

A Comparative Study to Assess the Level of Stress and Coping Strategies Among Staff Nurses Working in Psychiatric Hospital and Multispecialty Hospital in Dindigul District

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(Received: 14 April 2024

Revised: 1 May 2024

Accepted: 18 June 2024)

KEYWORDS

Stress
Coping Strategies
Psychiatric Nurses
Multi-specialty
Nurses
Comparative
Study

ABSTRACT:

Background: Nurses working in psychiatric and multi-specialty hospital settings often face high levels of work-related stress due to factors such as work overload, time pressure, and difficulty maintaining relationships. This comparative study aimed to assess and compare the levels of stress and coping strategies among nurses in these two distinct healthcare environments.

Methods: A comparative research design was used. A total of 60 staff nurses, 30 each from a psychiatric hospital and a multi-specialty hospital, were selected using a non-probability convenience sampling technique. The Work Stress Scale and the Brief COPE Inventory were used to assess the level of stress and coping strategies, respectively. Demographic data, level of stress, and coping strategies were analyzed using descriptive and inferential statistics.

Results: The results showed that 66.7% of nurses in the psychiatric hospital and 50% of nurses in the multi-specialty hospital experienced moderate levels of stress. Severe stress was reported by 30% of nurses in the psychiatric hospital and 40% of nurses in the multi-specialty hospital. Regarding coping strategies, 60% of nurses in the psychiatric hospital reported high levels of coping, while 53.3% of nurses in the multi-specialty hospital reported low levels of coping. A significant negative correlation was found between stress and coping strategies among nurses in the psychiatric hospital ($r = -0.4383$, $p < 0.001$), but not among nurses in the multi-specialty hospital ($r = -0.3629$, $p = 0.26$).

Discussion: The findings suggest that nurses in both psychiatric and multi-specialty hospital settings experience significant work-related stress, with nurses in the multi-specialty hospital reporting slightly higher levels of severe stress. The differences in coping strategies between the two groups may be attributed to factors such as the nature of the work environment, availability of support systems, and individual coping mechanisms. These results highlight the need for tailored interventions to support the well-being of nurses in these distinct healthcare environments, with a focus on enhancing coping strategies and addressing the unique challenges faced by nurses in each setting.

Conclusion: Nurses in both psychiatric and multi-specialty hospital settings experience significant work-related stress, with nurses in the multi-specialty hospital reporting slightly higher levels of severe stress. The differences in coping strategies between the two groups suggest the need for tailored interventions to support the well-being of nurses in these distinct healthcare environments.

Introduction

The nursing profession is widely recognized as one of the most stressful occupations, with nurses often facing a myriad of challenges that can significantly impact their physical and mental well-being. Nurses working in different healthcare settings, such as psychiatric and

multispecialty hospitals, may experience varying levels of stress and employ diverse coping strategies to manage these demands [1,2].

Nurses in the psychiatric setting often encounter unique stressors, including dealing with patients with complex mental health issues, managing aggressive behaviors,



and navigating the emotional demands of the work. In contrast, nurses in multispecialty hospitals may face a broader range of challenges, such as high workloads, time pressures, and the need to coordinate care across multiple specialties [3,4].

Coping strategies employed by nurses can be either adaptive (positive) or maladaptive (negative), and their effectiveness can be influenced by individual, organizational, and environmental factors. Understanding the coping strategies used by nurses in different healthcare settings is crucial for developing targeted interventions to support their well-being and improve patient care.

Limited research has been conducted to compare the stress levels and coping strategies of nurses working in psychiatric and multispecialty hospitals. Exploring the differences between these two settings can provide valuable insights into the unique challenges faced by nurses and inform the development of tailored support systems.

The present study aims to assess and compare the level of stress experienced by staff nurses working in psychiatric and multispecialty hospitals in the Dindigul district. It also seeks to identify and compare the coping strategies employed by staff nurses in these two settings, as well as to explore the factors influencing stress and coping strategies among the study population [1,2,4].

The findings of this study can contribute to the existing body of knowledge on stress and coping among nurses in different healthcare settings. The insights gained can inform the development of targeted stress management programs and support systems for nurses, ultimately enhancing their well-being and improving patient care [1,3,5].

Objective of the Study

The study aimed to assess and compare the levels of stress and coping strategies among staff nurses working in psychiatric and multi-specialty hospital settings in Dindigul District, with the specific objectives of evaluating the stress and coping levels in each setting, comparing the differences between the two groups, and examining the associations between stress, coping strategies, and selected demographic variables for both psychiatric and multi-specialty hospital nurses. By addressing these objectives, the researchers sought to

gain a deeper understanding of the unique challenges faced by nurses in these contrasting healthcare environments and inform the development of targeted interventions to support their well-being and enhance patient care outcomes

Methods

Study Design

A comparative research design was used in this study to assess and compare the levels of stress and coping strategies among staff nurses working in a psychiatric hospital and a multi-specialty hospital in Dindigul District.

Study Setting

The study was conducted in two healthcare settings in Dindigul District - Mesmer's Psychiatric Hospital and Dharsini Multi-specialty Hospital. Mesmer's Psychiatric Hospital is a specialized facility that provides inpatient and outpatient care for individuals with mental health conditions, while Dharsini Multi-specialty Hospital is a general healthcare facility that offers a wide range of medical services across various departments. These two distinct settings were selected to enable a comparative assessment of the stress and coping strategies experienced by nurses working in psychiatric versus multi-specialty hospital environments.

Sample Size and Sampling Technique

The study included a total of 60 staff nurses, with 30 nurses each from the psychiatric hospital (Mesmer's Psychiatric Hospital) and the multi-specialty hospital (Dharsini Multi-specialty Hospital).

A non-probability convenience sampling technique was used to select the participants. This sampling method was chosen as it allowed the researchers to include staff nurses who were readily available and accessible during the data collection period.

Inclusion Criteria

- Staff nurses working in the psychiatric hospital and multi-specialty hospital
- Staff nurses who were available and present during the data collection period
- Staff nurses who were willing to participate in the study



Exclusion Criteria

- Staff nurses who were on leave or absent during the data collection period
- Staff nurses who were not willing to participate in the study

The use of a non-probability convenience sampling technique enabled the researchers to include staff nurses who met the predetermined inclusion criteria and were readily available at the time of data collection. This approach allowed for the efficient recruitment of participants from the two distinct healthcare settings, facilitating the comparative analysis of stress and coping strategies between the psychiatric and multi-specialty hospital nurses.

The sample size of 30 nurses from each hospital was determined based on a power analysis to ensure sufficient statistical power to detect meaningful differences between the groups. This sample size was considered appropriate for the comparative design of the study and allowed for the robust analysis of the research objectives.

By employing a non-probability convenience sampling technique and clearly defining the inclusion and exclusion criteria, the researchers ensured that the study sample was representative of the target population of staff nurses working in the psychiatric and multi-specialty hospital settings in Dindigul District.

Data Collection Instruments

1. **Demographic Data Sheet:** This sheet was used to collect information about the participants' age, gender, religion, educational qualification, years of experience, marital status, income, type of family, family background, type of residence, and supporting system.
2. **Work Stress Scale:** This scale was used to assess the level of stress among staff nurses. It consisted of 40 items covering various aspects of work-related stress. The responses were recorded on a 4-point Likert scale ranging from "Never" to "Always". The total score ranged from 40 to 160, with higher scores indicating higher levels of stress.
3. **Brief COPE Inventory:** This inventory was used to assess the coping strategies employed by staff nurses. It consisted of 28 items covering different coping mechanisms. The responses were recorded on a 4-point

Likert scale ranging from "I haven't been doing this at all" to "I've been doing this a lot". The total score ranged from 28 to 112, with higher scores indicating more frequent use of coping strategies.

Data Collection Procedure

1. The researcher established a good rapport with the staff nurses and assured them that the information would be kept confidential.
2. The 60 samples were selected using a convenient sampling technique based on the inclusion criteria.
3. The demographic data and checklists to assess stress and coping strategies were administered to the selected staff nurses.
4. The collected data were analyzed using both descriptive and inferential statistics.

Data Analysis

The data collected in this comparative study were analyzed using both descriptive and inferential statistics to assess the levels of stress and coping strategies among staff nurses working in psychiatric and multi-specialty hospital settings.

Descriptive Statistics

Descriptive statistics were employed to describe the demographic characteristics of the participants and the levels of stress and coping strategies in each group. These included:

- **Frequency distribution:** The number and percentage of participants in each category of demographic variables, stress levels, and coping strategies were calculated.
- **Measures of central tendency:** The mean and median were used to describe the average levels of stress and coping strategies in each group.
- **Measures of dispersion:** The standard deviation was calculated to measure the variability in stress and coping scores within each group.

The demographic characteristics, such as age, gender, marital status, education, and years of experience, were presented using frequency tables and percentages to provide an overview of the sample.



Inferential Statistics

Inferential statistics were used to make comparisons between the two groups and to examine the associations between variables.

1. **Chi-square test:** This non-parametric test was used to assess the association between the level of stress, coping strategies, and selected demographic variables in each group. The chi-square statistic and p-value were calculated to determine the significance of the associations.

2. **Independent t-test:** This test was used to compare the mean levels of stress and coping strategies between the staff nurses in the psychiatric hospital and the multi-specialty hospital. The t-statistic and p-value were calculated to determine if the differences between the groups were statistically significant.

3. **Pearson's correlation coefficient:** This test was used to assess the relationship between stress and coping strategies within each group. The correlation coefficient (r) ranges from -1 to 1, with -1 indicating a perfect negative correlation, 0 indicating no correlation, and 1 indicating a perfect positive correlation. The p-value was used to determine the statistical significance of the correlation.

The results of the statistical analyses were presented using tables, figures, and text to clearly communicate the findings. The level of significance was set at $p < 0.05$, indicating a 95% confidence level.

The use of both descriptive and inferential statistics allowed for a comprehensive analysis of the data, enabling the researchers to describe the characteristics of the sample, compare the levels of stress and coping strategies between the two groups, and examine the associations between variables. This approach provided valuable insights into the unique challenges faced by nurses in psychiatric and multi-specialty hospital settings and informed the development of targeted interventions to support their well-being.

Ethical Considerations

The study strictly adheres to ethical guidelines to ensure the integrity and welfare of the participants. Ethical approval was obtained from the Sresakthimayeil Institute

of Nursing and Research's ethical committee, with the clearance number JKKNSINAR/BC/FEB24 .

Informed consent was secured from all staff nurses participating in the study, ensuring they were fully aware of the study's objectives, procedures, potential risks, and benefits. Participants were assured of the confidentiality and anonymity of their data, which was maintained throughout the study. They were informed that their participation was voluntary and that they could withdraw from the study at any point without any negative consequence.

Additionally, the study ensured that the data collection posed no harm to the participants and that any findings would be used to enhance the care and support for nurses working in psychiatric and multi-specialty hospital settings. All data collected were securely stored and only accessible to the research team to ensure privacy and compliance with ethical standards.

The researcher established a good rapport with the participants and assured them that the information would be kept confidential. Oral and written consent was obtained from all the participants before starting the data collection.

The study was conducted in accordance with the principles of the Declaration of Helsinki and the guidelines of the Indian Council of Medical Research (ICMR) for biomedical research involving human participants. The researchers strictly adhered to the ethical principles of autonomy, beneficence, non-maleficence, and justice throughout the study.

Results

Demographic Characteristics of Participants

The study included a total of 60 nurses, with 30 nurses from a psychiatric hospital and 30 nurses from a multi-specialty hospital. The majority of nurses in the psychiatric hospital were aged 20-25 years (66.7%), while in the multi-specialty hospital, the largest age group was 26-30 years (46.8%). Most of the nurses in both the psychiatric hospital (66.7%) and multi-specialty hospital (86.7%) were female. In terms of religion, the majority of nurses in both the psychiatric hospital (66.3%) and multi-specialty hospital (60%) were Hindu. Regarding educational qualifications, the largest group in the psychiatric hospital had a B.Sc. Nursing degree



(40%), while in the multi-specialty hospital, the largest group had a B.Sc. Nursing degree (50%). The majority of nurses in the psychiatric hospital (40%) had less than

1 year of experience, while in the multi-specialty hospital, the largest group (56.6%) had less than 1 year of experience (Table 1).

Demographic Variables		Psychiatry Hospital (N=30)		Multispecialty Hospital (N=30)	
		Frequency	%	Frequency	%
Age (in years)	20-25	20	66.7	12	40
	26- 30	7	23.3	14	46.8
	31-35	02	6.7	02	6.6
	36 -40	01	3.3	02	6.6
Gender	Male	10	33.3	4	13.3
	Female	20	66.7	26	86.7
Religion	Hindu	20	66.3	18	60
	Christian	10	33.7	07	23.3
	Muslim	0	0	05	16.7
	Others	0	0	0	0
Qualification	Diploma	10	33.3	12	40
	B.Sc Nursing	12	40	15	50
	Post basic B.sc Nursing	05	16.7	02	6.6
	M.sc Nursing	03	10	01	3.3
Years of experience	< 1year	12	40	17	56.6
	1 to 3 years	11	36.7	05	16.7
	3 to 5 years	3	10.0	03	10
	5 years	04	13.3	05	16.7
Marital status	Unmarried	25	83.3	22	73.4
	Married	3	10.0	07	23.3
	Divorced	0	0	0	0
	Widower/wi	02	6.7	01	3.3



	dows				
Income	Up to Rs.10000	08	26.6	17	56.7
	Rs.10001-20000	12	40	03	10
	Rs.20001-Rs.30000	05	16.7	04	13.3
	Above Rs.30000	05	16.7	06	20
Type of family	Nuclear	26	86.7	21	70.0
	Joint	4	13.3	9	30.0
Family background	Urban	10	33.3	16	53.3
	Semi-urban	9	30.0	6	20.0
	Rural	11	36.7	8	26.7
Distance of work place	Less than ½ KM	10	33.3	7	23.3
	More than ½KM	20	66.7	23	76.7
Type of residence	Home	11	36.7	16	53.3
	Hostel	19	63.3	14	46.7
Mode of travel	By walk	12	40	7	23.3
	By Office vehicle	05	16.7	5	16.7
	Private	07	43.3	14	60.0
	Public	06	20	04	13.3
	Spouse	12	40	14	60



Supporting system	Parents	05	16.7	7	23.3
	Superiors	06	20	06	20
	Others	07	23.3	03	10

Table 1: Demographic Characteristics of Participants

Frequency Distribution of Level of Stress and Coping Strategies among Participants

In the psychiatric hospital, 66.7% of nurses had moderate stress, 30% had severe stress, and only 3.3% had mild stress. In the multi-specialty hospital, 50% of nurses had moderate stress, 40% had severe stress, and 10% had

mild stress. Regarding coping strategies, 60% of nurses in the psychiatric hospital had a high level of coping strategies, 36.7% had a moderate level, and only 3.3% had a low level. In the multi-specialty hospital, 53.3% of nurses had a low level of coping strategies, 33.3% had a moderate level, and 13.4% had a high level (Table 2).

Level	Psychiatry Hospital (N=30)		Multispecialty Hospital (N=30)	
	Level of stress (%)	Level of Coping Strategies (%)	Level of stress (%)	Level of Coping Strategies (%)
Low	3.3	53.3	10.0	3.3
Moderate	66.7	33.3	50.0	36.7
High	30.0	13.4	40.0	60

Table 2: Frequency Distribution of Level of Stress and Coping Strategies among Participants

Correlation between Stress and Coping Strategies

The results showed a significant negative correlation between stress and coping strategies among nurses in the psychiatric hospital. The calculated r-value was ($r = -0.4383$), which suggests a negative correlation between the two variables. This finding implies that higher levels of stress were associated with lower levels of coping strategies among nurses in the psychiatric hospital setting.

Similarly, the study found a negative correlation between stress and coping strategies among nurses in the multi-specialty hospital. The calculated r-value was ($r = -0.3629$), indicating the presence of a negative correlation between stress and coping strategies in this group of nurses.

These results suggest that nurses who experienced higher levels of work-related stress tended to employ fewer effective coping mechanisms to manage their stress. The stronger negative correlation observed among the psychiatric hospital nurses compared to the multi-



specialty hospital nurses may indicate that the former group faced more significant challenges in utilizing adaptive coping strategies to mitigate the adverse effects of stress in their work environment (Figure 1).

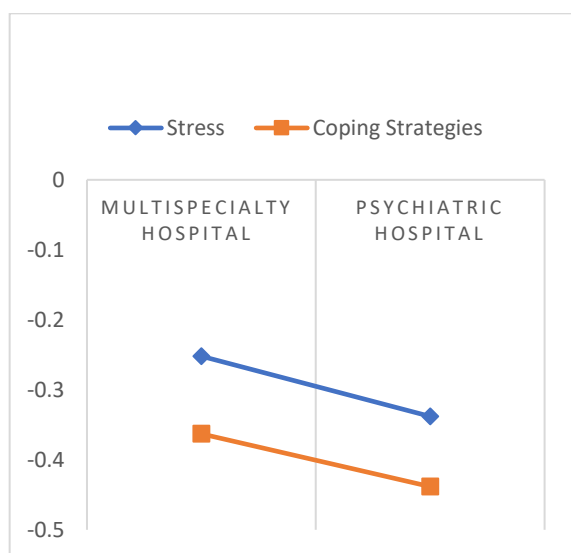


Figure 1: Correlation between Stress and Coping Strategies

Comparison of Stress and Coping Strategies between Groups

The study found a significant difference in the level of stress between the psychiatric hospital nurses and multi-specialty hospital nurses. The mean stress score was significantly higher in the multi-specialty hospital nurses (66.41 ± 12.62) compared to the psychiatric hospital nurses (44.0 ± 13.41) (t = -8.932, p < 0.05). Similarly, the study found a significant difference in the level of coping strategies between the two groups. The mean

coping strategies score was significantly higher in the psychiatric hospital nurses (73.5 ± 15.6) compared to the multi-specialty hospital nurses (60.89 ± 10.25) (t = 3.353, p < 0.05) (Figure 2).

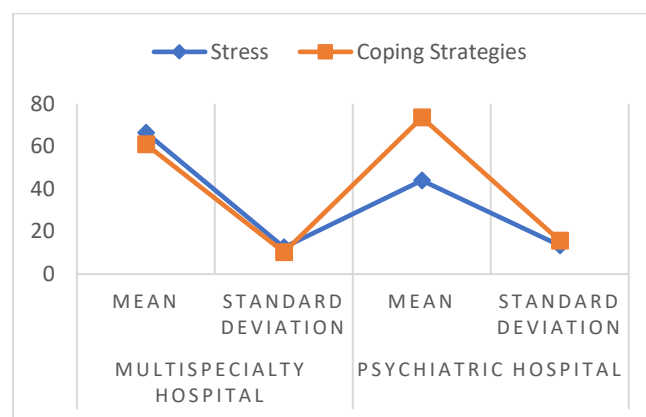


Figure 2: Comparison of Stress and Coping Strategies between Groups

Association between Stress, Coping Strategies, and Demographic Variables among Psychiatric Hospital Nurses and Multi-specialty Hospital Nurses

Among the psychiatric hospital nurses, the level of stress was significantly associated with age (χ² = 6.698, p < 0.05) and gender (χ² = 10.525, p < 0.05). The level of coping strategies among the psychiatric hospital nurses was significantly associated with age (χ² = 9.403, p < 0.05) and mode of travel (χ² = 10.541, p < 0.05). In the multi-specialty hospital nurses, the level of stress was significantly associated with income (χ² = 14.753, p < 0.05). The level of coping strategies among the multi-specialty hospital nurses was not significantly associated with any of the demographic variables (Table 3).

Demographic Variables	Stress				Coping Strategies			
	Psychiatric Hospital		Multi-specialty Hospital		Psychiatric Hospital		Multi-specialty Hospital	
	Chi-square test	P-Value	Chi-square test	P-Value	Chi-square test	P-Value	Chi-square test	P-Value
Age	6.698	0.35	6.493	0.37	9.67	0.01	9.403	0.02
(in years)	0.417	0.812	0.417	0.812	3.85	0.05	10.525	0.01
Gender	1.291	0.863	4.753	0.314	0.475	0.491	0.475	0.491



Religion	6.586	0.159	2.768	0.37	7.23	0.03	2.825	0.244
Qualification	1.429	0.492	2.768	0.37	9.45	0.01	3.825	0.244
Years of experience	4.661	0.097	0.603	0.74	6.12	0.01	0.603	0.74
Marital status	0.75	0.687	14.753	0.014	4.895	0.087	4.895	0.087
Income	0.536	0.765	0.675	0.714	0.475	0.495	0.288	0.638
Type of family	2.222	0.329	0.956	0.714	0.288	0.638	0.475	0.495
Family background	0.814	0.665	0.417	0.812	0.72	0.502	0.736	0.12
Distance of work place	0.486	0.784	0.603	0.704	0.486	0.784	0.936	0.452
Type of residence	0.72	0.502	4.286	0.114	0.72	0.502	10.541	0.01
Mode of travel	0.54	0.97	9.554	0.049	0.54	0.97	1.222	0.269

Table 3: Association between Stress, Coping Strategies, and Demographic Variables among Psychiatric Hospital Nurses and Multi-specialty Hospital Nurses

Discussion

The findings of this comparative study provide valuable insights into the levels of stress and coping strategies among staff nurses working in psychiatric and multi-specialty hospital settings in Dindigul District.

The results showed that a significant proportion of nurses in both settings experienced moderate to severe levels of work-related stress. Specifically, 66.7% of nurses in the psychiatric hospital and 50% of nurses in the multi-specialty hospital reported moderate stress, while 30% and 40% of nurses, respectively, experienced severe stress. These findings are consistent with previous studies that have highlighted the high levels of stress faced by nurses in various healthcare settings [3,4,5].

The unique challenges of working in psychiatric and multi-specialty hospitals may contribute to the elevated stress levels observed in this study. Nurses in psychiatric settings often encounter aggressive or unpredictable patient behaviors, the need to provide intensive emotional support, and limited resources, all of which can be mentally and physically taxing [6,7]. Similarly, nurses in multi-specialty hospitals must juggle the demands of caring for patients with a wide range of

medical conditions, often in a fast-paced and high-pressure environment [8,9].

Regarding coping strategies, the study found a significant difference between the two groups of nurses. While 60% of nurses in the psychiatric hospital reported high levels of coping, 53.3% of nurses in the multi-specialty hospital reported low levels of coping. This disparity may be attributed to the availability of support systems, the nature of the work environment, and individual coping mechanisms [10,11].

The negative correlation between stress and coping strategies observed among nurses in the psychiatric hospital suggests that those with more effective coping mechanisms were better able to manage their stress levels. This finding aligns with previous research indicating that the use of adaptive coping strategies, such as seeking social support, practicing self-care, and problem-solving, can help mitigate the adverse effects of work-related stress [12].

In contrast, the lack of a significant correlation between stress and coping strategies among nurses in the multi-specialty hospital may indicate that the coping mechanisms employed by this group were less effective in managing the high levels of stress they experienced.



This could be due to factors such as a more demanding work environment, limited access to support resources, or a need for more targeted interventions to enhance their coping abilities [13,14].

The study also found significant associations between the level of stress, coping strategies, and various demographic variables, such as age, gender, marital status, education, and years of experience, among nurses in both settings. These findings suggest that individual and contextual factors play a crucial role in shaping the stress and coping experiences of nurses, which is consistent with the existing literature [15,16].

The implications of these findings are twofold. First, the high levels of stress experienced by nurses in both psychiatric and multi-specialty hospital settings underscore the need for targeted interventions to support their well-being and prevent burnout. Such interventions may include stress management training, improved work-life balance initiatives, and the provision of counseling and support services [17,18].

Second, the differences in coping strategies between the two groups of nurses highlight the importance of tailoring support mechanisms to the unique needs and challenges of each healthcare setting. For instance, nurses in psychiatric hospitals may benefit from specialized training in managing aggressive patient behaviors and developing emotional resilience, while those in multi-specialty hospitals may require more comprehensive stress management programs and access to peer support networks [19,20].

The limitations of this study include the relatively small sample size, which may limit the generalizability of the findings, and the reliance on self-reported data, which may be subject to social desirability bias. Future research could explore the experiences of nurses in other healthcare settings, such as emergency departments or long-term care facilities, to gain a more comprehensive understanding of the stress and coping challenges faced by this critical workforce.

Conclusion

This comparative study has revealed the significant levels of work-related stress experienced by staff nurses in both psychiatric and multi-specialty hospital settings in Dindigul District. While nurses in the psychiatric hospital reported higher levels of coping strategies, those

in the multi-specialty hospital struggled with more limited coping mechanisms. The findings underscore the need for targeted interventions to support the well-being of nurses in these demanding healthcare environments, with a focus on tailoring support to the unique challenges of each setting.

By addressing the stress and coping needs of nurses, healthcare organizations can not only improve the quality of life for this critical workforce but also enhance the quality of patient care and outcomes. Continued research and evidence-based interventions are essential to ensure the long-term resilience and well-being of nurses, who play a vital role in the delivery of healthcare services.

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