

Extinguish workplace stress

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Nursing is an extremely stressful occupation. From handling life and death situations and dealing with long work hours, to difficult patients and increasing workloads, it's no surprise that RNs face a tremendous amount of stress. Although some stress can be helpful, an overwhelming amount can lead to poor work performance and serious medical conditions such as high BP, depression, sleep disorders, and drug and alcohol abuse.

In fact, the Research Institute on Addictions in Buffalo, N.Y., studied substance abuse in 2,000 nurses. Senior researcher R. Lorraine Collins noted that 70% of the RNs surveyed reported using alcohol recently and 22% smoked cigarettes. About 1% of respondents said they used marijuana, and less than 1% reported using cocaine.¹

The study also found that nurses who work in a hospital setting are more likely to consume alcohol, cigarettes, and drugs. "This may be indicative of the stress related to the day-to-day demands of hospital work," the survey noted, "including patient care and interactions with doctors and nursing supervisors."¹

Paul Anderson



*Are your feet
to the fire?
Here's how to
chill out.*

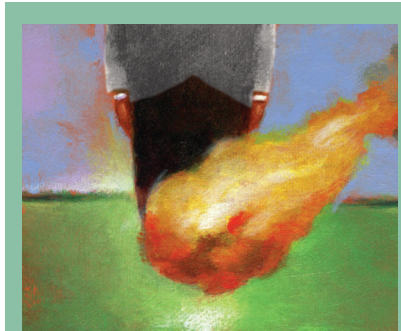
In addition, researchers reported that it was “significant that more nurses in critical/intensive care reported lifetime use of cocaine and hallucinogens than those in less stressful specialties such as pediatrics/ob-gyn.”¹

Uncovering sources

Aging workers, shorter hospital stays with pressure to move patients before they’re ready, and issues with leadership all take their toll.² In 2000, researchers found that job stress and nursing leadership were influencing factors of job satisfaction in pediatric intensive care (PICU) nurses. For example, a survey of 65 hospitals in 1998 by the National Association of Children’s Hospitals and Related Institutions found that PICU nurses “ranked at the lower level for nurse satisfaction.”²

A later study published in the September 2007 issue of the *American Journal of Nursing* found that “the top two priorities for hospitals to address the retention issue are improving nursing management and taking steps to reduce on-the-job-stress.” More than 600 of the 3,226 survey participants had already left their first job, over 40% due to poor management, and nearly 38% because of stressful work conditions. Almost 63% said that their work interferes with family activities a minimum of 4 days/month.³

Moreover according to the National Institute for Occupational Safety and Health (NIOSH), intensive care “nurses progressed through various stages of stress” and expressed concern about their own competence. “Later they raised questions about the job itself (e.g. they questioned the quality of life for NICU survivors). Still later they felt they had mastered the job and were indifferent because they did not receive enough positive rewards for their work.”⁴



Management styles may need to be adjusted, as research has shown that nursing leadership often causes stress among staff nurses.

Nurses can get so overwhelmed that the consequences can be staggering. Job stress can cause numerous harmful effects for staff, patients, and the organization. Experts find that job stress and tension are strongly related to job satisfaction and burnout.⁵ Consequences of burnout could include withdrawal from patients and a “feeling that one cannot take it anymore.” The NIOSH adds that “the increasing size and bureaucracy of many hospitals may depersonalize the environment and leave many workers feeling isolated, fatigued, angry, powerless and frustrated.”⁴

Their coworkers, family, and patients feel these effects as well. And “failure to recognize and treat the sources of stress results in workers who suffer burnout. These feelings may also be expressed as apathy, loss of self-confidence, withdrawal, or absenteeism.”⁴

Risk factors

Several factors increase nurses’ stress levels:

1. Working in a hospital setting
2. Working with palliative care patients
3. Poor relationship with nursing supervisor
4. Poor relationship with physicians
5. Nursing specialty (that is, critical/intensive care vs. pediatrics/ob-gyn)
6. Tenure in the nursing profession (new nurses vs. experienced nurses).¹⁻⁶

Pediatric palliative care nurses experience more stress based on the fact that they work with dying children. Nurses may experience compassion fatigue and burnout.⁶ ICU nurses also experience heightened job stress, which is associated with burnout.⁷

Consequences

Organizationally, the impact of this stress can be low job satisfaction and deteriorating quality and retention issues. Working with the dying can be a source of profound moral conflict and personal suffering.⁷ Sometimes emotion-provoking situations continue indefinitely and can’t be easily discharged. Severe physiologic and psychological problems can result. For example, posttraumatic stress disorder can occur and cause problems with work, sleep, and concentration.⁷

Humans have limitations and it’s possible that these stressful situations can’t be easily discharged. What can be done to help mitigate this? We need to:

1. Monitor nurses to ensure they receive enough breaks and rest.
2. Provide access to psychological counseling and employee-assistance programs (EAPs), sometimes mandating them after certain traumatic incidents.
3. Allow for leave time after a critical incident.
4. Take care of nurses by ensuring there’s peer support in the form of support groups and medical care.

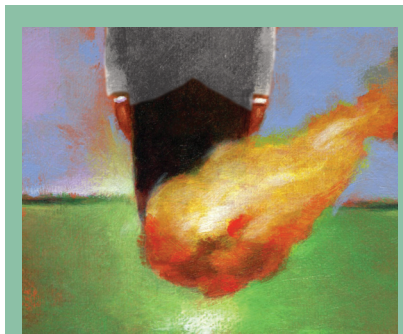
Cumulative stressors can result in significant functional failures as one is exposed repeatedly to stressful situations. "Stressors today are not physical, but emotional," explains Claire McDerment, a stress management consultant. "They show up as a physiological response."⁸ Symptoms include "burnout, characterized by emotional and physical exhaustion. Signs of burnout are chronic fatigue, anger at those in charge, self-criticism with putting up with demands, cynicism, negativity and irritability, a sense of futility and erratic emotional displays."⁸ Nurses are exposed to constant stress over a long period. And they need to remain stoic and calm even in the most tragic of situations. All of these stressors add up.

Mitigation musts

It's critically important to provide treatment options to mitigate the stress experienced by nurses. To reduce the influence of stressors on nurses, we should:

1. Provide EAPs and psychological counseling, perhaps mandating EAP every 6 months.
2. Teach new nurses in school and in new hire orientation about what to expect on the job, ensuring they have a realistic point of view.
3. Ensure nurses are properly trained by more experienced nurses (preceptors), particularly in hospital-based settings.
4. Help managers and coworkers to learn and recognize signs that help is needed and remove the stigma about getting help.
5. Ensure there are adequate breaks and vacation for nurses to rest and recover.
6. Provide nutrition counseling on diet, exercise, and smoking cessation, which can affect stress.
7. Teach nurses to know their own limitations.

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8. Provide critical incident stress debriefing after traumatic events such as a mass casualty event or the death of a long-term patient or child.
9. Train managers to be more understanding and adjust management style, as much of the research has shown that nursing leadership causes much stress among staff nurses.

Solutions exist

Something as simple as aromatherapy may help nurses cope with stress. In a research study, two 12-week alternative therapy sessions were provided over the course of the year. Of 86 participants, 60% suffered from moderate to extreme anxiety. As a result of the therapy, these ED nurses reported lower anxiety levels after aromatherapy massages while listening to music, according to recent research in the *Journal of Clinical Nursing*.⁹

Dr. Michael Roth recommends five things for nurses to reduce stress: (1) massage and chiropractic sessions; (2) work on breathing; (3) meditate; (4) exercise; and (5) keep thoughts focused on the present.¹⁰

Mary Ernst puts it succinctly when she writes that, "Given the current nursing shortage, this information is important in strategic planning for

improving retention of nurses within the organization."² The consequences of repeated exposure to stress can range from marital problems, irritability, and depression, to chronic fatigue and illness. And for nurses, fatigue can impact decision making and alertness, thus endangering the lives of those they must treat. This is why a comprehensive approach that identifies and treats nurses' stress early on is so critical. **NM**

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