

Nurses Work Stress Levels with Caring Nurses Behavior

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ABSTRACT

All over the world, health workers, including nurses, experience job stress. A study conducted on nurses at Lancang Kuning Hospital Pekanbaru found that many things can cause them to experience high work stress. These include fatigue and psychological distress caused by a non-ideal working environment. (Djamaluddin, 2022). To determine the relationship between nurses' caring behavior and their level of job stress, this quantitative study will use a descriptive correlational approach. All nurses working in the hospital are included in the population of this study. A sample size of 42 nurses will be taken using a stratified random sampling technique to ensure that the sample comes from various work units of the hospital, such as the emergency department, intensive care unit, and general care unit. Of the 42 nurses surveyed, only 38.1% (16 people) reported experiencing mild job stress, while 61.9% (26 people) reported experiencing moderate job stress. No nurses reported experiencing significant job stress, according to Table 1. Nurses demonstrated both good and poor caring behaviors, as shown in Table 3. 28.5% of twelve nurses showed good behaviors, and 71.5% of thirty nurses showed poor behaviors. Nurses with mild job stress showed good caring behavior (23.81%) compared to nurses with poor caring behavior (14.29%). In contrast, nurses with work stress more often showed poor caring behavior (57.14%) than nurses with good caring behavior (4.76%). The results of this study show that reducing nurses' job stress has a negative correlation with their caring behavior; nurses with lower levels of job stress tend to perform better caring behavior.

Keywords: Job Stress, Nurse Caring Behavior, Nurse



INTRODUCTION

Job stress is a common phenomenon experienced by health workers throughout the world, including nurses. High levels of work stress in nurses can be caused by various factors such as 1) Heavy Workload: The increasing number of patients and less working time means that nurses have to work harder and longer, which can cause work stress. 2) Emotional Stress: Nurses have to deal with stressful and risky situations, such as dealing with Covid-19, which can cause anxiety and emotional stress. Work stress in nurses can be caused by fear and psychological pressure caused by the pandemic situation. 3) Administrative demands: The demand to provide the best service to patients can cause work stress for nurses. They have to manage their time well and work harder to meet job demands, which can lead to work stress. 4) Lack of Social Support: Lack of social support and effective communication can cause work stress in nurses. This can be seen in research which finds that nurses who have good stress management and good coping mechanisms can manage the emotions they feel and minimize more severe stress. 5) Non-Optimal Working Conditions: Non-optimal working conditions, such as lack of facilities and infrastructure, can cause work stress in nurses (Egawati & Aryani, 2022). This can be seen in research which found that nurses working at the Lancang Kuning Hospital in Pekanbaru experienced work stress due to various factors, including fatigue and psychological pressure caused by non-optimal working conditions (Djamaluddin, 2022).

This can be seen in research which found that the increase in the number of patients during the Covid-19 pandemic caused nurses to have to work longer than normal working hours, thereby triggering fatigue and work stress. This excessive stress not only has a negative impact on nurses' physical and mental health, but can also affect the quality of care they provide to patients (Solon et al., 2021) (Fajrillah & Nurfitriani, 2016). To improve optimal and quality services, hospitals provide outpatient and inpatient services. In inpatient services, patients are grouped based on condition, status and group which is called patient classification. Each classification of patient is treated in a treatment room which is central to the main activities in the patient's healing process (Krakatau Medika, 2023).

Nurses have an important role in the health care system, especially in providing direct and continuous care to patients. One important aspect of this role is caring behavior, which includes empathy, attention, and emotional support for patients. Nurses' caring behavior not only increases patient satisfaction and comfort, but also contributes to the patient's health recovery (Sulistyorini, 2023). The treatment room is central to the main activities in the patient's healing process. Treatment rooms must be equipped with adequate facilities and modern medical equipment to ensure optimal and quality services. Inpatient services include observation, diagnosis, treatment, nursing, medical rehabilitation and other medical support. Inpatient services must be patient-oriented and comprehensive, integrated between scientific disciplines. Inpatient services must comply with infection prevention and control (PPI), quality and patient safety standards (PKM Pekutatan, 2024).



However, high levels of work stress can hinder nurses' ability to provide optimal caring behavior. Excessive stress can reduce nurses' ability to empathize, reduce the quality of interactions with patients, and increase the risk of medical errors. In addition, prolonged work stress can cause emotional exhaustion, burnout, and ultimately result in high turnover among nurses (Phang, 2022).

Research on the relationship between nurses' work stress levels and caring behavior is important to understand the dynamics that occur in the field and find appropriate solutions to overcome this problem. Effective interventions in managing nurses' work stress can help improve nurses' well-being, which in turn can improve their caring behavior. Thus, understanding and managing nurses' work stress is not only important for the well-being of nurses themselves, but also for improving the overall quality of health services.

METHODS

This research will use a quantitative research design with a correlational descriptive approach to identify the relationship between nurses' work stress levels and nurses' caring behavior. The population in this study were all nurses who worked in hospitals. Samples will be taken using a stratified random sampling technique to ensure representation from various work units in the hospital, such as the emergency unit, intensive care unit and general care unit. The number of samples taken was 42 nurses.

Job Stress Questionnaire: This questionnaire is adapted from a job stress scale that has been tested for validity and reliability, such as the Nursing Stress Scale (NSS). **Caring Behavior Questionnaire:** To measure caring behavior, the Caring Behavior Inventory (CBI) or a similar instrument which has also been tested for validity and reliability will be used. Researchers will ask permission from the hospital and research ethics committee to conduct research. Once permission is obtained, the researcher will inform the research objectives to the nurse respondents and ask for their consent to participate. Questionnaires will be distributed to nurses who are willing to participate, and they will be asked to complete the questionnaire anonymously to maintain the confidentiality of respondents.

The collected data will be analyzed using descriptive statistics to describe the demographic characteristics of respondents, levels of work stress, and nurses' caring behavior. Pearson correlation analysis will be used to examine the relationship between nurses' work stress levels and nurses' caring behavior. If a significant relationship is found, multiple linear regression analysis can be carried out to determine the work stress factors that most influence caring behavior.

Subjective responses from nurses that may be influenced by psychological conditions when filling out the questionnaire. Unmeasured external variables that might influence the level of work stress and caring behavior, such as family support or the nurse's personal health condition. With this research method, it is hoped that a deeper understanding can be obtained regarding the relationship between nurses' work stress levels and their caring behavior, as well as the factors that influence this relationship.



RESULTS

1. Characteristics of Respondents Based on Nurse Work Stress Levels

Table 1. Work Stress Levels of Nurses in Inpatient Rooms

Nurses' work stress level	Amount	Percentage (%)
Light	16	38.1
Currently	26	61.9
Total	42	100

Table 2. Statistical description of nurses' caring behavior

Variable	Mean	Median	Min-max	elementary school
Work stress	16.48	16.00	10-27	4,391

Table 3. Caring Behavior Categories of Nurses in Inpatient Installations

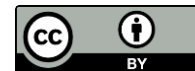
Caring Behavior of Nurses	Amount	Percentage (%)
Good	12	28.5
Not good	30	71.4
Total	42	100

2. Characteristics of Nurses' Job Stress Levels and Nurses' Caring Behavior in the Inpatient Room

Based on Table 4, the sample average according to the level of nurses' work performance and nurses' caring behavior at the caring level of nurses who experienced good caring behavior was 12 people (28.57%) and who experienced poor caring behavior was 30 people (71.43%) . Meanwhile, there were no nurses who experienced heavy work stress in the hospital's inpatient installation.

Table 4. Nurses' Job Stress Levels and Nurses' Caring Behavior in the Inpatient Room

Nursing Work Stress	Level of Nurse Caring Behavior				Total	
	Good		Not good			
	N	%	N	%	N	%
Light	10	23.81	6	14.29	16	38.10
Currently	2	4.76	24	57.14	26	61.9
Amount	12	28.5	30	71.4	42	100



DISCUSSION

Based on the research results that have been attached, the following is a discussion of the relationship between nurses' work stress levels and nurses' caring behavior in inpatient installation rooms:

1. Nurse Job Stress Level:

From Table 1, it can be seen that of the 42 nurses who were respondents, 38.1% (16 people) experienced mild levels of work stress, while 61.9% (26 people) experienced moderate levels of work stress. There were no nurses who experienced heavy work stress. This shows that the majority of nurses in inpatient installations face quite significant levels of stress, even though they have not yet reached the severe category. According to Karasek's Job Stress Theory (1979), job stress is the result of the interaction between job demands and job control. In the nursing environment, high job demands such as heavy workloads, long hours, and the emotional stress of caring for sick or dying patients, can increase stress levels. However, if nurses have a high level of control over their work, for example through autonomy in decision making and support from superiors, stress levels can be reduced.

This model was developed from Karasek's theory and includes elements of social support as an important factor in managing stress. Social support from coworkers and management can serve as a buffer against stress. This study shows that nurses in inpatient settings experience mild to moderate work stress, which may indicate the existence of some level of control and social support that helps prevent stress from reaching severe levels. Burnout is a state of physical, emotional, and mental exhaustion caused by long-term involvement in emotionally demanding situations. Burnout often occurs in professions that involve intense interaction with other people, such as nursing. Burnout symptoms include emotional exhaustion, depersonalization, and decreased personal accomplishment. The absence of nurses experiencing severe work stress in this study may indicate that even though they face significant levels of stress, existing coping mechanisms or interventions are quite effective in preventing total burnout.

A balance between work demands and personal life is very important in managing work stress. Nurses who are able to maintain a balance between their work and personal lives tend to have lower stress levels. Research shows that interventions such as work schedule flexibility, support for mental health, and employee wellness programs can help nurses better manage work stress. Stress Management Interventions: Based on the above theories, hospitals can implement stress management programs that focus on reducing job demands, increasing job control, and providing social support. Coping Training: Training to develop effective coping strategies can help nurses manage work stress. These programs may include relaxation techniques, time management, and communication skills. Promotion of Work-Life Balance: Hospitals can adopt policies that support work-life balance, such as flexible work schedules, adequate leave, and employee wellness programs.



2. Nurse Caring Behavior:

Based on Table 3, nurses' caring behavior is divided into two categories: good and not so good. As many as 28.5% (12 people) showed good caring behavior, while 71.5% (30 people) showed poor caring behavior. This data shows that the majority of nurses have not demonstrated optimal caring behavior. Jean Watson developed the Human Caring Theory, which emphasizes the importance of transpersonal relationships between nurses and patients.

According to Watson, caring is at the core of nursing and involves elements such as empathy, concern, and deep interpersonal relationships. The high percentage of nurses who show poor caring behavior can be indicated by various factors that prevent nurses from fully implementing Watson's caring principles. These factors may include heavy workloads, job stress, and lack of emotional support. Empathy is a key component of caring behavior. Carl Rogers' Theory of Empathy emphasizes that the ability to understand and feel another person's emotional experience is the basis of an effective therapeutic relationship. In a nursing context, nurses who are able to empathize can better meet the emotional and psychological needs of patients. The high percentage of poor caring behavior may reflect nurses' difficulty in maintaining high levels of empathy due to work stress and emotional exhaustion. As previously discussed, burnout is a condition of physical, emotional, and mental exhaustion that can reduce a nurse's ability to provide attentive care. The Maslach Burnout Inventory (MBI) identifies three main dimensions of burnout: emotional exhaustion, depersonalization, and decreased personal accomplishment. Nurses experiencing burnout may demonstrate poor caring behavior because they feel separated from their patients and experience significant emotional exhaustion.

Education and Training: To improve caring behavior, education and training programs that focus on developing empathy, interpersonal communication, and coping skills need to be improved. This training can help nurses develop the competencies necessary to provide caring care. **Stress and Burnout Management:** Interventions to manage stress and prevent burnout are essential. Employee wellness programs, psychological support, and coping strategies can help nurses reduce stress and improve their psychological well-being. **Supportive Work Environment:** Creating a supportive work environment with a reasonable workload, support from management, and a positive work culture can help nurses feel more able to provide optimal caring behavior. **Career Development:** Supporting career development and providing opportunities for nurses to continue learning and developing can increase their competency and, in turn, improve caring behavior.

3. Relationship between Job Stress Level and Caring Behavior:

From Table 4, it can be seen that more nurses with low levels of work stress showed good caring behavior (23.81%) compared to those who showed less good caring behavior (14.29%). In contrast, more nurses with moderate levels of work stress showed poor caring behavior (57.14%) compared to those who showed good caring behavior (4.76%). This shows that there is a tendency that the higher the level of work stress of nurses, the lower the caring behavior shown. Nurses who

experience mild work stress tend to be more able to demonstrate good caring behavior compared to those who experience moderate work stress. Empathy is a key component of caring behavior.

Carl Rogers' Theory of Empathy emphasizes that the ability to understand and feel another person's emotional experience is the basis of an effective therapeutic relationship. Nurses with higher job stress may have difficulty maintaining high levels of empathy because they themselves are struggling with their stress. In contrast, nurses with mild job stress may be more able to demonstrate empathy and caring behavior because they have more emotional resources. Psychological Well-Being Theory includes six dimensions, including positive relationships with others and mastery of the environment. Nurses with high psychological well-being tend to show better caring behavior. High work stress can reduce psychological well-being, thereby reducing nurses' ability to demonstrate optimal caring behavior. Nurses with less job stress may have better psychological well-being, allowing them to be better able to demonstrate good caring behavior.

Stress Management: Based on the above theories, it is important to implement an effective stress management program for nurses. This may include coping strategies training, psychological support, and interventions to increase job control and social support. **Burnout Reduction:** Interventions aimed at reducing burnout, such as employee wellness programs, adequate rest time, and recognition of nurses' achievements, can help reduce job stress and increase caring behavior. **Empathy Training:** Training that focuses on developing empathy and interpersonal skills can help nurses develop the ability to continue to demonstrate caring behavior even under stressful conditions. **Improve Psychological Well-Being:** Programs that support psychological well-being, such as work-life balance, social support, and a positive work environment, can help nurses manage work stress and demonstrate better caring behaviors.

4. Statistical Analysis:

The statistical description of the variables measured shows that the average level of work stress is 16.48 with a standard deviation of 4.391. Nurses' caring behavior on average is in the poor category. The large variation in nurses' work stress levels (with a range of 10-27) and caring behavior emphasizes the importance of stress management in the nurses' work environment.

CONCLUSIONS

Implications and Recommendations: (a) **Stress Management:** Based on these findings, it is important for hospital management to implement effective stress management programs. This can include coping strategies training, psychological support, as well as improving working conditions. (b) **Caring Behavior Training:** Training and professional development that focuses on improving nurses' caring behavior needs to be improved. These programs can help nurses develop the interpersonal skills and empathy necessary to provide high-quality care. (c) **Social Support:** Providing adequate social support for nurses, both from coworkers and superiors, can help reduce stress levels and increase caring behavior. (d) **Monitoring and Evaluation:** It is necessary to carry out



regular monitoring and evaluation of the level of work stress and caring behavior of nurses to ensure that the interventions carried out are effective and provide the expected results.

The results of this study indicate that there is a negative relationship between nurses' work stress levels and nurses' caring behavior. Nurses who experience lower levels of work stress tend to show better caring behavior. Therefore, efforts to reduce nurses' work stress levels are very important in improving the quality of services provided to patients.

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