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شبكة المعلومات الجامعية التوثيق الالكتروني والميكروفيلم



شبكة المعلومات الجامعية

جامعة عين شمس

التوثيق الالكتروني والميكروفيلم

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بالرسالة صفحات لم ترد بالاصل





PERCEIVED SOURCES OF STRESS AND REACTIONS TO STRESSFUL SITUATIONS AMONG NURSES WORKING IN PSYCHIATRIC HOSPITALS

THESIS

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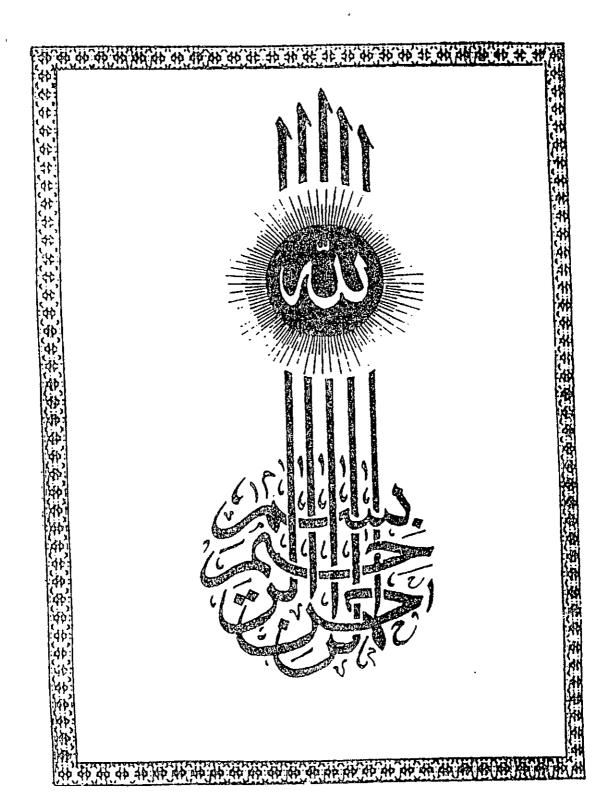
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TO THE MEMORY OF MY PARENTS

TO MY HUSBAND

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ARABIC SUMMARY

CHAPTER I

INTRODUCTION

INTRODUCTION

Stress is the body's arousal response to any demand, change or perceived threat made upon it.(1)

Edwards in Lashinger's study (1997) defines stress in the work place as any characteristic of the job environment that poses a threat to the individual; either excessive demands or insufficient supplies to meet the needs. effect of. random being produced by described as including both life events circumstances and influences of psychological conditions, e.g., overly demanding social and work environment.(2)

Stress is produced when the individual perceives that his potential to deal with the situation at hand is incomplete or insufficient. When stress is temporary and mild, most people can handle it or at least recover from its effect rather quickly. But when some major pressures are sustained for long periods of time, problems arise because the body cannot rebuild its ability to cope with stress. (3,4)

Employments in general are potentially stressful. Among these employments there is the nursing profession as it is faced with several sources of stress that interact either to cause stress or distress. (5.6) Occupational stress is most likely to occur especially when there is poor fitness between the person and his environment, this can happen when the worker is frustrated by an unstimulating

job. Generally, there is an evidence that occupational stress is strongly associated with lower level of self reported health and well being. (7,8,9) Occupational stress and strain may affect the health and behavior of the worker in a variety of ways, these include behavioral changes at work such as higher absence rate, turnover, resignation and also personal changes such as lower self-esteem, personal unfulfillment, loss of motivation, fatigue and emotional disturbances. (10,11,12,13)

Psychiatric nursing is a specialized area of nursing practice that involves dealing with psychological distress and suffering of the mentally disordered on a daily basis. The work is demanding and requires constant interaction with disturbed clients and groups that require the confrontation of difficult and challenging behaviors on a regular basis. (14.15) Moreover, the psychiatric nurse's duties are primarily concerned with observing patients, guarding against violent behavior, creating a therapeutic environment which will improve and facilitate the patient's social behavior, as well as providing necessary medical care. (16)

Stressors are varied, they include inadequate preparation to meet the emotional needs of patients and their families, work load, conflict with other nurses and also variation in patterns of patient's behavior. (17,18,19) Evidence suggests that repeated exposure to episodic stressors or being subjected to chronic stress may lead to

tolerance, however, when the stress is inconsistent, the individual may become sensitive to the stressors and hence experiences a more accentuated stress response. (20) The highest level of stress was found to be generated from items related to working in an unresponsive, unappreciative, uncommunicative work environment that made too many demands on nurses, and that made them unable to enrich themselves more educationally on the job. (21.22) In addition, there are external demands such as personal needs, health status and self-esteem that cause stress, and may exceed the adaptive resources of an individual. (23)

Stressors facing psychiatric nurses appear to be dangerous and stressful as nurses experience greater interpersonal involvement and more frequent conflicts with patients, patients' families, environment and colleagues. (24) Hence, stressors perceived as distress by psychiatric nurses, i.e., as harmful or unpleasant stress, can induce the physiologic and psychologic results of the demanding situation. (11.20,25) In addition, dissatisfied psychiatric nurses can negatively influence patient care and patient's compliance with treatment and subsequently decreased quality care. Nurses also may be prone to burnout if they are lacking preparation for coping with emotional stress. (15,26,27,28)

It is evident that consequences of stress whether feeling healthy or distressed are important factors that affect nurses' function and the quality of patient care.