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Job Stress Related to Job Satisfaction of Nurses

Allison Peters

University of Central Florida

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Significance and Background

Ever since the 1999 report by the Institute of Medicine's (IOM) *To Err is Human: Building a Safer Health System* there has been a push not only to recruit new nurses but also to retain nurses that are in health care organizations. There is a higher stress level encumbered by nurses as patients get sicker with a higher acuity of care. Buried among the responsibilities and challenges of maintaining current education, reduction in assistive staff, numerous gaps in communication and decreased budgets is the burning question, "How does job related stress influence job satisfaction of nurses?" This summary will review the methods, results and implications for practice.

The incidence of nurses leaving the field of nursing is high with shortages being very common. According to The Bureau of Labor Statistics from a report done in 2005 there will be an influx of 703,000 jobs for registered nurses between 2004 and 2014(Zangaro, Soeken, 2007). The prevalence of this growing deficit will only increase as the population born in the aftermath of the World War II era, known as baby boomers, near or achieve retirement age. It is estimated that 400,000 (Zangaro, Soeken, 2007) nurses will be needed to assist with this population alone to keep up with this specific demand.

Although economic impact was not reviewed by the selected studies, hiring a nurse has been said to cost approximately \$50,000 and this is without retention incentives. Study upon study reveal that job stress is a major predictor of the rapid attrition of nurses in the workplace. Job stress is also evident in the lack of retention noted in the Generation X's, (children born in the early 60's to early 80's) and Gen Y's, (children born in the mid 70's to early 2000's) the children of the boomers. This overwhelming evidence supports that higher job stress is equal to lower job satisfaction; a major trigger

in nurses leaving organizations in droves seeking better hours, less stress, and higher personal value in their careers.

Methods

The search strategy used to find answers used databases such as CINAHL, Science Direct, Medline, and Cochrane Database of Systematic Review from the years 2000 to 2010. Key search terms used were job stress, job satisfaction and nurses. The search returned a total of 1278 articles of which 5 were kept for BET project. Rationale for keeping the articles was that the reviews contained all of the elements of the PICO question. Using the methods used to search for this evidence can be easily duplicated by another researcher/colleague.

Results

The information that was discovered as a result of this search seemed to carry a common theme throughout. There is a significant, negative, inverse correlation between job stress and job satisfaction in nurses in other words, as job stress level rises job satisfaction falls. Many of the studies show a strong correlation between leadership styles of management of the nursing staff, educational achievement of staff and experience as being some of the necessary elements needed for reduced stress levels and to enable job satisfaction. The study by Stacciarini establishes that occupational stress is significantly, inversely associated (-0.24 to 0.26 with $p \leq 0.05$) (Stacciarini & Troccoli, 2004) with job satisfaction in a similar study noting statistical data of ($r = -0.30$; $p < 0.01$) by Tabak & Koprak, 2007. An interesting note in the meta-analysis by Zangaro, et al., shows a stronger relationship between job satisfaction and stress for studies done in the US with ($r = -0.52$ vs. $r = -0.47$)". The theme in this study remained the same in that job stress negatively correlated 95% CI (-0.50 to -0.48) ($p < 0.001$) (Zangaro & Soeken, 2007) with job satisfaction. In

the study by Bartram job stress was noted to have an inverse correlation of -1.98 ($p < 0.05$) to self esteem and a -3.72 ($p < 0.001$) to self determination (Bartram, Joiner & Stanton, 2004). The study by Chen et al. showed a inverse correlation with all measures of job stress (-0.24 to -0.49 $p < 0.05$) for work rewards an inverse relationship with job stress (-0.26 to -0.50 $p < 0.01$) for OR environment, an inverse correlation with patient care (-0.20, $p < 0.05$), administrative management (-0.30, $p < 0.01$), interpersonal relationships (-0.25, $p < 0.01$), and administrative feedback of (-0.00 $p < 0.05$). Finally an inverse correlation was noted with all measure of job stress (-0.31 to -0.50 $p < 0.01$) and was related to administrative management with no correlation of job stress related to job ability. (Chen, Lin, Wang, & Hou, 2009).

Implications for Practice

What do these results mean for other practitioners? Special attention should be paid to the needs of nurses by managers and leaders to decrease the job stressors and enable job satisfaction in the workplace. The critical shortages are happening now due to the changing face of nursing, patient care, technology and budgetary demands. We can no longer just get by and be satisfied with our broken system of care for our patients. Bringing education, staff management solutions, and incentives for experienced staff for retention are all important factors in a time riddled with increasing financial demands and decreased assistive staff. Many studies identify more than one cause of stress. The same theme was evident throughout all the studies and that is job stress has the strongest negative correlation with job satisfaction. One research study idea would be the identification of specific stressors and satisfiers among different units within the hospital.

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