The Impact of Stress on Job Satisfaction among Nurses in Jordan University Hospital: Quantitative Research Proposal

Ahmad M. Saleh
Faculty of Nursing, The University of Jordan, Amman, Jordan
al_raminv@yahoo.com

Abstract: Stress is accounted to be a process in which environmental events or forces, known as stressors, threaten an organism’s existence and wellbeing. Several professions with totally different jobs are confronted by different types of stress, that is, impress job environment which resulting affects job performance. The purpose of this paper is to learn how to create a proposal to study the effect of stress on job satisfaction based on Polit & Beck guidelines, 2012


Keywords: Job Satisfaction – Qualitative research Proposal – Stress.

1. Introduction and Background
Stress is defined as “a physical, chemical, or emotional issue that causes bodily or mental tension and could be an issue in disease causation” as Merriam – Webster definition. (Nedd, 2006) described stress as the emotional and physical reactions resulting from the interactions between the nurse and her/his work setting where the demands of the duty exceed capabilities and resources. Anger, frustration, guilt, hurt, anxiety, apathy, and illness are the most universally observed emotional reactions to stress (ILO, 2001).

Stress is accounted to be a process in which environmental events or forces, known as stressors, threaten an organism’s existence and wellbeing (Engel, 2004). Several professions with totally different jobs are confronted by different types of stress, that is, impress job environment which resulting affects job performance (Abu AlRub, 2004). One of these professions is nursing; Nursing is a highly stressful occupation (Kawano, 2008). Nurses are notably at risk from stress-related problems, with high rates of turnover, absenteeism, and burnout (Antigoni et al, 2011) and (Mark and Smith, 2011)

Various studies have focused on work stress in nurses because they work in high-stress environment, which has detrimental effects both on their mental and physical health, productivity and efficacy at work, absenteeism, as well as on patients' outcomes like increased mortality and patient dissatisfaction (Vahey et al., 2004).

Job satisfaction is defined as the positive feeling or attitude regarding various aspects of the job (Lu et al., 2005), higher levels of nurse job satisfaction are positively linked to improved quality of care, patient outcomes (Adams & Bond, 2000), and retention of staff (Newman et al., 2001). Job stress, on the other hand is the divergence that exists between role expectations and what is being accomplished in that role (McVicar, 2003); excessive chronic job stress has also been linked to job dissatisfaction, which lead to burnout (Jourdain & Chenevèrt, 2010).

According to the World Health Organization, stress is the number one health problem in the world. There is a growing understanding that job related stress negatively affects the health of employees. Of particular concern are the effects of stress on health care professionals, particularly nurses (Lambert et al., 2007). for example, an extra-ordinary stress may be accountable for an individual’s coronary diseases, hypertension, headaches, asthma, peptic ulcers, and lower-back pain among others (Siu et al., 2002), and others of mental and physical health (Lambert et al., 2007). This, in turn, induces lower work productivity, job morale (Pejic, 2005), and other human resource management problems, like higher absenteeism, lower job satisfaction (Healy & Mckay, 2000; Lee, 2004), and higher turnover (Throckmorton, 2007). As a result, higher operational costs, lower job efficiency, and worse service quality may occur, all of which are detrimental to the hospital’s performance.

By understanding the effect of stress on job satisfaction, better stress management approaches can be established. As a result, the quality of care might be improved when provided by staff nurses who have lower levels of stress. In addition, reducing the level of stress might help to retain staff and thus alleviate the nursing job dissatisfaction.
2. Problem Statement
There are limited studies that examined the impact of stress on job satisfaction for nurses in Jordan, particularly the Eastern Province. Therefore, I believe that further studies are needed now more than ever because of the rapid changes and the complex technology characteristic of the health care system.

3. Objectives/ Research Questions
The study objectives are: (1) To determine and describe the main stressors that affect nurse’s job satisfaction in Jordan University Hospital. (2) To determine which area of practice has stressful effect on job satisfaction. (3) To investigate the relationship between the impacts of stress on job satisfaction for nurses. The study will answer the following questions among Jordanian nurses working in hospital: (1) What are the main stressors that affect nurse’s job satisfaction in Jordan University Hospital? (2) What is the area of practice that has stressful effect on job satisfaction? (3) What is the relationship between the impacts of stress on job satisfaction for nurses? (4) The ultimate goal of the study is to identify these factors, and thus inform future intervention studies that may overcome these dissatisfaction factors and to increase nursing job satisfaction.

4. Significance
Work related stress can result in workers being less productive and may impact on the quality of services provided by health professionals, and may place these nurses at high risk of making errors (International Labour Organisation, 2001). Becky (1994) argue that negative behaviors of stressed employees include apathy, paranoia, and distrust. The failure to determine these problems amongst nurses at an early stage is thus likely to have a major impact on the effectiveness of nursing services and patient care. Such stressors may also contribute to an increase in psychiatric morbidity like depression, as well as an increase in some forms of physical illness, such as musculoskeletal problems (Higgins, 2003). Murphy (2004) argues that if nurses feel stressed at work; their practice will suffer, ultimately affecting the care of the patients. Cartwright and Cooper (1996) suggest that there is a strong need for a proactive management approach that recognizes an organizational responsibility to manage and effectively determine and minimize potential stressors within the workplace.

5. Study Variables
The study designed to investigate the relationship between stress and job satisfaction based on demographic variables like gender, age, experience and area of work.

6. Relevant Literature Review
Stress is as traditional as the nature of the resistance of life (Sullivan, & Decker, 2009); people faced with the situations from daily life, which created stress, tensions. Huber (2006) proposed that nursing work is one of the most stressful and challenging. Moreover, the nurses continuously have faced special, complicated situation, and requirement to hand emergency events.

Job stress can be accumulated with day-to-day, and if it is not resolved or adapt, it will develop too high and consequences will cause burnout and decrease individual productivity (Huber, 2006). Symptoms of stress impact on the organizations, these express majors on the job like leading to job dissatisfaction, high absenteeism, as well as turnover, poor quality control (Murphy, 2004). Here are some valid evidences that stress impacts on health of humans. Therefore, studies on job stress is needed.

(Chen, Lin, Wang, & Hou, 2009) were performed the study on 121 nurses working at seven hospitals in Yunlin and Chiayi Counties to determine the stressors, the stress coping methods, and the job satisfaction. They found that stress level and frequency perception of nurses was significantly related to the type of hospital; the most intense stressor perceived by nurses was patient safety. They noticed that differences in working environment and administrative management could receive job satisfaction and job stress differently. Besides, they also found that nurse older than 40 years and who had worked for more than 20 years perceived a lot of stress than others; nurses who were single or had no children more frequently adapt difficultly with stress than the others; nurses with monthly salaries less than (950 USD) perceived lower satisfaction than others. Furthermore, those employed in their present hospital for more than 20 years perceived higher self-esteem satisfaction than those employed in their present hospital for less than 5 years.

Hamidi and Eivazi (2010) identify the levels of employees’ job stress in urban health centers in Hamadan, Iran. They surveyed 120 employees. The result showed that the participants in all of the health centers were at moderate level of stress. There was a positive correlation between performance and the midlevel of employees’ stress which was found (r = 0.69, p < 0.05). In addition, the results of a study by Christina and Konstantinos (2008) support the above findings. Christina and Konstantinos explored nurses’ job stress in Greek registered mental health and assistant nurses. They survey 85 register mental health and assistant nurses working in six acute psychiatric wards. The results reported that nurses...
experienced moderate level of stress and overall were satisfied with their job.

In health care field, job satisfaction could be a complex phenomenon. Many factors contribute to nursing satisfaction, both positive and negative. In a literature review, Garon and Ringl (2004) indicated issue variables that influence job satisfaction of hospital-based RNs. These issues are: 1) working conditions including workload and staffing; 2) working environment: empowerment, autonomy, shared governance, and control over practice; 3) salary, benefits and educational support; 4) stress; 5) leadership issues; 6) role conflict and confusion; 7) professional recognition; 8) nurse physician communication and collaboration; 9) hours, shift work and scheduling; and 10) peer group and sense of belonging.

Blegen (2001) meta-analyzed factors related to nurses’ job satisfaction on 48 studies. The results of the study indicated that 13 factors were most strongly related to job satisfaction. These were stress, commitment, communication (with supervisor and peers), autonomy (and locus of control), recognition and fairness. Researchers noticed that job satisfaction is a complex concept and it cannot be affected by one factor, but must be a combination of many factors.

Lephalala et al., (2008) determined factors influencing nurses’ job satisfaction in selected private hospitals in England. The results indicated no satisfaction with salaries. In contrast, nurses were reported satisfied with the other extrinsic factors including organization and administration policies, supervision and interpersonal relations. Nurses identified factors influencing job satisfaction including lack of promotions, lack of opportunity for advancement, being in death-end jobs, and lack of involvement in decision-and policy-making activities.

It has been reported that difference in working environment may create the difference in job satisfaction. Aiken et al. (2001) conducted a survey on nurses’ job satisfaction in five countries. Findings were low satisfaction among nurses. Job dissatisfaction among nurses was highest in the United States (41%) followed by Scotland (38%), England (36%), Canada (33%) and Germany (17%). One third of nurses in England and Scotland and more than one fifth in the United States planned on leaving their job within 12 months of data collection, in that, there were 27–54% of nurses under 30 years of age planned on leaving in all countries. Regarding the work climate, only about one third of nurses in Canada and Scotland felt that they have autonomy in their work in comparison with more than half in the other three countries. When compared with other countries, the nurses in Germany (61%) reported that they were more satisfied with the opportunities for advancement while the nurses in the United States (57%) and Canada (69%) felt more satisfied with their wages.

However, there are some studies that also have shown nurses were satisfaction with work. Bjørk, Samdal, Hansen, Torstad, and Hamilton (2007) conducted a survey with 2095 nurses in four different hospitals in Norway. The results showed nurses’ actual satisfaction with their job, the most satisfaction is professional status (5.50) followed closely by interaction as second, and autonomy as third. However, three remaining components have the score that is much lower, with task requirement (3.75), organizational politics (3.77), and pay (2.62).

There were different levels of job satisfaction between countries. A survey was conducted by Curtis (2007) in Ireland with a sample of 2000 nurses. The results reported that had moderate levels of job satisfaction. In that, they felt satisfied with professional status, interaction and autonomy, while pay and organizational policies were reported to make the least contribution nurses’ job satisfaction (Curtis, 2007).

Some studies have been conducted to determine nurses’ job satisfaction in Bhutan. Job satisfaction was measured by Job Satisfaction Survey developed by Spector (Norbu, 2010; Pemo, 2004). The findings of these studies indicated that nursing staffs had moderate levels of job satisfaction. They found that staff nurses felt satisfied with coworkers and nature of work, while less satisfied with fringe benefits, contingent rewards, and operating procedures. Norbu (2010) revealed supervisor social support had positive correlation, and workload had negative correlation with job satisfaction among staff nurses.

In brief, many studies have explored nurses’ job satisfaction from various perspectives. Some studies have shown that many factors in working environment associated with nurses’ job satisfaction following either positive (i.e. such as are as pay, benefits, promotion, recognition, communication with partner, autonomy, etc.) or negative ways. From the review, there are negative factors, which are job stress and role stress. This study concerns to examine level of nurse’s job satisfaction among these factors.

7. Methodology

7.1. Research Design

Non-experimental, descriptive correlational design will be used to describe the main stressors that affect nurse’s job satisfaction and to examine the relationships among variables rather than to support inferences of causality (Burns and Grove, 2005).
7.2. Study Sample

Target Population estimated to be 500 staff nurses, so the sampling will be 217 (Confidence Level = 95%, Margin of Error = 5%) according to the research advisors article (2006).

A convenience sample of 217 registered nurses will be recruited to reach participants from the following units that are medical intensive care unit, surgical intensive care unit, pediatric intensive care unit, pediatric unit, emergency department, medical ward and surgical ward. However, researcher acknowledge that this type of non-probability sampling method will provide little opportunity to control for biases.

Criteria for inclusion into the study is to be a registered nurse (staff nurse), working in the same area for at least 6 months, full time employment and able to read, write, and comprehend the English language in a competent way. The exclusion criteria are to be a head nurse or supervisor, working in the same area, part time employment staff nurse, and nurses who are permanent on one shift (A, B or C shift).

9. Plan for Data Collection

Two instrument will be used to collect data from the participant that are:

Expanded Nursing Stress Scale (ENSS) will be used to measure sources and frequency of stress perceived by nurses. The ENSS is an expanded and updated revision of the classic Nursing Stress Scale (NSS) developed by Gray- Toft & Anderson (1981). The NSS was the first instrument to target nursing stress rather than general job stress. The original 34 items of the NSS measured the frequency and major sources of stress by nurses on hospital units (Gray-Toft& Anderson, 1981). Major changes in health care delivery and the work environment of nurses since the development of the NSS stimulated French et al. (2000) to identify stressful situations not reflected in the NSS and develop an expanded version useful for diverse work settings. ENSS contained 57 items in nine subscales: (a) Death and Dying, (b) Conflict with Physicians, (c) Inadequate Emotional Preparation, (e) Problems Relating to Peers, (f) Problems Relating to Supervisors, (g) Work Load, (h) Uncertainty Concerning Treatment, (i) Patients and their Families, and (j) Discrimination. The 57 items were arranged in a 5-point Likert response scale. The response was “never stressful” (1), “occasionally stressful” (2), “Frequently stressful” (3), “extremely stressful” (4), and doesn’t apply (5) (French et al., 2000).

The alpha reliability for the whole scale was 0.79. It was 0.84 for the “death and dying” subscale, 0.78 for the "conflict with physicians," 0.74 for the “Inadequate emotional support,” 0.70 for the "Problems relating to peers," 0.88 for the “Problems Relating to Supervisors,” 0.86 for "work load," 0.83 for "uncertainty concerning treatment," 0.87 for "patients and families" and “.65 for “discrimination”. Concurrent and construct validity assessment provided a strong support for the ENSS.

Job satisfaction scale (JSS) will be used to measure employee job satisfaction for nurses. The Job Satisfaction Survey has some of its items written in each direction-positive and negative. Scores on each of nine facet subscales, based on four items each, can range from 4 to 24; while scores for total job satisfaction, based on the sum of all 36 items, can range from 36 to 216. Each item is scored from 1 to 6 if the original response choices are used. High scores on the scale represent job satisfaction, so the scores on the negatively worded items must be reversed before summing with the positively worded into facet or total scores. A score of 6 representing strongest agreement with a negatively worded item is considered equivalent to a score of 1 representing strongest disagreement on a positively worded item, allowing them to be combined meaningfully. The nine facets are Pay, Promotion, Supervision, Fringe Benefits, Contingent Rewards (performance-based rewards), Operating Procedures (required rules and procedures), Coworkers, Nature of Work, and Communication. (Spector, 1985).

The alpha reliability for the whole scale was 0.91. It was 0.75 for the “Pay” subscale, 0.73 for the “Promotion,” 0.82 for the “Supervision,” 0.73 for the “Fringe Benefits,” 0.76 for the “Contingent Rewards,” 0.62 for “Operating Procedures,” 0.60 for “Coworkers,” 0.78 for “Nature of Work” and “.71 for “Communication”. Validity correlations subscales were significantly larger than zero and of reasonable magnitude, .61 to .80.

10. Ethical Considerations

This study is intended to protect human rights. The details of the study are fully disclosed in the informed consent. The researchers will be available at the time of consent and throughout the study to answer questions from the participants. Strategies will be utilized to protect the participant data who agreed to participate in this study. At any time during the study, participants may voluntarily remove themselves from the study.

The research proposal will be submitted to the University of Jordan Institutional Review Board for approval before the implementation of the study. In addition, approval from hospital will be taken. All information collected during this study will be kept
confidential, and participants will not be named if the research were to be published.

11. Plan for Data analysis

IBM SPSS Statistics (version 19) will be used to analyze the results. Data analysis consisted of descriptive and Correlation analysis; Descriptive statistics for demographic variables and two-tailed t-test (independent sample test) will be used to investigate the effect of gender on perceived job related stress. In addition, one-way ANOVA test will be used to investigate the effect of work place (ICU, emergency, pediatric, medical wards, and surgical wards) on the perceived job related stress and Pearson correlation will be used to identify the relationship between stress and job satisfaction.

Corresponding Author:
Ahmad M. Saleh
Faculty of Nursing, The university of Jordan, Amman, Jordan
Email: al_raminy@yahoo.com

References
Psychology, DOI:10.1111/j.20448287.2011.02051.x, 1:17,

Received September 15, 2015; revised September 20, 2015; accepted September 24, 2015; published online October 2, 2015.