Do you drink coffee		
Yes	18	18.0
No	72	72.0







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Table (2): Illustrate that, 30.0 % of the studied nursing teachers suffer from chronic diseases while, 17.0 % of them suffer from gastrointestinal diseases, 67.0 % of them intake three meals daily and 47.0 % of them average hours of sleep per day were less than 6 hours a day. Also, 85.0 % of them usually don't smoke.

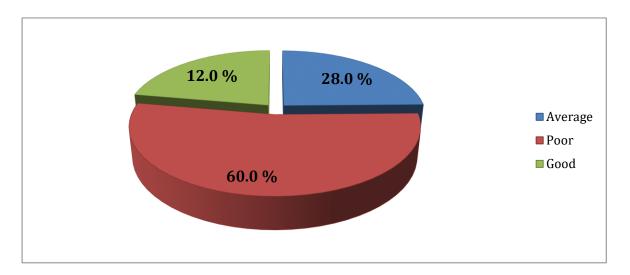


Figure (1): Percentage Distribution of the Studied Nursing Teacher's Total Assessment regarding Work Stress (n= 100).

Figure (1): Shows that, 60 % of the studied nursing teachers had poor total assessment regarding work stress. Also, 28 % of them had average total assessment regarding work stress. While, 12 % of them had good total assessment regarding work stress.

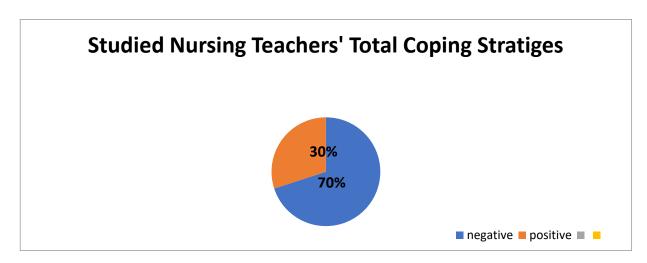


Figure (2): Percentage Distribution of the Studied Nursing Teachers' Total Coping Strategies toward Work Stress (n=100).

Figure (2): Shows that, 70 % of the studied nursing teachers had negative total coping strategies toward work stress. While, 30 % of them had positive total coping strategies toward work stress.





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Table (3): Relation between Studied Nursing Teacher's Demographic Characteristics and their Total Work Stress Level (n=100).

Demographic characteristics	phic characteristics Poor Average n=60 n=28		Good n=12		X ²	P – value		
	No.	%	No.	%	No.	%		
Sex						1		
Male	40	66.7	18	64.3	12	100.0	12.332	0.000*
Female	20	33.3	10	35.7	0	0.0		
Age (year)								
<25	5	8.3	3	10.7	2	16.7		
25 – 30	5	8.3	0	0.0	0	0.0	11.391	0.000*
30 – 40	29	48.4	25	89.3	10	83.3		
> 40	21	35.0	0	0.0	0	0.0		
Marital status								
Single	5	8.3	18	64.3	5	41.7		
Married	50	83.4	10	35.7	7	58.3	15.558	0.001**
Divorced	5	8.3	0	0.0	0	0.0		
Place of residence								
Urban	38	63.3	18	64.3	10	83.3	17.239	0.000**
Rural	22	36.7	10	35.7	2	16.7		
Number of family members		<u>-</u>						
≤4 people	52	86.6	18	64.3	5	41.7		
≥5 people	4	6.7	10	35.7	7	58.3	16.274	0.000**
≥6 people	4	6.7	0	0.0	0	0.0		
Level of education	3							
Bachelor's	20	33.3	2	7.1	0	0.0		
Master's	40	66.7	7	25.0	0	0.0	18.199	0.000**
PhD	0	0.0	19	67.9	12	100.0		
Monthly income	•					•	•	•
Sufficient and saved	20	33.3	10	35.7	0	0.0		
Sufficient for basic needs	30	50.0	18	64.3	12	100.0	19.177	0.000**
Not satisfy basic needs	10	16.7	0	0.0	0	0.0		
Years of experience working in nursing so	chools							
1-3 years	0	0.0	0	0.0	12	100.0		
4-6 years	0	0.0	13	46.4	0	0.0	18.199	0.000**
7-10 years	60	100.0	0	0.0	0	0.0	10.177	0.000
> 10 years	0	0.0	15	53.6	0	0.0		
Number of working hours/days								
≤8 hours	0	0.0	13	46.4	2	16.7	22.239	0.000**
> 8 hours	60	100.0	15	53.6	10	83.3		
Number of students/classes taught								
≤ 30 students	0	0.0	15	53.6	0	0.0		
≤ 60 students	60	100.0	0	0.0	12	100.0	16.365	0.001**
≤ 90 students	0	0.0	13	46.4	0	0.0		





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Number of subjects you teach								
1-3 subjects	60	100.0	15	53.6	10	83.3	22.239	0.000**
4-6 subjects	0	0.0	13	46.4	2	16.7		
The stage you are teaching:								
Only one stage	0	0.0	15	53.6	0	0.0		
Only two stages	60	100.0	0	0.0	12	100.0	16.365	0.001**
Only three stages	0	0.0	13	46.4	0	0.0		

Table (3): Shows that, there were highly statistically significant relation between studied nursing teacher's total work stress level and all items of demographic characteristics, where (P = < .0001).

Table (4): Relation between Studied Nursing Teacher's Demographic Characteristics and their Total Coping Strategies (n=100).

Demographic characteristics		Negative n=70		Positive n=30	X 2	P – value
	No.	%	No.	%		
Sex		"	<u>.</u>	"		—-Ų-
Male	50	71.4	20	66.7	13.210	0.000*
Female	20	28.6	10	33.3		
Age (year)	<u> </u>					<u>u</u>
<25	10	14.3	0	0.0		
25 – 30	5	7.1	0	0.0	14.210	0.000*
30 – 40	34	48.6	30	100.0		
> 40	21	30.0	0	0.0		
Marital status						
Single	0	0.0	28	93.3		0.001**
Married	65	92.9	2	6.7	17.002	
Divorced	5	7.1	0	0.0		
Place of residence	,		•			•
Urban	66	94.3	0	0.0	16.214	0.000**
Rural	4	5.7	30	100.0		
Number of family members	1		*			
≤4	70	100.0	5	16.7		
≥5	0	0.0	21	70.0	17.998	0.000**
≥6	0	0.0	4	13.3		
Level of education			·		<u>'</u>	<u>"</u>
Bachelor	0	0.0	22	73.3		
Master	39	55.7	8	26.7	19.542	0.000**
PhD	31	44.3	0	0.0		
Monthly income	-11	"	-11	"	11	-0
Sufficient and saved	0	0.0	30	100.0		
Sufficient for basic needs	60	85.7	0	0.0	20.147	0.000**
Not satisfy basic needs	10	14.3	0	0.0		
Years of experience working in nursing	schools	U.	<u> </u>		•	•
1-3 years	0	0.0	12	40.0		
4-6 years	0	0.0	13	43.3	20.352	0.000**
7-10 years	60	85.7	0	0.0		0.000**
> 10 years	10	14.3	5	16.7		





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≤8 hours	0	0.0	15	50.0	23.014	0.000**		
> 8 hours	70	100.0	15	50.0				
Number of students/classes taught								
≤ 30 students	0	0.0	15	50.0				
≤ 60 students	70	100.0	2	6.7	17.654	0.001**		
≤ 90 students	0	0.0	13	43.3				
Number of subjects you teach								
1-3 subjects	70	100.0	15	50.0	18.210	0.001**		
4-6 subjects	0	0.0	15	50.0				
The stage you are teaching:								
Only one stage	0	0.0	15	50.0				
Only two stages	70	100.0	2	6.7	18.254	0.001**		
Only three stages	0	0.0	13	43.3				

Table (4): Shows that, there were highly statistically significant relation between studied nursing teacher's total coping strategies and all items of demographic characteristics, where (P = < .0001).

Discussion

Nursing teachers often experience significant work stress due to the demanding nature of their roles. Balancing teaching responsibilities with clinical practice, administrative duties, and mentorship can be overwhelming. The pressure to stay current with rapidly evolving medical knowledge while managing large class sizes and diverse student needs adds to their stress. Face emotional strain from witnessing students' struggles and the high-stakes environment of healthcare education. This stress can lead to burnout and impact their overall job satisfaction and well-being. Effective stress management strategies, supportive work environments, and institutional resources are crucial in helping nursing educators maintain their resilience and continue providing high-quality education (*Cichoń et al.*, 2023).

Nursing teachers can employ a variety of coping strategies to manage work-related stress effectively. Establishing a balanced work-life routine is essential, allowing them to set boundaries between professional responsibilities and personal time. Regular physical exercise and mindfulness practices, such as meditation and deep-breathing exercises, can alleviate stress and enhance overall well-being. Seeking support from colleagues through professional networks or mentoring groups provides both emotional support and practical advice (*Elomaa et al.*, 2023).

Studied Nursing Teacher's Demographic Characteristics:

Concerning to sex of studied nursing teacher, the current study result revealed that, more than two third of the studied nursing teacher was male. This result in the same line with **Chao et al.**, (2023) who carried out a study conducted in China about "Nursing teachers' job burnout and teaching ability: The mediating role of social support based on the Person-Context interaction theory ", they found that 73.4 % of studied teachers was male. From the investigator point of view, nursing has traditionally been a female-dominated profession, but recent trends show increasing diversity, including more males entering the field. In some regions, men in nursing roles, including teaching positions, are becoming more prevalent as societal attitudes shift and gender roles evolve.

Regarding to age of the studied nursing teacher. The present study findings related that mean age of studied nursing teacher was 37.90 ± 1.46 years. This result is similar to a study conducted by **Ogakwu et al.**, (2024) who conducted a study in Malysia about "Quality of work-life and stress management in a rural sample of primary school teachers". They found that, the mean age of the studied primary school teachers were 37.88 ± 1.23 years.

Concerning to marital status of studied nursing teacher, the current study result revealed that, more than two third of the studied nursing teacher was married. This result in the same line with **Ekingen et al.**, (2023) who carried out a study conducted in Nigeria about " Mediating effect of work stress in the relationship between fear of COVID-19 and nurses' organizational and professional turnover intentions ", they found that 68.1 % of studied teachers had married. From the investigator point of view, societal norms and expectations play a role, as marriage has historically been more common among nursing teacher, who now make up a significant portion of the nursing educator workforce. Furthermore, having a





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supportive partner can help manage the work-life balance required in the demanding field of nursing education, providing emotional and practical support that contributes to career satisfaction and stability.

Regarding to level of education of studied nursing teacher, the current study revealed that, the less than half of studied nursing teachers were master degree. This finding was in accordance with **Yuan et al.**, (2023) who conducted a study in Canada about "The levels and related factors of mental workload among nurses" they found that, the 43.6 % of studied samples were master degree. From the investigator point of view, a master's degree in nursing or a related field provides a deeper understanding of advanced clinical practices, research methodologies, and educational strategies, which are essential for effective teaching and mentorship. Additionally, holding a master's degree typically qualifies educators for higher academic and professional standards, allowing them to teach at institutions that require advanced qualifications.

Concerning to monthly income of studied nursing teacher, the current study result revealed that, less two third of the studied nursing teacher was sufficient for basic needs. This result in the same line with **Xu et al.**, (2023) who carried out a study conducted in Iran about " The relationship between personality traits and clinical decision-making, anxiety and stress among intern nursing students during COVID-19", they found that 62.1 % of studied sample monthly income was sufficient for basic needs. From the investigator point of view, effective budgeting and financial planning can ensure that income is allocated efficiently to cover essential expenses and in regions with a lower cost of living, monthly incomes can more easily cover basic needs.

Regarding to years of experience working in nursing schools of studied nursing teacher, the current study result revealed that, less two third of the studied nursing teacher was between 7 to 10 years. This result in the same line with **Sørensen et al.**, (2023) who carried out a study conducted in India about "It's a hard process—Nursing students' lived experiences leading to dropping out of their education", they found that 60.4 % of studied sample years of experience working in nursing schools was between 8 to 10 years. From the investigator point of view, because large number of nursing teacher's age ranged from 30 to 40 years.

Concerning to place of residence of studied nursing teacher, the current study result revealed that, more two third of the studied nursing teacher was in urban area. This result in the same line with **Xu et al.**, (2023) who carried out a study conducted in Koria about " The relationship between personality traits and clinical decision-making, anxiety and stress among intern nursing students during COVID-19", they found that 66.7 % of studied sample place of residence of studied was in urban area. From the investigator point of view, urban areas often host major universities and specialized nursing schools that offer advanced degree programs and research opportunities. These institutions provide the comprehensive education and training required for nursing educators. Urban centers typically have a higher concentration of hospitals, clinics, and healthcare facilities where nursing programs can include clinical placements and hands-on experience.

Health status of the studied nursing teachers.

Concerning to studied nursing teacher suffer from chronic diseases, the current study result revealed that, more two third of the studied nursing teacher wasn't suffer from chronic diseases. This result in the same line with **Brady et al.**, (2023) who carried out a study conducted in Canada about "Interventions to reduce stress and burnout among teachers", they found that 73.3 % of studied sample wasn't suffer from chronic diseases. From the investigator point of view, individuals in this age group from 30 to 40 years, particularly those in healthcare professions, may be more likely to engage in health-promoting behaviors such as regular exercise, balanced nutrition, and preventive health measures. Their education and profession often emphasize the importance of maintaining good health.

Regarding to studied nursing teacher eat healthy food, the current study result revealed that, more two third of the studied nursing teacher eat healthy food. This result in the same line with **Madigan et al.**, (2023) who carried out a study conducted in Indonesia about " Teacher burnout and physical health ", they found that 72.1 % of studied sample eat healthy food. From the investigator point of view, eating a balanced diet can help manage stress and improve resilience, which is important in a high-stress profession like nursing education. Healthy foods can boost energy levels and enhance mood, contributing to better stress management.





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The following paragraph, answered research question Q1: What is nursing teachers' work stress level?

Concerning studied nursing teachers' total assessment regarding work stress, the current study revealed that, less two third of them had poor assessment regarding work stress, more than quarter had average assessment regarding work stress and more than tenth of them had good assessment regarding work stress, this result agrees with **Elsayed et al.**, (2023) who conducted a study in Egypt about "Mental health, risk perception, and coping strategies among healthcare workers in Egypt during the COVID-19 pandemic", they found that,13.5 % of the studied sample had good total assessment regarding work stress. Also, 62.5 % had poor assessment regarding work stress and 24.0 % of them had average assessment regarding work stress. From the investigator point of view, nursing educators may not have extensive experience with formal stress assessment tools or strategies, especially those used outside clinical practice. Their focus might be more on general stress management rather than detailed assessment techniques.

The following paragraph, answered research question Q2: What are nursing teachers' work stress coping strategies?

Concerning studied nursing teachers' total coping strategies toward work stress, the current study revealed that, more than two third of them had negative level in total coping strategies toward work stress, while more than quarter of them had positive total coping strategies toward work stress, this result agrees with **Tesfaye et al.**, (2023) who conducted a study in Ethiopia about "Perceived occupational stress and associated factors among primary school teachers in the second wave of COVID-19 in Ethiopia", they found that, 28.9 % of the studied sample had positive in total coping strategies toward work stress. Also, 71.1 % had negative total coping strategies toward work stress. From the investigator point of view, teachers may not recognize the impact of their stress or may be unaware of healthier coping strategies, leading them to rely on negative habits. Negative coping strategies, such as procrastination, substance use, or emotional eating, often provide immediate but short-lived relief from stress, making them tempting choices.

Relations and correlations between the study variables.

Regarding to demographic characteristics and their total work stress level, the current study result revealed that, there were highly statistically significant relation between studied nursing teacher's total work stress level and all items of demographic characteristics. This result in the same line with **Berhe & Gebretensaye**, (2021) who carried out a study conducted in Addis Ababa about "Nursing students' challenges towards clinical learning environment at the school of nursing and Midwifery in Addis Ababa University ", they found that there was highly statistically significant relation between studied nursing teacher's total work stress level and all items of demographic characteristics. From the investigator point of view, understanding how different demographic characteristics relate to work stress can help institutions tailor interventions and support systems. For example, younger teachers may experience different stressors compared to those with more experience, necessitating different approaches to support.

Concerning to demographic characteristics and their total coping strategies, the current study result revealed that, there were highly statistically significant relation between studied nursing teacher's total coping strategies and all items of demographic characteristics. This result in the same line with **El-Sayed et al.**, (2024) who carried out a study conducted in Egypt about "Understanding the relationship of academic motivation and social support in graduate nursing education in Egypt", they found there were highly statistically significant relation between studied nursing teacher's total coping strategies and all items of demographic characteristics. From the investigator point of view, connection between demographic characteristics and coping strategies is robust and unlikely to be due to random chance. This indicates that specific groups may favor different coping strategies based on their demographic profiles.

Conclusion

Based on the results of the present study and research question the following conclusion includes:

Less than two third of the studied nursing teachers had poor total assessment regarding work stress, and more than quarter of them had average total assessment regarding work stress. More two third of the studied nursing teachers had negative total coping strategies toward work stress, and less than one third of them had positive total coping strategies toward work stress. There was highly statistically significant relation between studied nursing teacher's total work stress level and all items of demographic characteristics. There was highly statistically significant relation between studied nursing teacher's total coping strategies and all items of demographic characteristics.





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Recommendations

In the light of the result of this study, the following recommendations were suggested:

- 1. Provide health education program for nursing teachers about coping strategies regarding work stress.
- 2. Design booklets about coping strategies related work stress used which include all information for nursing teachers.
- 3. Design posters and put in nursing schools that would help nursing teachers to improve' coping strategies regarding work stress.
- 4. Encourage nursing schools to make group discussion regarding coping strategies related work stress.
- 5. Apply training program to for nursing teachers about coping strategies related work stress.

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