

## Relationship between Sources of Stress and Work Performance among Nurses Working in Psychiatric Hospital

Rokia Elsayed Abdel kawy<sup>1</sup>, Sayeda Ahmed AbdEl latief<sup>2</sup> and Doha Abd El baseer Mahmoud<sup>3</sup>

(1) Nursing Supervisor at Neurosurgery Hospital in Shbein-Elkom , Menofia University, Egypt, (2) Professor of Psychiatric Mental Health Nursing, Cairo University, Egypt, and (3) Lecture of Psychiatric and Mental Health Nursing , Benha University, Egypt

### Abstract

**Background:** Stress, up to a certain point, will improve psychiatric nurse's work performance and their quality of life because it is healthy but if stress becomes excessive, it loses its beneficial effect and becomes harmful. **Aim of the study:** The study aimed to determine relation between sources of stress and work performance among the nurses working in psychiatric hospital. **Research design:** Descriptive\correlation design was used in this study. **Setting:** This study was conducted at Psychiatric Mental Health and Treating Addiction Hospital in Benha city, Qalubia Governorate. **Subject:** Convenient sample from psychiatric nurses, Total sample was (220) nurses (85 females and 135 male) from the previous study setting. **Tools:** Three tools were used for data collection. **Tool (1):** A structured interviewing questionnaire. **Tool (2):** Occupational stressors scale. **Tool (3):** Employee work performance scale. **Results:** More than two-fifth of the studied nurses had severe occupational stress, while more than half of the studied nurses had unsatisfactory level of work performance. **Conclusion:** There was a negative highly statistically significant correlation between work performance and occupational stressors. **Recommendations:** Designing a psycho-educational program for nurses and continuous intervention programs in psychiatric hospitals that provide proper information about how to cope with stress

**Keywords:** Psychiatric Nursing, Stress, Work performance

### Introduction

Psychiatric nurses not only provide physical care but also socialize and communicate with their patients to create a safe, comfortable environment that promotes positive change. Their specific responsibilities often include assisting patients with activities of daily living, administering psychotropic medication and managing side effects, assisting with crisis management and observing patients to evaluate their progress (Jennifer,2020).

Occupational stress in psychiatric nursing is attributed largely to the physical labor, suffering and emotional demands of patients and families, work hours, shift work, interpersonal relationships (e.g. inter- and intra-professional

conflict), and other pressures that are central to the work nurses do. Occupational stress may affect significantly nurse's quality of life, and simultaneously reduce the quality of care. Caring is an interpersonal procedure defined by expert nursing, interpersonal sensitivity and intimate relationships, including positive communication and implementation of professional knowledge and skills .Job related stress has as a result loss of compassion for patients and increased incidences of practice errors and therefore is unfavorably associated to quality of care .Numerous studies show that it has a direct or indirect impact on the delivery of care and on patient results (Aditi , 2020).

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Many sources of stress in psychiatric nurses work have been identified, such as heavy workload, organizational structure, difficulties with patients, home/work conflict, and inter professional conflict, increases in administrative work, changing nature of nursing (i.e., administrative work valued more than clinical work), lack of professional development opportunities due to excessive workload, role Conflict (performing tasks that conflict with the nurses' own ethical values) e.g., restraining, seclusion, force-feeding and administering medication against patient's will, lack of communication from management, absence of job resources, lack of support from management, particularly in crisis situations and lack of appropriate supervision for newly graduated staff or under-qualified staff which lead to feelings of depression, helplessness and hopelessness (**Ieropoli & Moo 2020**).

There are different strategies of coping with stress were identified. coping strategies can be divided into three categories of task-oriented problem-focused, emotion-oriented, and avoidant strategies. Problem-focused coping aims to directly manage a stressor to reduce distress. This strategy requires obtaining information about the stressful situation and its possible consequences. Psychiatric nurses who use this strategy try to prioritize their activities with respect to their importance and to manage their activities timely, such as get regular exercise. Try a relaxing activity. Explore relaxation or wellness programs, which may incorporate meditation, muscle relaxation, or breathing exercises, eat well and take a break. Schedule regular times for these and other healthy and relaxing activities (**Arslan & Buldukoglu 2018**).

Work performance, defined as the effectiveness of the psychiatric nurse in carrying out the roles and responsibilities related to direct psy-

chiatric patient care. A healthy work environment in psychiatric hospital is one in which staff have made health and health promotion a priority and part of their working lives. Performance refers to voluntary behaviors that can harm the well-being of the health organization and Core task performance refers to the basic required duties of a particular job. (**Boudrias et al.,2021**).

The main factors influence the performance of nurses who are working in psychiatric hospitals. These factors are the lack of managerial effort to improve the work environment of nurses, seeking perfectionism, support from the ward manager, salary, the relationship at work with other nurses, and the fairness of shift work between nurses. Additionally, other factors can almost be influencing factors including relationships at work with other health team members, violent, and aggressive behavior of mentally ill patients. psychiatric nurses who are working in mental health settings are no exception, and one may argue that not only the factors may influence psychiatric nurses' performance and their work satisfaction, but also may affect the quality of care provided for patient (**Tariq & Muneeb, 2018**).

Role of psychiatric nurses learn ways to cope with stress, help to increase an individual's ability to cope effectively and as a result, reduce experienced levels of stress and burn-out. Therefore, how psychiatric nurses cope with job stress is an important concern. This concern is not only for the psychiatric nurses themselves but also for the health organizations, since job stress leads to burnout, illness, absenteeism, poor morale of staff, and reduction in their efficacy and productivity. In addition, psychiatric nurses utilizing effective coping methods frequently experienced less stress. Even though stress cannot be completely eliminated from daily life, appropriate ways of

coping with it can be practiced in order to reduce stress (Tsaras , et al., 2018).

### **Significance of the study**

Stress is undeniably considered as the most common problem existing in organization but it is also a big factor for low quality work performance and less productivity. It is important that nurses work in a stress- free environment and it is important for some organization to identify sources of stress, and institute many programs on how to overcome stressful situations to improve work performance. Job-stress in the nursing profession has been a global problem with rates of 9.20–68.0 % of nurses (Alhrbi and Hassan, 2019).

Psychiatric nurses are exposed to a different degree of stress and social pressures related to work where they feel that their efforts are not appreciated and rewarded, it is a stressful profession where there are many sources of stress and the resulting negative effects reflected on all aspects of life, affects their work performance and their psychological compatibility. This study is important because it helped to identify the relationship between stress and nurses' work performance , knowing the stress factors of psychiatric nurses, level of stress and work performance of psychiatric nurses .

### **Aim of the Study**

The study aimed to determine relation between sources of stress and work performance among the nurses working in psychiatric hospital.

### **Research Questions**

- What are sources of stress among the nurses working in psychiatric hospital?
- What is the level of the work performance among nurses working in psychiatric hospital ?
- What is the relation between sources of stress and work performance among the nurses working in psychiatric hospital?

## **Subject and methods**

### **Research Design**

Descriptive\correlation design was utilized in this study to fulfill the aim of this study.

### **Research Setting**

This study was conducted at Psychiatric and Mental Health Hospital and Treating Addiction at Benha city, Qaluobia governorate. Which it affiliated to the General Secretariat of mental health. It has (6) departments (5 male and 1 female) with capacity of 277 beds. The outpatient clinics consist of 6 outpatient clinics : (3) psychiatric for adult and geriatrics (2) pediatrics & (1) community medicine.

### **Research Subject:**

#### **Sample size :**

Convenient sample of psychiatric nurses

#### **Sample technique**

A convenient sample of (220) nurse (85 females and 135 male) nurses of Psychiatric and Mental Health Hospital, who met inclusion criteria.

This sample should meet the following inclusion criteria:

#### **Inclusion criteria:**

- Nurses who are working in psychiatric hospital.
- Both males and females .
- Willingness to participate in the study

#### **Exclusion criteria:**

- Nurses have history of psychiatric disease
- Nurses have history of mental disease.

#### **Tools of Data Collection**

To achieve the aim of the study, the data was collected by using the following tools.

#### **Tool (I): A Structured Interview Questionnaire Sheet**

This Questionnaire was developed by the investigator after reviewing the related literature ,the questionnaire was designed on Arabic format in suitable language to suit nurses .It was consisted of 12 items ( name, age, gender, marital status, residence ,qualification,

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job title for them, department the nurse work in, the training courses which be received in the field of psychological nursing, training courses in psychological stress, family income and years of experience ).

### **Tool (II): Occupational stressors scale (OSS)**

This scale was developed by ( **Weiman , 2011**) it was used to measure occupational stressors of psychiatric nurses. It consisted of 10 subscales (35 item). Subscales were (work requirement, work and family conflict, insufficient support from co-workers or service providers, violence in workplace, verbal abuse, exposure to occupational risks, offers of the workplace, time deficit, personal relationship, unmet Physiological needs). Psychiatric nurses were asked to rate each item on a four- point scale : never (0) ,rarely (1), sometimes (2) and always (3). High scores would mean high level of stress and low scores would indicate low level of stress. Overall possible scores on the scale range from 0 -105.

### **Scoring system of feelings and thoughts of the nurses was categorized as follow-**

- 0- 35 : mild stress
- 36-69 moderate stress
- 70 -105: severe stress

### **Tool (III): Employee work performance scale (EWPS)**

This scale was developed by (**Wiedower, 2013**). It consisted of 18 items. Psychiatric nurses were asked to rate each item on a five- point scale: strongly disagree (1), disagree (2), neutral (3), agree (4) and strongly agree (5). High scores would mean excellent level of work performance and low scores would indicate unsatisfactory level of work performance. Overall possible scores on the scale range from 18- 90.

**Scoring system of performance** of the nurses was categorized as follow :

- -18-41 unsatisfactory performance

- 42-66 satisfactory performance
- 67-90 excellent performance

### **Content validity of tool**

To achieve the criteria of trustworthiness of the data collection tools in this study. Content validity was tested by three experts in Psychiatric Mental Health Nursing i.e., professor and assistant professor in Faculty of Nursing at Benha University who checked the relevancy, comprehensiveness, clarity and applicability of the questions. According to their opinions ,

Modifications were done such as modification of some words in the Arabic form of the tool to give the right meaning of the phrase and the final form was developed. Also modifications were done in the scoring system of Tool (III): Employee work performance scale (EWPS) to be 3 level: unsatisfactory performance, satisfactory performance and excellent performance instead of 5 level, finally, some questions have been added to the questionnaire such as have the nurse received training courses in the field of psychological nursing? and have they participated in psychological stress training courses?

### **Reliability of the tool:**

Test the reliability of the tools through Alpha Cronbach reliability analysis. The reliability of Occupational stressors scale was 0.814 and 0.825 for Employee work performance scale.

### **Ethical consideration:**

The objective and aim of the study were clarified by the researcher to every participant in the study, written consent obtained from each nurse before conducting the interview; the subjects who agreed to participate in the study were assured about the confidentiality and anonymity of the study. They were informed that they could withdrawal from the study at any time. Acceptance to participant in the study was taken through oral consent.

### **Pilot study**

After the tools were designed they were tested through a pilot study, which was done before its application in the field work to check feasibility and clarity of the designed tools to be sure that it was understood and estimate the time required for interviewing the nurses to find out any problems that might interfere with data collection. It was conducted on a sample of 10% ( 22 ) of nurses.

### **Result of Pilot Study:**

**After conducting the pilot study, it was found that :**

- The tools were clear and applicable; however, few modifications were made in rephrasing of some sentences in both Occupational stressors scale (OSS) and Employee work performance scale (EWPS)
- Tools were relevant and valid .
- No problem that interferes with the process of data collection was detected .
- Following this pilot study the tools were made ready for use

### **Fieldwork**

**The study was started and finished through the following steps :**

- The researcher introduced herself to the nurses then explained the aim of the study to every one of them.
- Consent was taken from every one of them before data collection .
- The researcher interviewed each nurse individually and briefly explained the nature and the purposes of the study, and asked for participation.
- All nurses were informed that participation is voluntary .
- After obtaining the acceptance of nurses to participate in the present study, The researcher collected data from nurses , nursing specialist , head nurses and department supervisor.
- The investigator collected the number of sample (220 nurses) (85 females and 135

male) from psychiatric and Mental Health hospital at Benha, The data collection lasted 3month starting from the beginning of June till the end of August 2021. The researcher set three days ( Saturday, Sunday and Wednesday) per week to collect the sample.

- The researcher attended the hospital from 10.00 AM. To 1.00 PM. A number of interviewed nurses per week ranged from 18-19 nurse one ,each nurse took 30 minutes through the interview. Sometimes, during the three months period for collecting data, there were some days that no available nurses to complete the questionnaire because of workload.
- All information gathered through data collection tools was interpreted to identify the sources of stress and level of stress for each nurse.

### **Statistical analysis**

All data collected were organized ,coded, computerized, tabulated and analyzed by using the statistical package for social sciences (SPSS version 20). Data were presented using descriptive statistics in form of number and percentages, mean and standard deviation. Qualitative variables were compared using the chi-square test(x), p-value to test association between two variables and correlation coefficient was used to measure the direction and strength of the correlation between variables. A statistically significant difference was considered if p-value was ( $p \leq 0.05$ ). A highly statistically significant difference was considered if p-value was ( $p \leq 0.001$ ) and non-statistical significant difference was considered if p-value  $p > 0.05$ .

### **Results**

**Table (1):** Shows that less than two-thirds (61.4%) of the studied nurses were in the age group of  $31 \leq 40$  years with a mean age of  $27.33 \pm 5.01$  years. Concerning gender, less than two-thirds (61.4%) of them were male .In relation to marital status, the

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majority (92.7%) of them were married. Also, less than three-quarters (70.5%) of nurses lived in rural areas. Regarding qualifications, more than half (51.8%) of them graduated from technical institute of nursing. The job title of more than three-quarters (75.9%) of the studied nurses were nurses. Additionally, less than three-quarters (72.3%) of the studied nurses work in male department. The years of experience of more than half (55.5%) of the studied nurses were more than 15 years. Moreover; the income of more than two-thirds (66.8%) of them is not enough.

**Figure (1):** Illustrates that, more than two-fifth (40.0%) of the studied nurses have severe occupational stress, while less than one-third(31.8%) of the studied nurses have mild occupational stress, and more than one-quarter (28.2%) of the studied nurses have moderate occupational stress..

**Figure (2):** Illustrates that, more than half (55.0%) of the studied nurses have unsatisfactory level of work performance , while less than one- quarter (24.1%) of the studied nurses have satisfactory level of work performance, and more than one-fifth (20.9%) of them have excellent level of work performance.

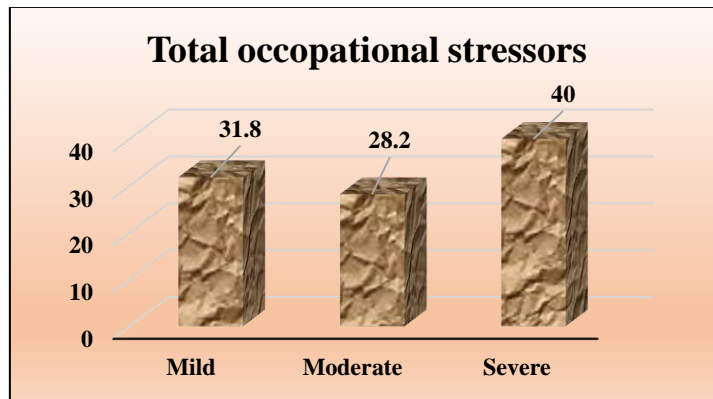
**Table (2):** Illustrates that, there is a negative highly statistical significant correlation between total work performance and occupational stressors subscale, except with "Organizational issues" where there is a negative statistical significant correlation ( $p \leq 0.05$ ).

**Table (3):** Illustrates that, there is a negative highly statistical significant correlation between total work performance and occupational stressors scores of studied nurses ( $p \leq 0.001$ ).

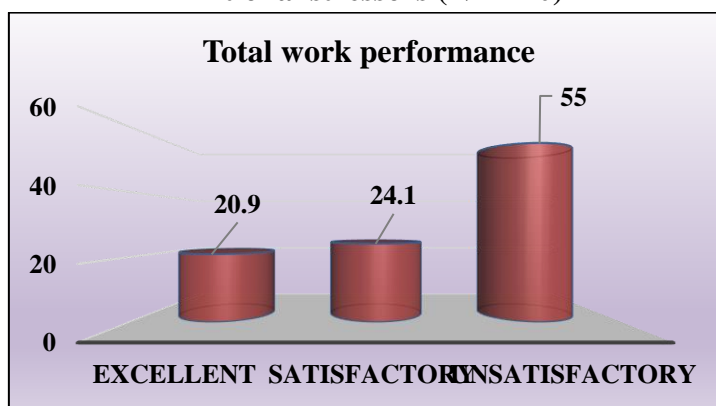
**Table (1): Frequency distribution of the studied nurses according to their socio-demographic characteristics**

Socio-demographic characteristics	No. (N = 220)	%
Age in (years)		
20 < 30	72	32.7
30 < 40	135	61.4
40 or more	13	5.9
Mean $\pm$ SD = 27.3 $\pm$ 5.01		
Gender		
Male	135	61.4
Female	85	38.6
Marital Status		
Single	6	2.7
Married	204	92.7
Divorced	3	1.4
Widow	7	3.2
Residence:		
Rural	155	70.5
Urban	65	29.5
Qualifications		
Nursing diploma	45	20.5
Technical institute of nursing	114	51.8
Bachelor of nursing	53	24.1
Postgraduate studies in nursing	8	3.6
Job title		
Nurse	167	75.9
Nursing Specialist	34	15.5
Supervisor / department supervisor	15	6.8
Head nurse	4	1.8
Department the nurse work in		
Male department	159	72.3
Female department	61	27.7
Years of experience in psychiatric nursing		
1 < 5 years	10	4.5
5 < 10 years	48	21.8
10 < 15 years	40	18.2
> 15 years	122	55.5
Income/ month		
Enough	73	33.2
Not enough	147	66.8

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**Fig (1): Percentage distribution of the studied nurses according to their total score about occupational stressors (N = 220)**



**Figure (2): Percentage distribution of studied nurses according to their total score about work performance (N = 220).**

**Table (2): Correlation coefficient between studied nurses ' total work performance and occupational stressors scores (N = 220).**

Total occupational stressors	Total work performance	
	r	P-value
Job Requirements	- .521	≤ 0.001**
Work and family conflict	- .623	≤ 0.001**
Insufficient support from co-workers or service providers	- .631	≤ 0.001**
Violence in the workplace, verbal abuse	- .192	≤ 0.001**
Organizational issues	- .189	≤ 0.05*
Exposure to occupational hazards	- .724	≤ 0.001**
Offers of the workplace	- .852	≤ 0.001**
Time deficit	- .671	≤ 0.001**
Personal Relationships	- .498	≤ 0.001**
Unmet physiological needs	- .704	≤ 0.001**



**Table (3): Correlation coefficient between studied nurses total work performance and occupational stressors scores (N = 220).**

Variables	Total work performance	
	r	P value
Total occupational stressors	- 0.559	≤ 0.001**

### Discussion

The result of the present study revealed that socio- demographic data of studied nurses . Regarding age of nurses, the findings of the current study cleared that less than two-thirds of the studied nurses was in the age group of 31 - 40 years with a mean age of  $27.33 \pm 5.01$  years. , This result went in the same line with (Chuan, et al., 2020) found that mean age was 30.3 years. This result disagree with (Ali &Omar,2018 ) found that the minority of respondents are in the age group of 31-40 years with a mean age of  $7.763 \pm 4.00$  .

Regarding ,gender of the studied sample the result of present study revealed that less than two-thirds of them were male, from the researcher's point of view most of them are men because their strong structure enables them to deal with psychiatric patients with agitation , this result was consistent with (Shafeeq,2019) found that less than three-quarter of the studied sample were males and less than of one- third of them were females . Additionally, this result was on the contrary with (Gifty,et al.,2020) reported that more than two third of the studied sample were females and less than of one- third of them were males .

Concerning marital status of the studied sample the findings of the current study clears that the majority of them were married, from the researcher's point of view majority of them were married because less than two-thirds of the studied nurses were in the age group of 31 - 40 years and this age is above the age of marriage in Egypt .This result was consistent with (Alenezi & Ab-

oshaiqah,2018) stated that more than half of the studied nurses were married. Also (Dimi-tra, et al., 2018) reported that the majority of the studied nurses were married .Furthermore, the findings of the current study was not consistent with (Chuan, et al., 2020) documented that most of respondents were single

Regarding residence of the studied sample the result of current study illustrated that more than two-third of nurses lived in rural area this result in the same line with (Dhruba,2020) found that less than three-quarters of nurses lived in rural areas. From the researcher's point of view, the majority of the studied sample live in rural areas because most of people in the rural areas have middle-income , so their sons resort to studying nursing and work in it to improve their income ,also the cost of living in rural area is less expensive than urban areas this result was on the contrary with (Ma, et al., 2019) found that two-third of nurses lived in urban area.

As regard to qualification the findings of the current study found that more than half of the studied sample graduated from technical institute of nursing and this result matched with(Ahmed ,et al., 2021) found that more than half of the studied sample graduated from technical institute of nursing. This results disagreed with (Majd&Ibrahim, 2018) found that majority of them( more than three-quarter) have Baccalaureate.

Regarding years of experience in psychiatric nursing the findings of the present study revealed that the years of experience of more than half of the studied nurses were more than 15 years. From the researcher's point of view more than half of the studied

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sample graduated from technical institute of nursing and they are assigned to hospitals at the age of 19 and the majority of the studied nurses were in the age group of 31 - 40 years, subtract 19 from 40, so the resultant is 21 so the years of experience were more than 15 years. This result came in harmony with **(Umoh, 2020)** stated that less than half of the studied nurses were more than 15 years. This results disagree with **(Karim, 2019)** found that more than half of staff nurses have experienced less than 5 years of experience.

As regards, the job title of the studied nurse the findings of the present study found that more than three-quarters of the studied nurses were nurses, this result with consistent with **(Kather, 2018)** reported that three quarter of the studied nurse were staff nurse. From the researcher's point of the majority of the studied nurses were nurses because of more than half of the studied sample graduated from technical institute of nursing. And this result disagree with **(Pavlos, et al., 2019)** found that only one-third of the studied nurse were staff nurse.

Concerning income of the studied nurses the present study reported that less than one-third of studied nurses have enough income. From the researcher's point of the majority of the studied nurses have insufficient income due to high cost of living and the low level of nursing salaries, this result in the same line with **(Rami, et al., 2018)** found that Less one-third of the studied nurses reported that they were 'comfortable' with regard to their income. this result disagree with **(Sunil, et al., 2019)** reported that less than half of the studied nurses have not enough income

Regarding percentage distribution of studied nurses according to their total score about occupational stressors this study illustrated that, less than one-third of the studied

nurses had mild occupational stress, while more than two-fifth of the them had severe occupational stress. From the researcher's point of view more than two-fifth of the them had severe occupational stress because of the many factors of occupational stress such as work and family conflict, job requirements and insufficient support from co-workers or service providers, etc. . This results disagreed with **(Timothy, et al., 2021)** reported that the minority of the studied sample had severe occupational stress and mild occupational stress but more than two third had moderate occupational stress. Also this result disagree with **(Arash & Ali, 2017)** reported that the level of stress in most of the nurses was in medium level.

As regard to correlation coefficient between studied samples' total work performance and occupational stressors scores according to 10 subscales the current study found that there was a negative highly statistical significant correlation between total work performance and occupational stressors scores, From the researcher point of view the more stress factors on nursing in the lower their performance at work, and vice versa. the fewer stress factors, the greater the improvement in their performance at work, this result agree with **(Tariq & Muneeb, 2018)** found that the lack of support and engagement from administration in a psychiatric hospital received the highest frequency from participants as an influencing factor on nurses' performance in psychiatric hospitals. Also **(Hamaideh, 2021)** found that lack of resources for nursing training courses contributed to a decrease in the performance level of nurses and an increase in stress.

There was a negative highly statistical significant correlation between total work performance and occupational stressors scores. From the researcher point of view the stress in

work environment reduces the intention of nurses to perform better in jobs with the increasing level of stress the nursing tendency to work well also decreases. No doubt stress is necessary for increasing work performance of nurses but up to a certain level. In this study the nurses do their job regularly but due to workloads and time constraints their performance reduces. The result of the current study was matched with (Mai, 2018) documented that the higher unsatisfied in working factors and higher level in job stress, the lower the performance employee is. On the other hand, this result was inconsistent with (Akif, 2018) found that there was a significant positive relationship between four stressors and performance as follows: organizational climate had the most influence on performance

### **Conclusions**

There was a negative highly statistical significant correlation between total work performance and occupational stressors scores of studied nurses. The present study revealed that, more than two-fifth of the studied nurses had severe occupational stress, while less than one-third of the studied nurses had mild occupational stress, and more than one-quarter of the studied nurses had moderate occupational stress, more than half of the studied nurses had unsatisfactory level of work performance, while less than one-quarter of the studied nurses had satisfactory level of work performance, and more than one-fifth of them had excellent level of work performance. Additionally there was a negative highly statistical significant correlation between total work performance and occupational stressors scores of studied nurses ( $p \leq 0.05$ ).

### **Recommendations**

#### **Recommendations for psychiatric nurses**

- Designing a psycho-educational program for nurses and continuous intervention programs of stress management.

- Healthy coping methods should be taught to all nurses at regular sessions by professional people in the field of mental health to enable the nurse to solve any problem confront.
- Continuing education should be provided in service training for all nursing working in psychiatric hospital. to keep nurses of new knowledge and technology.

#### **Recommendations for psychiatric hospital**

- Regular word meeting should be conducted with the purpose of enhancing interpersonal relationships among staff ( nurses, physicians and supervisors ) to resolve any conflict among them, communication skills and the expression of the feeling should be practiced in the meeting.
- Psychiatric hospital policy should allow for satisfactory reward system for all nursing staff working in psychiatric hospital.
- Nursing supervisors should be well prepared to provide psychological support to all nurses and to be able to identify nurses 'needs, frustration, help them to express opinions, ideas, and feeling and involve them in the decision making process related to patient care.
- Psychiatric hospital policy should be included strict a laws to protect nursing from the infringement of the patient's relatives.

#### **Recommendations for community:**

- Society must constantly honor psychiatric nursing because they are considered the first line of defense to maintain the mental health of individuals in society
- Recreational activities should be encouraged for all staff working in mental hospital as support from the community to reflect a feeling of satisfaction.

#### **Recommendations for further researcher**

- Further studies by using larger probability sample for generalization of the results by making comparison between two psychiatric hospital or more to know the sources of stress between psychiatric nurses.

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## العلاقة بين مصادر الضغط النفسي وأداء العمل بين التمريض العاملين بمستشفى الصحة النفسية

رقية السيد عبد القوى - سيده أحمد عبداللطيف - ضحى عبدالبصير محمود

أصبح الضغط النفسي المهني أحد العوامل المهمة التي تؤثر على أداء العمل والرضا الوظيفي لدى تمريض مستشفيات الصحة النفسية . ويحدث الضغط النفسي المهني عندما لا تتطابق متطلبات المهنة مع قدرات أو موارد أو احتياجات التمريض . وتعرف منظمة الصحة العالمية الضغط النفسي المهني بأنه "الاستجابات الفسيولوجية والعاطفية التي تحدث عندما يرى التمريض انه لا يوجد توازن بين الجهد المبذول في العمل وما يرتبط به من مكافأة". أصبح الضغط النفسي المهني من أشد المشاكل الصحية التي تتحدى قدرة التمريض النفسي على التأقلم وقد اعتبرت مهنة التمريض واحدة من المهن الأكثر إرهاقا . لذلك هدفت الدراسة إلى تقييم العلاقة بين مصادر الضغط النفسي وأداء العمل لدى التمريض العاملين في مستشفى الأمراض النفسية. و تم استخدام التصميم الوصفي الارتباطي في هذه الدراسة وقد أجريت هذه الدراسة في مستشفى الصحة النفسية والعقلية وعلاج الإدمان بمدينة بنها بمحافظة القليوبية. وأجريت الدراسة على عينة ملائمة من (220) ممرض وممرضة. حيث كشفت النتائج أن أكثر من خمس التمريض الذين شملتهم الدراسة يعانون من ضغط نفسي مهني شديد ، وكان لدى أكثر من نصف التمريض الذين شملتهم الدراسة مستوى غير مرض من أداء العمل. أوصت الدراسة الى تصميم برنامج تربوي نفسي لتعليم التمريض مهارات التعامل مع الضغط النفسي وبرامج للتدخل المستمر في مستشفيات الأمراض النفسية التي توفر المعلومات الصحيحة حول كيفية تعامل التمريض مع الضغط النفسي.