

# STUDY OF CONTRIBUTORY FACTORS FOR DEPRESSION AND ITS CONSEQUENCES FOR PARA-MEDICAL STAFF OF DIFFERENT HEALTH CARE FACILITIES

Nighat Jabeen<sup>\*1</sup>, Shazia Irshad<sup>2</sup>, Asima Akram<sup>3</sup>

<sup>\*1,2,3</sup> Government College University Faisalabad

[nighat.jb9678@gmail.com](mailto:nighat.jb9678@gmail.com) , [shaziairshad821@gmail.com](mailto:shaziairshad821@gmail.com) , [asimaakram319@gmail.com](mailto:asimaakram319@gmail.com)

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Corresponding Author:

Nighat Jabeen<sup>\*1</sup>

## Abstract

**INTRODUCTION:** It is of utmost significance to understand how job stress affects female nursing staff and what are the main sources of job stress in the hospital environment. It is also of great importance to retrieve more information about working conditions, performance and job satisfaction. The information can be utilized to reduce job stress and increase performance and job satisfaction. This research study explored what factors contribute to the job stress of female nurses in public sector hospitals. The significance of female nursing staff in the hospital setting cannot be ignored. The study identifies what are the main sources of job stress of nursing staff, how it affects the job performance and job satisfaction of nurses

**OBJECTIVE:** The purpose of the research project was to obtain information that could be utilized by administration in health-related organizations.

**MATHODOLOGY:** Statistical tools were used. These are chi-square tests and Pearson-method (p-value). However, chi-square tests and chi-square 59 analysis was done through Pearson method. As per scoring given above, the entire data of 315 questionnaires was tabulated in an Excel Spread Sheet. The same data was then fed into SPSS (15thVersion)

**RESULTS:** The respondents identified various factors which cause them job stress. Out of the total 315 respondents, 81% (255) pointed out that rush of patients in hospitals is one of the cause of stress during job. 92.4 % (291), respondents say that unpleasant and unhealthy work environment is a cause of job stress, 90.2 % (284) identified that potentially dangerous working conditions are causing them stress on job.

**CONCLUSION:** The findings also suggest that strenuous conditions of nurses are felt more severely among the public sector hospital's nurses. Preventive measures are suggested based on findings on how to diminish job stress of female nursing staff of public sector hospitals and thereby contribute to maintaining a satisfied and contented Nursing staff.

## INTRODUCTION

### 1) INTRODUCTION TO THE PROBLEM

Job stress has become an increasingly common outcome of today's dynamic life. Stress in the workplace is better understood as the psychological state that represents an imbalance or inconsistency between an employee's perceptions of the demands and their ability to cope with those demands. Most jobs consist of situations or events that employees find stressful; however, some jobs encounter more job-related stress than others.

Job stress is the negative outcome of today's dynamic living. Masses experience stress due to overload, overwork, job insecurity and increasing pace of life. (American Psychological Association, 1997).

It is now an established fact that the profession of nursing is full of stress and challenges. Female nursing staff faces crying and dying patients on daily basis. The tasks performed by them are almost mundane and unrewarding. If measured by normal standards, nurse's job is disgusting and distasteful, degrading and frightening.

(Hingley, 1984).

The ILO has commissioned a manual on the job stress and its prevention among female nursing staff entitled "work relating stress in nursing, controlling the risk of health" by Dr. A. Griffiths, Professor S. Cox, due to its great significance. (ILO, 2001).

### 1.2) THE MAIN SOURCES/CAUSES OF JOB STRESS AMONG NURSES:

The job of female nurses is daunting and daring. Everyday multiple and conflicting demands are imposed on nurses by their supervisor, managers, administrative staff and others. Such situation usually leads to work burden and role conflict. The role conflict is inherent in the job of female nurses due to goal-oriented demands put on them such as "getting patients better very early". The nurses are given

the task of providing emotional support and relieving stress of dying and crying patients. Role conflict is common among nurses looking after those patients who are critically ill and dying. It is worth mentioning here that intensive care unit and critical units of our hospitals attracted particular attention these days. Here, the female nurses face, on daily basis, stark suffering, grief and death. It is now universally accepted that health care in the current era suffer high rate of violent behavior.

In recent times, many research studies have measured and determined the effects of job stress on health and wellbeing of nurses in the hospital settings and elsewhere. Job stress detracts nurses from qualitative working lives, enhances psychiatric morbidity and contributes towards physical illness, such as musculoskeletal problems and depression. (ILO-2001)

### 1.3) International council of nursing (ICN 2001)

ICN has reported that if we want to develop an optimum environment for the production of stress, a lot of stressors, we would include, would be obviously recognized by female nurses as events in the hospital settings which they confront on routine basis. The stressors are long hours, unpleasant noises, sights, undue quiet, sudden shift from intense to mundane tasks, time pressure, no second chance, and enclosed environment etc. (OSHA-2001)

### 1.5) Stress Defined

One of the complicating issues in understanding stress is the fact that it has been defined in a multitude of ways.

An accommodative reaction or response by individual, that is a consequence of any action, situation or event that places special demands on a person. (Ivancevich, Olekalns, 2008)

The psychological and physiological reaction to situation or events that disturb our personal coping balance in some way. Events or demands placed on masses is considered as stressors. (NIOSH, 2010)

Stress is the general term applied to the pressures; people feel in life. (Newstorm, Davis, 2002)

Any physical, mental or emotional demands that requires adaptive skill. (Bohlander, Snell, 2004)

Stress is dynamic state whereby the masses are faced with an opportunity obstacle, constraints or demand regarding what one desires and the implication is considered to be uncertain terrifying and important. (Robbins, 2001)

Stress is a complex pattern of emotional states, physiological reactions and related thoughts in response to external demands. (Greenberg, Baron, 2000)

The interaction between individual and environment characterized by

### physiological and psychological

changes that cause a deviation from normal performance.

A situation where in job-related factors interact with a worker to change his or her psychological and/or physiological condition such that the person is forced to deviate from normal functioning. (Bernardin, 2003)

Some environmental force affecting the individual, which is called a stressor.

The individual's psychological or physical response to the stressor.

In some cases, an interaction between the stressor and the individual's response.

Stress is a dynamic condition in which an individual is confronted with an Opportunity, demand, or resource related to what the individual desires and the implication of which is unexpected and uncertain. (Robbins, Timothy, 2007)

Behr and Newman define job stress as "a situation arising from the reaction of people toward their tasks and results in changes that compel individuals to disrupt their normal performance". (Pfeffer, 1992)

When a person is confronted with a situation which poses a threat or demand, and perceives that she or he does not have the capability or resources to match or exceed the stressor, the imbalance that results at that point in time is termed stress. (Luthan, 2005)

An Individual's adaptive response to a situation that is perceived as challenging or threatening to the person's wellbeing. (Mc Shane, Travaglione, 2004)

Stress is an individual's physiological and emotional response to stimuli that place physical or physiological demands on the individual and create UNCERT

### STRESS—ITS MAIN CAUSES:

Stress causes, may rightly be called stressors, include any environmental condition that places a physical or emotional demand on a person. There are numerous stressors in organizational settings and other life activities

habit no.2 lists the four main types of work-related stressor: Physical environment stressors, Role-related stressors, Interpersonal stressors and Organizational stressors.

#### 1.7.1) STRESSORS INHERENT IN PHYSICAL ENVIRONMENT (PHYSICAL ENVIRONMENT STRESSORS)

The physical environment of organization contains some physical environmental stressors; safety hazards, poor lighting, and excessive noise etc. For example, a study of textile workers in a noisy plant found that their level of stress decreased measurably when they were supplied with ear protectors. Another study reported that clerical employees experience significantly higher stress level in noisy, open office than in quiet areas. Physical stressors also include poorly designed office space, lack of privacy, ineffective lighting and poor air quality. (Steven et al.2004)

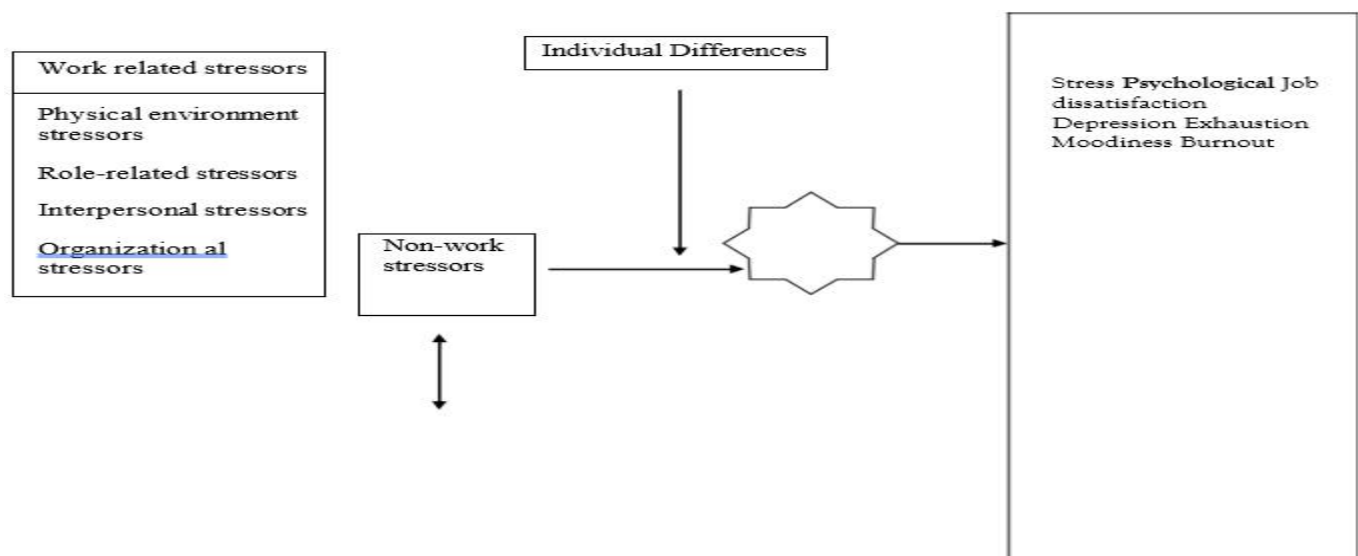
#### 1.7.2) ROLE-RELATED STRESSOR

In this concept of role related stressors, employees have difficulty in assimilating and reconciling or performing the multitude roles that they play in their life. Main role-related stressors are;

Role conflict, Role ambiguity, Workload Task control

##### 1.7.2.1 : Role conflict:

Accordingly, when masses confront competing demands role conflict occurs. An employee may have two roles that are in conflict with each other (called interrole conflict) or may receive contradictory messages from different people about how to perform a task (called intraoral conflict). Role conflict also occurs when organizational values and work obligations are incompatible with personal values (called person-role conflict). For example, a recent study described how Australian managers experience the stress of people-role conflict when they observe unethical practices involving partners located in other countries. (Steven et al.2004)



#### Consequences of distress

**Physiological** Heart disease Ulcers  
High BP Headaches  
Sleep disturbance More illness

**Stress Psychological** Job dissatisfaction Depression  
Exhaustion Moodiness Burnout

#### Behavioral

Lower job performance More accidents  
Faulty decisions Higher absenteeism Workplace aggression

#### Exhibit no 1.2: Stressors

##### 1.7.2.2 Role ambiguity:

When workers are unsure of meeting job responsibilities, performance, expected level of authority and job conditions, role ambiguity is said to exist. This tends to occur when people enter new situations, such as joining the organization or taking an overseas assignment, because they are uncertain about task and social expectations.

##### 1.7.2.3) Work load:

Work under load – providing small amount of work or assignment to workers that do not match their talent is a stressor. However, work overload is the most common stressor these days in our dynamic organization.

Employees are required to perform too much work in too short time. Long hour work leads to unhealthy lifestyles, which in turn, cause heart disease and strokes. This is a concern in Singapore and Hong Kong where cultural values encourage long work hours. Work hours in Australia are also creeping up, with almost one-third of the workforce clocking in 49 hours or more per week. Work overload is such a problem in Japan that death from overwork has its own name – *karoshi*, (Steven et al.2004)

##### 1.7.2.4) Task control:

Employees feel more stress when they have no control over their assignment, performance and pace of their activities. Work is potentially more stressful when it is paced by a machine, involves monitoring equipment or the work schedule is controlled by someone else. This is the reason why *techno stress*—stress caused by information technology—has become one of the leading health hazards in the workplace. Australian now identifies e-mail as their biggest source of stress. One- quarter of British managers also say that email is creating stress. Over two-thirds of employees in large American companies feel overwhelmed by the incessant demands of electronic communication (Steven et al.2004)



**1.7.3) STRESSOR- INTERPERSONAL:**

These include ineffective supervision, office politics and other conflicts with masses. High turnover of front-line staff at Australia's Commonwealth Bank is apparently partly caused by stress from increasingly angry customers. One survey indicates that 88 per cent of call center employees in Australia say that they have high or extreme level of stress, mainly due to angry customers and unsupportive management. 'It's one thing dealing with one angry customer on the odd occasion, but when you are dealing with people like that all day, it is tough', says JAG Marketing executive Jonathon Gross, who has worked in a call center (Steven et al.2004).

Teamwork is a potential interpersonal stressor. A study of West rail, the government-owned rail transportation company in Western Australia, revealed that employees experienced higher stress when they were formed into work teams. Sexual harassment is another powerful interpersonal stressor. Victims of sexual harassment experience trauma (especially from rape or related exploitation) or must endure tense colleague relations in a hostile work environment. Moreover, they are expected to endure more stress while these incidents are investigated, (Steven et al.2004)

**1.7.3.1) Workplace violence:**

Another serious interpersonal stressor is the rising wave of physical violence in the workplace. In the United States, one thousand workers assassinated on job each year and two million other experiences lesser forms of violence. But the international labor organization reports that the highest incidence of workplace assaults and sexual harassment isn't in the United States; it occurs in France, Argentina, Romania, Canada and England. Workplace violence is less common (or less reported) in Pacific Rim countries, but it is significant stressor in some industries. New Zealand's department of work and income has banned 170 people from entering its offices because of their violent or intimidating behavior. All 260 nurses who responded to a survey in New South Wales had experienced some form of violence at least weekly; many cited incidents involving lethal weapons.

Employees have usually symptoms of severe stress, when experiencing violence, or after traumatic events. It is not uncommon for these primary victims to take long-term leave. Some never return to work. Workplace violence is also a stressor to those who observe the violence. After a serious workplace incident, counselors work with many employees, not just the direct victims. Even employees who have not directly experienced or observed violence may show signs of stress if they work in high-risk jobs. For example, one study reported that the greater cause of work-related stress among British bus driver is their perceived risk of physical assault. (Steven et al.2004)

**1.7.3.2) Workplace bullying:**

Although less dramatic than workplace violence, *workplace bullying* is becoming so common that it is considered as more serious interpersonal stressor. It has become enough of a concern that some Scandinavian countries have passed laws against it. Humiliating behavior, intimidating or offensive attitude that insults and ridicules or degrades another worker at organization is better referred to as workplace bullying. People with higher authority are more likely to engage in bullying or incivility towards employees in

lower positions. What studies here in Australia and around the world are showing is that significant source of workplace stress is bullying—intimidating behavior from employers and bossy attitude.

Workplace bullying produces stress and its physiological, psychological and behavioral consequences. Australian studies estimate that almost three-quarters of victims experience or seek counseling for depression, fatigue, sleep disorders and higher blood pressure following incidents of bullying. Workplace bullying also imposes enormous costs on organizations. Australian research has found that victims take an average of 50 days off work and almost 25 % resign or retire following bullying incidents. Back on the job, victims of workplace bullying have impaired decision making, lower work performance and more work errors. Workplace bullying also has hidden costs in the form of investigation costs, loyalty and customer service.

. (Steven et al.2004)

**1.7.4) ORGANIZATIONAL STRESSORS:**

The sale or merger of a company is one of many organizational stressors that employees face. Downsizing is a stressor for those who lose their jobs. Survivors of layoffs also experience stress from higher workloads, increased job insecurity and the loss of friends at work. For example, the company nurse at a high-tech company discovered that the percentage of employees suffering from high blood pressure doubled after the company laid off 10% of its workforce. A study in Finland reported that, after a period of major downsizing, the amount of long-term sick leave taken by surviving government employees doubled.

**1.7.4.1) NON-WORK STRESSORS:**

Work is usually the most stressful part of our lives, but it's not the only part. We also experience numerous stressors outside organizational settings. Employees do not park these stressors at the door when they enter the workplace. They carry over and ultimately affect work behavior.

**There are three main work-non-work stressors;**

Time-based,  
Strain-based  
Role behavior conflict

**1.7.4.2) Time-based conflict:**

Many employees have to contend with the conflict of time—balancing the time demanded by work with other non-work activities and responsibilities of families. This stressor is particularly noticeable in employees who hold strong family values. Time-based conflict largely explains why stress increases with the number of hours of paid employment and the amount of business travel or commuting time. Inflexible work schedules and rotating shift schedules also take a heavy toll because they prevent employees from effectively juggling work and non-work. Time-based conflict is more acute for women than for men because house work and child care represent a 'second shift' for many women in dual-career families. Until men increase their contribution to home making and business learns to accommodate the new social order, many of these super moms will continue to experience super stress.

(Steven et al.2004)

#### 1.7.4.3) **Strain-based conflict:**

This type of stress is also known as spills over effect of stress, it occurs when stress from one domain spills over to the other. Relationship problems, financial difficulties and loss of a loved one usually top the list of non-work stressors. New responsibilities, such as marriage, the birth of a child and a mortgage are also stressful to most of us. Stress at work also spills over to an employee's personal life and also

becomes the foundation of stressful relation with family and friends. In support of this, one study found that fathers who experience stress at work engage in dysfunctional parenting behaviors, which, in turn, explain their children 's behavior in school. (Steven et al.2004)

#### 1.7.4.4) **ROLE BEHAVIOR CONFLICT:**

A third work-non-work stressor, called role behavior conflict, refers to, when people are expected to play different work and non-work roles. People who act logically and impersonally at work have difficulty switching to more compassionate roles in their personal lives. For example, one study found that police officers were unable to shake off their professional role when they left job. This was confirmed by their spouses, who reported that the officers would handle their children in the same manner as they would people in their job. (Steven, et al, 2004)

#### **BACKGROUND OF THE STUDY:**

Previous research supports that employee with high job demands perceive higher job-related stress. Employees are now being required to act on multiple tasks, learn new skills, and self-manage to meet competitive demands. Some common job stressor includes; Job responsibilities, deadlines, assignments, conflict, working hours, discipline and reprimand from supervisor/boss. Job stress is acknowledged as one big problem from the perspective of employees as well as employer around the world and is a common concern in both the developing and developed nations. However, understanding job stress and digging out the negative effect of job stress on female nurses would be a great help towards this neglected but significant class of our society. Many research studies have been conducted on other employees but very little or no work on the job stress of nurses in our country has been conducted. Nurses face a lot of challenges in the hospital set up. Some of these challenges could lead to frustration, anger, tension and job stress. Job Stress is experienced by nurses constantly because they deal with crying and dying peoples on daily basis.

#### 1.9) **STATEMENT OF THE PROBLEM:**

Stress can have detrimental effects on the nurse's job in hospital and elsewhere. Stress in the work place plays a significant role in the decline of a productive work environment. Job stress can influence nurses both personally and professionally. A stressful work place can have many effects on health, wellbeing, performance and job satisfaction of the employees. Job stress can lead to physical, emotional, psychological and social consequences. A stressful working environment is unproductive, uncomfortable and ineffective for the

employees and organization as a whole. Job stress also negatively affect the quality of work as well.

If we potentially endeavor to work out the main causes of stress in the workplace of female nurses and study its impact on job performance and job satisfaction, it will help a lot in improving the work environment and wellbeing of this totally neglected but significant class of our society.

Job-related stress has negative repercussions on the personal life and professional career of nurses. Job stress can derail the health, wellbeing, and performance level and job satisfaction of the nurses in a phenomenal fashion. It's overall impact will emerge in the shape of giving birth to multiple social problems

#### 1.10) **Objectives of the study:**

The main focus of the study will remain directed toward the accomplishment of following objectives.

To find out the main causes of stress at the working atmosphere of public sector hospitals and the impact of these stress factors on the job performance and job satisfaction of female nurses.

To find out the spill over impact of stress factors on the domestic/social life of female nurses.

To find out the bifurcation in the stress level of nurses belonging to different age groups and service cadres.

To dig out the stress parameters associated with family background of nurses with respect to education / rural and urban location.

The fundamental objective of the study, in view of the researcher is to develop a model, in light of causes and effects of stress associated with female nursing staff in public sector hospitals of Lahore, which will prove a landmark in the identification and subsequent elimination of job stress. Thus, the mitigation of this problem can lead to colossal positive impact on the physical, emotional and psychological wellbeing and health of nurses coming from all walks of life to the public sector hospitals of Lahore in particular and those serving in other hospitals in the country in general. Job stress is a potent source of decline in the productivity of employees.

#### 1.11) **RATIONALE:**

The ability to better understand the relationship between job stress and performance and between job stress and job satisfaction and the job stress experienced by the nursing staff serving in hospital and elsewhere can provide insight into the degree of relationship between job stress and performance and job satisfaction. This specific segment of the employees that is nurses is constantly undergoing new challenges and problems in the work place. The constant interaction with challenges and problems can increase job stress experienced by this segment of employees; it is significant to dig out a relationship between job stress and job performance and job satisfaction amongst nurses of public sector hospital of Lahore, metropolitan of Khyber-Pakhtunkhwa.

More specifically, it is interesting to gain further insight regarding the degree of relationship that may or may not exist between job stress and job performance and job satisfaction.

This research study can be beneficial to other human service agencies, human service organizations that is concerned with job stress. Job stress can have severe effect

on physical, emotional and psychological wellbeing of nurses. Knowledge regarding the relationship between job stress and performance and job satisfaction should be shared with organization in human service field in order to make better overall quality of work and services being provided to our communities. Stress reduction can lead to a more productive working environment for the nurses. A more productive environment is beneficial to the organization as a whole.

#### 1.12)SIGNIFICANCE OF THE STUDY:

No doubt the study in question carries great significance as it aims to focus on the resolution of a social problem. The following points will highlight the significance of the subject.

The nursing class contributes to the welfare of the troubled and downtrodden people, coming from all walks of society, at the cost of their own peace of life. Identification and Elimination of their stress on job through suitable measures will tantamount to the reciprocation of their devotion to their job. Giving due recognition to their valuable services rendered to the society will go a long way in curtailing their frustration level, being necessary ramification of work-related stress, and as a consequence, their job performance and job satisfaction will be remarkably enhanced. A tension free nurse means a blessing for the amelioration of the suffering class of the society, the natural corollary of which is bound to rebound in the shape of comparatively healthier and prosperous society. The study will help in finding the root causes of stress of the female nursing staff in public sector hospitals in Lahore. However, the recommendation of the study will have a wider scope and their implementation can be extended to other public hospitals in the country, by conveying the findings and proposals to the ministry of health Islamabad.

#### 1.13)HYPOTHESIS

The following hypotheses are presented here. H1) Nursing profession is full of stress.

H2) Job Stress leads to decline in job performance. H3) Job Stress negatively affects job satisfaction. H4) Various age groups and job stress are co-related.

H5) Job Stress and experience (service length) has co-relation. H6) Job Stress and service cadres have co-relation.

H7) Background (rural, urban) and family status (educated, uneducated) are co-related with job stress.

#### 1.14)Assumptions:

It is assumed that the female nursing staff of hospitals displayed honesty when answering all the sections of the questionnaire.

It is assumed that nursing staff of hospitals were honest in determining causes of job stress.

It is assumed that nursing staff of hospitals were honest in determining job stress & its effects on performance & job satisfaction.

#### 1.15)SCOPE AND LIMITATIONS OF THE STUDY:

The subject carries wide scope. However, the researcher intends to limit the study to the public sector hospitals in Mayo Hospital Lahore due to time and cost constraints. The patients abundantly over crowd these hospitals and as such there is an influx of

patients, patient's attendants and visitors in these hospitals. All these factors add fuel to the fire by contributing significantly to the already stressful job of the female nurses that needs special attention.

A limitation of the study involves recruiting a large sample size. The larger the sample size the greater the validity of the quantitative study. Surveys are commonly known as an easy way to reach the largest number of people; however, surveys usually generate a lower return rate. One limitation is that not all nurses were contacted, of those present, not all were willing to complete or return the surveys. Another limitation includes the variety of Confounding variables among the participants being recruited. Some of the confounding variables include factors such as age, service cadres, and professional experience/length of employment, permanent background, marital status and status of education. These variables could have a different impact on stress level and its effect on performance & job satisfaction, experienced by female nurses working in public sector hospitals. The use of self-report measures could affect the nature of the results. As with most self-report measures, accuracy is difficult to guarantee due to the potential susceptibility of containing socially desirable responses. Accuracy could be compromised if the participants were not honest with regard to answering the surveys (questionnaire) administered. Finally, this study was only able to determine correlation, among variables examined. This study only specifies if a significant relationship exists among the variables in question.

#### 1.16)Nature of the Study:

This research study is a correlation research design. This research study has strived to explore the significant relationship that exists between job stress and job performance, job stress and job satisfaction of female nurses working in the public sector hospitals of Lahore. "Stress is a personal reaction/response to events and is the negative outcome of an imbalance between demands and the person's ability to cope with those demands". This research study explored the relationship between job stress and job performance, job stress and job satisfaction.

#### 1.17)Organization of the remainder of the study/research outlines:

This research study is organized into five chapters. Chapter one focused on the Introduction, background of the study, purpose, significance, rationale, assumptions, and limitations of the study. Chapter two presents a review of the relevant literature specific to job stress, job performance and job satisfaction. Chapter three outlines the research methodology used in this study, including selection of participants, the hypotheses tested, and the procedures used to collect the data etc. Chapter four presents the data analysis and its description from the Questionnaires that were returned. It gives a complete description of how the data were analyzed and the hypotheses were tested, as well as the findings & results of those analyses. Chapter five discusses the results and provides conclusion of the study. Chapter five also provides recommendations for future studies.



## 2) A review of literature

Job stress has been recognized as a serious and chronic cause of individual suffering, irritation, strain and discomforts. As a matter of fact, little research work has so far been carried out on the topic of job stress in Pakistan. On the other hand, plenty of work has been done on the topic across the world particularly in the U.S.A and Europe. For the purpose of conducting review of relevant literature on the topic, the researcher was obliged to browse through Internet and to find relevant materials. The magnitude of research work done on job stress across the world and the quantum of data available on the topic on the Internet is phenomenal and is outside the scope of this chapter to incorporate it all. However, an effort has been made to select a few closely related dissertations, reports and articles on the topic for review purpose.

This review examines published evidences on the causes and effects of job stress, and the implications for nurses/employees in organizations. It is worth mentioning here that in today's dynamic world the nursing profession is considered to be full of stress.

British Psychological Society, (1988) stated job stress as one of the top ten industrial diseases in the US". Willcox (1994), reported that at least 25% of the employees are psychologically stressed at any one time. It has serious implications for the health of the workers in the society as a whole. The Health of The Nation (HMSO, 1992) describes that this area needs to be addressed to promote the health of the workers (government documents 1992).

'Stress' is "one of the most inaccurate words in the scientific literature" reported by Williams (1994). The term sometimes indicates stressful events and sometime indicate the effect of these events on work performance and sometime disordered health remarked by Maclean (1985). Marmot et. Al. (1987) s reports that job stress is "lack of understanding how work environment make a person ill. Job stress refer to broad class of problems indicated by Lazarus (1971) "Any demand

which atax the system, whatever it is, a physiological system, a social system or a psychological system, and the response of that system." There is greater consensus about the meaning and effect of job stress. WHO (1986) stated that stress "is a dynamic state of mind characterized by reasonable harmony between a person's abilities, needs and expectations, and environmental demands and opportunities" Prof. Cox (1993) concentrates on the importance for general health of a state of balance between needs and demands, citing the World Health Organization's definition of well-being:

### Research study on job stress concludes;

Hans Selye (1956) is considered as the father of stress research. The Stress of Life (1956), a book by Hans Selye introduced the concept of stress in the public domain and his General Adaptation Syndrome [GAS] is a popular one amongst the research scholar of psychology and management. Stress "a state, manifested by a specific syndrome of biological events" Selye (1974). He argued that stress is not entirely a bad event. According to him stress is the reaction of the physical body toward a situation or event, which is demanding. "Any kind of normal activity can produce considerable stress without causing any harmful effects" (Selye, 1974), Selye 1982

clearly state that the nonspecific implication of any demand put on the body be its effect mental or somatic.

"The uncertainty that occurs at the organizational, unit, group, and individual levels. Uncertainty exists to the extent that knowledge about an event or condition requiring action or resolution is experienced as inadequate" reported by Schuler and Jackson (1986).

Edwards (1988) view about the stress is that "A negative discrepancy between an individual's perceived state and desired state, provided that the presence of this discrepancy is considered important by the individual."

Taylor (1992) reported about stress in the following words "Demands made upon us [internally or externally] which we perceive as exceeding our adaptive resources. If we try to cope and that is ineffective this gives rise to stress. If this

stress is prolonged then lasting psychological and physical damage may occur." Hereby demands we do mean that arise from the workload or work burden.

Cox (1993) perception of stress is from the assumption that stressor is discreet, time limited and various events of the life requiring adjustments or adaptation are utterly associated with stress. Holmes and Rahe (1967) ranked the potential stressful events which may be work or non-work related such as death of spouse, divorce, marriage (not all negative), fired from work marital reconciliation, retirement, business readjustment, change in work responsibilities trouble with boss change in work condition. (Holmes and Rahe, 1967).

"Job stress is the sum total of factors experienced in relation to work which affects the psychosocial and physiological homeostasis of the worker. The individual factor is termed a stressor and stress is the individual worker's reaction to stressors." Suggested by Weinman (1977).

Beehr and O'Hara (1987) used 'stressor' rather than 'stress' to refer to causal factors because "few people misinterpret stressor to mean the person's reaction." And uses 'strain' to mean "the state of being stressed as evidenced by physiological, psychological or medical indices,"

Hans Selye (1951) report about The General Adaptation Syndrome [GAS] states that, in response to a stressor, an initial 'alarm reaction' is followed by a 'stage of resistance' in which resistance to the original stressor builds up but ability to resist new stressors is lowered. Eventually a 'stage of exhaustion' sets in which ends in catastrophic inability to cope with any form of stress. (Selye H, 1951)

**2.1 The human face of nursing, (2001):** Commented on nursing profession; The female nurses' faces challenging situations on daily basis. They face crying and dying

patients and their task is stressful, unrewarding and frightening.

**2.2 The importance of the nursing profession** is evident from the fact that the ILO has commissioned a manual with the title job stress in nursing profession to control and prevent the stress by Professor Cox (ILO 2001)

**2.3 ILO (2001) reported.**

The occupation of nursing is related with challenges and demanding tasks. It is also full of overload, role conflict

and role ambiguity. So, there is a great need to initiate a stress intervention and stress management program for nurses.

**2.4 ILO (2001)** presented that various research studies have tried to work out the effect of job stress on job performance and job satisfaction of nurses. It has been established that a negative relation exists between job stress and job performance and job satisfaction.

**2.5 Health and Safety Executive (HSE 2001)** research report with the title; the workplace stress epidemic; reveals that 53% of the employees have experienced a stress in the work place, International Stress Management Association (2001) found that one out of four working force have suffered due to stress related sickness. One out of five has suffered extreme stress in the work place.

**2.5.1 The HSE (2001) research found,** a highly significant co relation between extreme stress and poor working condition. The employees have reported a wide range of health problems and behavior problems, Professor Andy Smith have confirmed the fact that job stress is one of the most evident problem in the work environment.

**2.6 The Bristol team (2000)** has reported that 30% increase in job stress has been occurred in the work environment. The major problems indicated by job stress related illness are depression, anxiety, backache and Musculo skeletal disorders.

**2.7 Chartered Management Institute in 2001** has found that long hours work load, working late at night has become a culture in the todays modern organization and as such are sources of job stress.

**2.8 This study by the CMI and healthcare (2000),** has reported that 25% of the executive had gone on sick leave in the past one year due to job stress, 75% of the executive has reported that job stress was damaging their home life, health, performance at work and satisfaction level.

**2.9 The Health and Safety Executive (2001);** research survey stated about sources of stress and the circumstances which result in stress. The sources of stress are work overload, repetitive work, role conflict, role ambiguity, danger, harassment and bullying, poor relationship, in flexible schedule, lack of social support, confusion, lack of communication and poor working condition etc.

**2.9.1 Cary Cooper (1995),** has argued that the trends in the American society are the major sources of job stress, such as working for long hours, downsizing and no contact culture.

**2.10 According to Elizabeth Burtney, (2002),** who found the organization are full of stress and therefore we should focus on the stress intervention in the organization as well as on stressed out individual.

**2.11 Professor Stephen Palmer (2001)** reported in his research study that stress in a universal thing. Everyone can be stressed and the threshold level of everybody will

be different. It depends on the person how he perceives a specific situation. Stress may be the result of the interaction between the person and environment.

**2.11.1 Professor Cary Cooper (1995)** has argued that insecurity in the organization stereo type attitude of the boss may be the major sources of stress. For employees it is necessary that they should have complete control on the job since lack of control sometimes result in job stress.

**2.11.2 Elizabeth Burtney of HEBS research (2004)** reveals that stress in this modern world too carries a stigma in the closed style of management where the employees are expected to work hard and no concern is shown for their domestic life. The employees too never talk about the job stress.

**2.12 Elizabeth Burtney of HEBS (2002) reported.** That every job has some stress and the most stressful job is that where there is the element of change. Some professions such as health care education, games, and sports are highly stressful and risky.

**2.13 Professor Cary Cooper (1997)** has found the most stressful jobs of today's world. These are security personnel's, social organization, education the profession of nursing, medical and dentistry, sports and games, acting, journalism, transportation and restaurants.

**2.14 Professor Cooper (1997)** has assessed that 60% increase in the job stress level has been occurred. Further he has measured the intensity of job stress in various professions.

**2.15 According to an article with the title, "Job stress and job satisfaction" of employees in German radiotherapy (2001),** which concludes that the greatest source of job stress stemmed from underpayment, crying patients, keeping patients fit and living, long hours, role conflict etc. Physicians and nurses showed a significantly higher stress level on scales such as structural conditions and particularly compassion than radiographers and physicists. Finally, rating of job stress and satisfaction depends significantly on the age group, gender, experience and the hospital.

**2.16 K. CHANDRAIAH et. al. (1990) research study with title;** Occupational Stress and Job Satisfaction among Managers, states; Individuals under excessive stress tend to find their jobs less satisfying. Some of their intrinsic or extrinsic needs may be thwarted or not met sufficiently. Corroborating many studies in the literature (Hollingworth et. al. 1988; Keller, 1975), the findings of the present study also reveals the same. The subjects with lower job satisfaction were found to experience more stress in the form of overload, role ambiguity, and role conflict, under participation, powerlessness and low status compared to those with higher job satisfaction. Age, therefore, was found to be of importance in these study findings. The results of the study reiterate the significance of demands at each career development level as pointed out by Halling worth. And the individuals encounter crisis at each developmental stage as hypothesized by Erickson. Significantly decreasing stress and increasing



job satisfaction with increasing age was found among the managers and these confirm the importance of the developmental process. (K. CHANDRAIAH et. al. 1990)

**2.17 An Empirical Study (1999) with title, “Effect of Job Stress” reported that;**

job stress is one of the vital issues in the organization. It has been established that a negative relation exists between job stress and job performance, job stress and job satisfaction.

**2.18 This review with title factors influencing stress and job satisfaction (2001):**

shows that various elements affect stress level and job satisfaction. These elements are leadership, quality control, relation between doctor and nurse. It has been established that a negative relationship exists between leadership, stress and job satisfaction.

Although a positive relationship between clinical leadership and nurses' job satisfaction was found, the association between clinical leadership and quality of inter-professional collaboration is unclear. The association between these variables and job satisfaction is positive but tenuous. In addition, a positive but weak relationship was revealed between the clinical leadership and the quality of relationships amongst nurses. Organizational issues, lack of nursing staff and patient care were found to be related to ward type mental health nurses' stress emerged as mediating variables between stress and job satisfaction.

**2.19 Beatrice et. al. (2002)** has found that the higher is the demand on job the higher will be the stress and demanding job negatively affect the health of the nurses and result in deterioration of general health.

**2.20 Center for Organizational Health and Development (2002) researched on job related stress in nursing:** The research appears to support the view that, together, factors inherent in the nursing role and in the organizational culture within which the nurse works are as important a determinant of the experience of stress by nurses as the

type of nursing pursued. Stress in nursing reflects the overall complexity of the nurses' role, rather than any particular aspects of their individual tasks. Different nursing groups report similar levels of stress, the profile of stressors associated with those similar levels differed somewhat between groups. However, the inter-group differences reported in those studies and others are not sufficient to argue for the separate treatment of the various nurses' groups which exist in hospitals. Therefore, while strategies for stress management needs to be tailored to the generic group, hospital-based nurses, they do not need to be further tailored to distinguish between different types of hospital-based nurses. (O.H.D, 2002)

**2.21 HSE (1995) research study entitled health effects of stress in nursing” states**

that job stress negatively affects quality of nurses' work it results in creating minor psychiatric morbidity, physical illness and a lot of other health related diseases. It also increases the Musculo skeletal disorder and depression. Nurses are amongst those groups of profession which reported a higher level of stress.

**2.22 The study here is of Kaohsiung City government employees, china human resource management deptt (2000),** entitled job stress relation with social support and job performance. It has been proved in the above research study that there is great relevance between job stress and job performance. job stress is inversely proportional to job performance. Further social support has a great impact on level of job stress. Greater social support results in the reduction of stress level and hence increases the performance of the employees. The report also indicated that female employees feel more stressed as compared to male employees (Bheer 2000).

**2.23 Ms. santha et. al. (2003)** research report has presented that the stress level of the employees has various effects on the employees as well as on the organization. Due to stress the employee may result more absenteeism, accidents, high turnover rate and impaired decision. Up to some extent stress may be a good thing. It gives the push and motivation to the employee. But extreme stress is harmful. It may result in poor performance and yet productivity of the employees is reduced.

**2.24 NIOSH (1999) reported that;**

40% of workers say their job is extremely stressful. 26% of workers report burnout during working hours.

**2.25 David's and Theresa's (1999)** have reported that 25% of the employees have considered their job stressful, 75% of the employees say that the task in the modern organization is more stressful than earlier. Job stress may give rise to a lot of problems during the work and it is attached with health problems etc.

**2.26 NIOSH (2001) model of job stress is self-explanatory;**

STRESSFUL JOB CONDITIONS=RISK OF INJURY & ILLNESS.

(Individual/situation factor apply)

**2.27 The NIOSH (1999) research study on gender and job stress** finds that sex discrimination, role conflict and role ambiguity and family demand may have more severe effect on female employees. Stress can be reduced in the organization by introducing a change in the workplace. It may result in the reduction of stress levels for both workers male and females' workers. The organization should promote family friendly policy, discourage sex discrimination.

**2.28 The research study with the title "Women in Construction”** has reported that women in the construction industry have complaints of frequent harassment isolation and abuses by her coworkers. The turnover of the female workers in the construction industry is higher as compared to others. Female labors in this industry are always at higher risk due to lack of safety measures and trainings. (NIOSH)

**2.29 In the research study by NIOSH (1999)** of female's workers in the internal revenue service (IRS), which states that musculoskeletal discomfort can be reduced to a great extent if periodic rest is provided to the worker during

working hours. It may result in higher job performance.

**2.30 NIOSH (2001)** has presented in a survey that 60% of the woman workers have reported that stress is a great problem for them. They have cited that the following are the major sources of stress during job for females employees, role conflict and role ambiguity, poor relationship with other workers, burden of work, rush poor working environment, monotonous and repetitive work, lack of control over job, demands etc.

**2.31 Journal of Occupational and Environmental Medicine (2001)** indicated that in the current era the stress related expenditure on employees is 50% higher than the early period. In current era organization cost of job stress has increased tremendously.

**2.32 Encyclopedia of Occupational Safety and Health (2001)** states that high demanding jobs enhances the risk of cardiovascular diseases, musculoskeletal disorders, psychological problems, injuries at work, suicide, cancer, ulcer and impaired immune functions.

**2.33 NIOSH (2001)** research report on job stress health and productivity states that job stress has inverse relation with productivity and it negatively affect the health of the employees. Stressful working condition results in poor health of the employees. Job stress increases absenteeism, tardiness and result in higher turnover and poor health.

**2.34 Journal of Applied Psychology (2001)** research report with the title "Stress Prevention and Job Performance" states that effect of intervention program on job stress is very encouraging. The organization should educate employee on job stress, inform the employees regarding policies of the organization, how to reduce job stress and initiate employees support program. Stress prevention program encourage employees and results in enhanced production.

**2.35 NIOSH (2000)** has reported that on average employees remain off the job for almost 20 days due to job stress, so job stress results in increased absenteeism.

**2.36 The report by national insurance company (1920)** entitled employee burnout states that job stress directly proportional to burn out of employee. Employees stress level should be reduced to avoid employee's burn out.

In the research study by the national insurance company, it is evident that female workers feel more stressed than male workers. The chances of burnout and physical sickness related to job stress are more severe among female workers. The reason may be that the women are paid less than male workers. They are more prone to job stress.

**2.37 European Agency (2001) research report** has mentioned the following details which may increase the cost of organizations. Each year millions of working days are lost due to job stress. The cost of job stress in term of money is in millions of dollars.

**2.38 Many studies** have tried to determine the possible positive relationship between job stress and violence at work and drug use. One study has established the fact

that job stress creates negative individual characteristics and has negative effect on the organization. The workers who experienced job stress start using drugs, alcohol and tobacco to reduce their tension, so job stress is one of the reasons for drinking in the workers ILO (2001).

**2.39 University of utara (2004), Malaysia, school of accounting, report on job stress** among professional accountants working in selected public firms, a Malaysia case, establish and extends that job stressors faced by workers during job includes workload, role conflict, role ambiguity, lack of job autonomy and lack of job control.

**2.40 A research report in Saudi Medical Journal (2003) titled "Job satisfaction and organizational commitment** "states that female nurses are more satisfied and contented in the public sector hospitals, the study further reveals that satisfied nurses provide higher output as compared to less satisfied nurses. The other factor for higher production from nurses is there commitment toward job.

**2.41 A report in journal of health (2003)** with title "stress and suicide in nurses" revealed that the relation between stress and suicide remained U shaped. When the job stress and home stress are combined, fivefold increase in risk of suicide among women occurs. Risk of suicide among high stress women is more compare to low stress experience by women.

**2.42 School of Health Science (2002), Blekinge Institute of Technology Karlskrona, Sweden entitled "job stress of nurses"** concludes that stress contains amongst other the element of moral. There is shortage of nurses in the health care and organizational structure too impedes nursing performance to avoid the negative consequences of stress for nurses' moral support is required. In ICU stress and complex situation are common for all nurses, the stress implication are sometime ethical issues, morbidity and burn out, the report revealed.

**2.43 Queensland University of Technology (2002), thesis with the title "The influence of work stress and work support on burnout in public hospital nurses"** States that female nurses with high level of stress and little support have experience high rate of burnout. Job stressors were the main predictors of Emotional Exhaustion, Conflict. Changes in the objective conditions at work have had major implications for nurses' subjective experiences of work, with increasing numbers of nurses feeling stressed and as a consequence, are opting to work part-time or leave the profession

**2.44 HSJ - HEALTH SCIENCE JOURNAL (2005), REPORT CARRYING THE TITLE "job stress and job satisfaction"** shows that a strong negative relationship was found between clinical leadership, inter-professional collaboration, and stress and job satisfaction. Although a positive relationship between clinical leadership and nurses' job satisfaction was found, the association between clinical leadership and quality of inter- professional collaboration is unclear. The association between these variables and job satisfaction is positive but tenuous. In addition, a positive but weak relationship was revealed between the clinical leadership and the quality of

relationships amongst nurses. Organizational issues, lack of nursing staff and patient care were found to be related to ward type mental health nurses' stress emerged as mediating variables between stress and job satisfaction., (HSJ, 2005)

**2.45 A research study by Deptt of medicine (2006). University of Ottawa, entitled, "job stress correlation with job satisfaction and burn out"** The findings are that medical staff frequently faces burn out due to high level of job stress. The turnover rate amongst the highly stressed workers are very high. The problem of burnout is common amongst the staff of cancer unit.

**2.46 A research paper by School of Health Care Practice 2006, Anglia Polytechnic University, Chelmsford, Essex (2009), UK, entitled "Workplace stress in nursing"** finds that workload, management style, professional conflict and emotional cost of caring and leadership style, lack of reward and shift working are the main sources of stress for nurses for many years. Stress management program should concentrate on stress prevention as well as how organization should take this vital issue.

**2.47 The Graduate College University of Wisconsin-Stout (2005), Research Paper with title OCCUPATIONAL STRESS IN MENTAL HEALTH COUNSELORS,** concludes that, the mental health counselors involved in completing the survey instruments scored an average of 2.57 on a five-point scale, with past administrations of the Weinman Occupational Stress Scale having yielded a baseline score of 2.25. The mental health counselors in this study scored on average 13% higher than the calculated WOSS baseline. Employees in publicly funded institutions (Winnebago Mental Health) experience greater perceived work stress than those counselors in privately funded clinics. (Wisconsin, 2005)

**2.48 Research study conducted by Carol Brewer (2000)** mentioned that new comers in the profession of nursing confront enhanced stress as compared to existing lot. New nurses have reported the following are the major sources of job stress for them; complex jobs, long hours, overtimes frequently, role conflict, role ambiguity, dangerous working conditions, abuses, inadequate resources and strain.

**2.49 An Exploratory study (2001)** to dig out the job stressors conducted in Taiwan on nurses concludes that changes in the today's organizations, role conflict, role ambiguity, lack of social support, working environment in the hospital, demanding job of nurses are the main stressors for nurses.

**2.50 European Journal (2005) of Social Sciences, report entitled "Link between Job Stress and Job Satisfaction"** signify that job stress and job satisfaction are inversely corelated. According to Stamps & piedmont (1986) job satisfaction has been found significant relationship with job stress. One study of general practitioners in England identified four job stressors that were predictive of job dissatisfaction (Cooper, et al., 1989). In other study, Vinokur-Kaplan (1991) stated that organization factors such as workload and working condition were negatively related with job satisfaction. Fletcher & Payne (1980)

identified that a lack of satisfaction can be a source of stress, while high satisfaction can alleviate the effects of stress. This study reveals that, both of job stress and job satisfaction were found to be interrelated. The study of Landsbergis (1988) and Terry et al. (1993) showed that high levels of work stress are associated with low levels of job satisfaction. Moreover, Cummins (1990) have emphasized that job stressors are predictive of job dissatisfaction and greater propensity to leave the organization. Sheena et al. (2005) studied in UK found that there are some occupations that are reporting worse than average scores on each of the factors such as physical health, psychological well-being, and job satisfaction. The relationship between variables can be very important to academician. If a definite link exists between two variables, it could be possible for a academician to provide intervention in order to increase the level of one of the variables in hope that the intervention will also improve the other variable as well (Koslowsky, et al., 1995).

**2.51 A Study of Job Stress and Job Satisfaction among University Staff in Malaysia, a research article (2007)** investigates what correlation exists between job stress and job satisfaction? Inverse relationship exists between job stress and job satisfaction. The stressors that have been taken for research contain leadership style and interference by management, relationship with peers, work burden, role ambiguity, and role conflict.

**2.52 Faculty of Education (2001), University of Ibadan, article entitled "Effects of Job Stress"** states that stress has negative effect on health, physical and mental, work behavior, and performance, satisfaction level.

**2.53 Heavy workloads, difficult students and lack of resources are stressing out Australian teachers (1999).** Many also experience stress from increasing violence and bullying. In one recent year, 274 teachers in Victoria were either assaulted or threatened by students and another 70 were attacked by colleagues. Over the past five years, 910 teachers in Victoria and 1150 teachers in New South Wales have filed worker compensation claims for anxiety, depression, nervous breakdown and other stress related symptom. Union leaders say these figures are just the tip of the iceberg: Teacher are very reluctant to proceed with those claims because it just adds another problem and additional stress, explains Australian education union president John Gregory Teaching in Australia may be stressful, but the profession seems to be under siege in the Uk, Janice Howell a primary school teacher in Newport (South Wales) is one of the casualties. She initially had the assistance of an English language teacher but that teacher took long-term leave with no replacement. Unable to cope with 28 kids, 11 of them with learning or behavioral difficulties, Howell had a nervous breakdown. After recovering several months later, Howell complained to the school about the intolerable stress. Rather than providing support, the school added two more troubled kids to Howells class. One student, new to Wales, ran away one morning and was seen playing near dangerous mudflats. Although he was taken home safely, no one told Howell until the end of the day. This led to Howells second breakdown, ending her career. From being a confident, well-adjusted teacher who enjoyed her job I



became depressed and dysfunctional, says Howell for the first time in my life I did hate to go to work. It got to the stage that I was physically unable to enter the classroom. (Steven Mc shane,2004)

**Nebuo Miuro (1999)** quoted in the book about stress that employees are under a lot of pressure from his employer to get a new restaurant ready for its launch. The interiors fitter from Tokyo worked late, sometimes until 4.30 in the morning. After one such marathon, Miuro caught a few hours' sleep, then return for another long day. But he didn't get very far. The 47-year-old suddenly took ill and keeled over while picking up his hammer and nails. He died a week later. The corners verdict was that Miuro died of Karoshi death by overwork. Karoshi accounts for nearly 10000 deaths each year in Japan. Research indicates that long work hours cause an unhealthy lifestyle such as smoking, poor eating habits, lack of physical exercise and sleeplessness. This result in weight gain, which, along with stressful working conditions, damages the cardiovascular system and leads to strokes and heart attacks. Karoshi came to the public spotlight in the 1970s when Japans economy was booming, but the country's current recession is making matters worse. companies are laying off employees and loading the extra work onto those

who remain Performance based expectations are replacing life time employment guarantees, putting further pressure on employees to work long hours. Many also blame Japans samurai spirit culture which idolizes long work hours as the ultimate symbol of company loyalty and personal fortitude. Being exhausted is considered a virtue explains a Japanese psychiatrist. So far, only 17 percent of Japanese companies offer over stressed employees some form of counseling. However, the Japanese Government has launched an advertising campaign encouraging people to call a Karoshi hotline for anonymous help.

The families of deceased workaholics, including Nobuo Mauro's relatives are also taking action by suing the employers for lack of due care. (Steven et al,2004)

**2.54 A report (2001)** regarding working out causes of burn out among managers and nurses in Canada concluded that job stress is positively corelated to burn out. The correlation was analyzed from various perspective that is emotional exhaustion, lack of accomplishment and depersonalization. Job stress was significantly correlated with overall burnout. In the nursing sample, job stress was also significantly correlated with psychosomatic health problems and organizational commitment. Moderated multiple regressions only marginally supported the role of gender as a moderator of stress- burnout relationship. (Taylor R,2001)

**2.55 A research article (2001)** relating to job stress and gender indicate that there are statistically significant differences in the stress levels of employees based on their gender. With females experience more stress then male. And physical conditions are considered as a most stressful factor for females. Male experiences less stress with physical conditions. Women were found to experience more stress then male. They are more affected by physical conditions such as noise, lightning etc. (Cox T,2001)

**2.56 Journal of Managerial Psychology (2006)**, research report on stress and various enterprises found that workers in the private s experience more stress than the workers in public sector organizations. According to this study the stressors in organization are no knowledge about job, lack of appreciation, lack of evaluation. Saudi workers feel extreme stress as compared to others such as Arabs, Asiana, Europeans, American. the stress level of workers is also influenced by educational levels of workers.

**2.57 An article on "Occupational stress and depression in Korean employees"**

(2001): States that lack of social support, complex and irritating work environment are the prominent elements, which results in depression in Korean employees.

**2.58 Department of Psychology & Applied Psychology research study (2008)**

University of the Punjab, entitled "OCCUPATIONAL STRESS AND JOB PERFORMANCE" indicated that heavy load of work/burden, monotonous work, lack of support from co-workers are major stressors in work set up. Further, it is reported that job stress affect performance of employees.

**2.59 In research study about "Occupational Stress and Employee Control "(1992),**

psychologists have established that job stress is inversely proportional to control over work. Better control over job may results in greater productivity and inflate motivation. Entire control is directly related to better health, output morale. It enhances decision making power of employees and they can easily manage work burden. Psychologists have discovered that demanding tasks requires better control on job. Lack of control result in poor health for employed.

**2.60 Colegio Official de Pasic. logos (2007) s 'article has** found that stressors in work set up are corelated with poor health. The study reveals that job of psychologist is very stressful. In this comparative research report psychiatrist feel less stress as compared to their colleagues.

**2.61 A report presented by European Commission (2007)**, states that job stress negatively affects 40 million employees in Europe alone. 20 billion annually is lost due job stress. It is now established that job stress is big hurdles in better performance and high in cost, Health related problems are also associated with job stress.

**2.64 Leo Sin and Danny Cheng (2004)** identified six sources of job stress; job- assigned (overload) responsibility (role clarity) work/organizational climates; career; job value conflict; and role ambiguity. These not only overlap with the sources of stress, but also lead to many of the same consequences. Managers, who reported high jobs- assigned stress, role ambiguity stress and work organizational culture stress, also reported higher levels of psychological symptoms such as restlessness and forgetfulness. Those reporting high job-assigned and job value conflict stress reported higher level of psychosomatic symptoms such as headaches, poor appetite and trouble in getting to sleep.

Continuing the theme of interrole conflict, research by Aryee at the university of Singapore suggest that family

and work roles and stressors impact on perceived work-family conflict and several outcomes; job and life satisfaction, turnover intent and perceived work quality. He found that for a group of married, professional Asian women, work-home conflict increases when they experience overload, high work load

, low autonomy and high commitment to family roles. Following through to the consequences of role stress, Aryee found that, in all cases, individual reported lower levels of job satisfaction. (212) More and more we are seeing dual career couples in the work place. As their number increases, so we must ask what the impact of juggling several roles is on their work and home lives. Do problems at work spill over into home life? Do family problems affect our working life? In recent years, the issue of role and mood-spill over has received a lot of researches attention. Research shows that work affects our home lives far more frequently than our home lives impact on work. When work- family conflict exist, individual report more depression, job dissatisfaction, higher cholesterol levels and more somatic complaints (e.g., headaches, insomnia and sweaty palms).

What impact does spillover have? When we feel bad do, we carry those negative feelings between home and work? Is the same true for pleasant feelings? And how does our involvement either with home or work influence the spill-over process? First research shows that negative mood all spill over far more then positive moods. If we leave work feeling distress, we will carry that mood home with us; however, if we leave work feeling elated or calm, it will have little impact on how we feel at home. And this affect is far stronger for women than men. Interestingly the more involved individual is in their jobs, the less mood spill over we see.

Over all research shows that work interferes with family far more than family interfere with work, Michael O Driscoll, at Waikato Universities, together with Cary cooper used a critical incident analysis to determine what stressors are faced by New Zealand workers and how they respond. According to their survey, the three most important sources of stress are organizational conflict, work over load and a lack of resources.

**2.65 Fiona (2003)** describes in her book about a training co found that one in three people complained that technology at work contributes directly to rising stress levels.

Referring to this as digital depression the managing director noted how he had recently come across a person who had 19400 emails in his inbox (Hilpern 2003)

Work stress is thought to contribute to nightmares about killing the boss. Stress at work is contributing to regular nightmares for one in two adults (Womack 2003). Research in Britain found that 51 per cent of respondents suffered work related nightmares at least once a week with the figure rising to 61 percent among Londoners. A row with the boss was the most common dream followed by arriving late for meeting. Worryingly 7 per cent confessed to dreams where they wanted to murder the boss.

Over work can lead to death. There have been reports in the newspaper recently of deaths due to over work in Japan. Death due to this rose to 317 in 203 doubling the previous record of 147 cent in 2002. Doctors, factory workers, and taxi driver are the worst affected. (Fiona m. Wilson)

**2.66 According to a recent study** by NIOSH, (2002) reported by Stephen which 'states that more than half the working people in the united states consider stress as an irritant in their lives. This is more than double the percentage reported the early 1990s. The people who have experienced stress related illness tripled between 1999 and 2002. In an annual survey released in 2002, 29 per cent of respondents faced severe stress during job in 6-year history. The American institute of stress estimates that stress related- absenteeism, burnout, mental health problems-cost American business approximately \$300 billion a year. The European Community officially dubbed stresses the second biggest occupational health problem facing employers in Europe. (Stephen 2002).

**2.67 Murray Bruce, (1983, 1990), a specialist in occupational medicine described the today's reaction to stress in the following terms:**

*The heart and breathing rates increased, blood pressure goes up, sweating increases, muscles get tense, the eyes widen, and there is heightened alertness. Tense muscles caused headache, backaches, shoulder and back pain. Clenched hands, clenched jaws, and hunched shoulders along with frowning and fidgeting, figure tremor, and the mopping of a sweaty brow. An anxious person has "butterflies" or churning in the stomach, a dry mouth, weak legs, nausea, a thumping heart, breathlessness and a feeling of light-headedness.*

Course participation at a management college reported on symptoms of stress that they had previously experienced. These included dim or fizzy vision, some chest pain, unusual heart beats, occasional sleep difficulties, frequent episodes of irritability, tiredness, or depression (this was by far the most frequent), and periods in which their work performance was impaired for a few days. (melhuish, 1977)

Eugene Mckenna (2000), the following is what a 37-years old teacher and head of department at a large comprehensive school, who is also a mother of two children, was reported as having said about her plight.

*I am exhausted all the time; I do not sleep very well and when I wake up at night I panic about work; I am losing weight; eczema flares up when the pressure increased; frequently I feel guilty because I do not see enough of my children; I over- react when little things go wrong; recently I would not stop crying at weekends; and my marriage would have collapsed by now if I had not such an understanding husband. I cannot go to senior management because it would sound like I cannot cope, and with a new head in the school I feel under even more pressure to perform. I realize that for the sake of my health and marriage, something will have to change.*

In this case the acute pressure or distress stems from trying to cope with a demanding job coupled with work in the home.

**2.68 Stress in different occupations** by Eugene Mckenna (2005) analysis of mortality due to atherosclerotic heart disease among U.S males by occupational classification in the age range 20-64 shows that teachers fare better than lawyers, medical practitioners, estate agents, and insurance agents (guralnick, 1963a, 1963b, 1963c). However, general practitioners are more vulnerable to heart disease than are other physicians (Morris, heady, and barley, 1952)

As to suicide rates, those connected with law enforcement had higher mortality rates than those that administering the law, though individual who exposed to life-threatening situation suffer less stress than those who are not. Among medical and related personnel, practitioners with above average suicide rates are dentists and psychiatrists.

Dentists are said to experience significant pressure from the demands of developing their practice. The dentist prone to stress tends to be anxiety prone and more easily upset when confronted with excessive administrative duties and when faced with too little work because of a preoccupation with building and sustaining the practice. Dentists with raised blood pressure perceived, to some extent, their image as inflictions of pain. They also experienced stress from their job interfering with their personal life.

**2.69 "The Epidemic of the Eighties"** reported in Time Magazine (1983) considered job stress in the organization is a big problem for workers it negatively affect the health of the workers. The magazine further reported that the situation has become worsened and the workers in the modern America experience more stress than the earlier workers.

#### **2.70 NIOSH (2004) model on STRESS AND PRODUCTIVITY.**

The below model clearly exhibits the relation between job stress & productivity. LOW JOB STRESS = HIGH PRODUCTIVITY

**2.71 stress and productivity (NIOSH 2004)** about job stress and productivity NIOSH (2004) presented the following model,  
HIGH JOB STRESS = LOW PRODUCTIVITY  
The above model is self-explanatory

**2.72 The article titled, Job Stress among Teachers Engaged in Nursing (2006) concludes** that job stressors among teachers of nurses are work load and job control, lack of reward, confliction personal relations and qualitative load of work among women.

**2.73 A survey in 2002, titled "Occupational Stress in Australian Universities"** by Anthoy H (2002) reveals psychological strain, in addition to various work place factors such as job insecurity, job satisfaction, work pressure, and work-home conflict, was highly significantly correlated with a number of stress related health symptoms experienced by staff (e.g. backache and difficulties in sleeping, headaches, neck pain, viral and cold infections etc.). These symptoms were in turn found to be significantly correlated with the number of stress-related medical conditions reported by staff, such as, hypertension, migraines and coronary heart disease.(Anthoy H, 2002)

**2.74 Research findings of WHO (2005),** research paper indicate the most stressful type of work is that where demands and pressure are not matched with skill of employees and where there is no opportunity, control and support from others.

**2.75 WHO (2005) report** entitled 'Stress experienced at work' can be divided into two groups, work content and work context. The research report of WHO (2005) entitled "stress and work hazards" states that the hazard at work can be divided into two groups Work contents and Work context, work contents consist of job monotony, workload, work pace, time pressure, working hours, strict or inflexible time un social system badly designed shift system, control process and participation. Work context contain carrier development, job status, compensation, insecurity, lack of promotion, low social values, piece rate payment system, unclear and unfair performance evaluation system, over or under skilled for job, role in organization, interpersonal relationship, organizational culture, work life balance etc.

**2.76 According to a research study (2001) on nurses in Ankara Turkey entitled effect of physical environment on the stress levels of nurses,** states and identify that education level and employment of the nurses are significantly related with the stress levels of hemodialysis nurses. Nurses marital status, occupational seniority, years of working, number of children, age, employment status, husband's occupation and husband educational level are highly significantly co related with their stress level. **2.77) According to Hans Selye GAS model;**

Selye (1982) model (details of model in chapter 1) represent that "The General Adaptation Syndrome assumes that each individual will react to a stressful situation in a certain way. It fails to take into account the individual's ability to interpret a threat as a source of pressure and act to change his situation." This ability is considered as coping or adaptation. (Selye, 1982)

**Model by William (1994) exhibits;**  
SOURCES OF STRESS + COPING BEHAVIOUR = PERSONALITY + EFFECTS

*Stress process*

In this model, the individual's personality attributes, has a very significant influence on the potentiality both of the sources of stress and of the coping behaviors.

Cox (1993) emphasizes the importance of the feedback loop in models of this kind: "If person realize that they are failing to cope with the demands of a task, and experience concern about that failure because it is important, then this is a 'stress' scenario. Stress reduces the performance and as well ability of the person. (William, 1994)

Cox (1993) indicated two important sources of stress arising from the role of person in the enterprise that is role ambiguity and role conflict. When a worker has insufficient information about his work, role ambiguity occurs and when individual is compel to perform a task in conflict with the values role conflict occurs. Role conflict and ambiguity positively co related with absenteeism, leaving the job, psychological and physiological strain, tension and fatigue. Role conflict and ambiguity is negatively co related with organizational commitment, job involvement, performance, decision making, tolerance, satisfaction, physical with drawl and reported influence.

"Poor relations with colleagues, supervisors and subordinates at work have been identified as important risk factors" for stress-related problems indicated by Sauter, Murphy and Hurrell (1992). Cox and Griffiths



(1995) identify the characteristics of situations experienced as stressful, one of which is “individuals are relatively isolated and receive little support from colleagues, supervisors, friends or family” (Cox and Griffiths 1995).

Gangster (1986) research study found a strong correlation between a lack of social support, especially from a supervisor, and dissatisfaction with work. It clearly shows that social support is a significant element in the organization which de enhance the level of stress and increase the level of satisfaction.

Lazarus and Folkman (1984) reported in their research study that employees will have better health and moral and satisfaction and performance if they get social support when required. French, Caplan and van Harrison’s (1982) research study indicate that some job is assignment characteristics are associated with stress. These characteristics may be too little or too much work, too complex job, more little responsibilities, work burden, long hour’s services and greater education needed for that specific job. These characteristics produce discrepancies between individual and his assignment so here it means that job stress may be the co relation between job and person (French, Caplan and van Harrison, 1982).

#### 2.78) Physical and environmental factors causing stress.

Physical and environmental factors can have an effect on the stress experienced by a person in the workplace. Examples are lighting, ventilation, noise, vibration, chemicals, dust, badly designed machinery and equipment, and badly designed premises. (The London Hazards Centre 1994). Burke (1988) reports the “most frequently mentioned environmental stressors” as including density and crowding, lack of privacy, high noise levels, vibrations and/or sound waves, temperature extremes, air movement and background color and illumination. (LHC, 1994)

#### 2.79) Stress may affect health

Teasdale and McKeown, (1994) reports that “Stress itself is not an illness, rather it is a state. However, it is a very powerful cause of illness. Long-term excessive stress is known to lead to serious health problems” (Teasdale, 1994)

The relationship between stress/strain and a variety of adverse physical and psychological health conditions is well-established. “Stress may affect health. At the same time, however, a state of ill health can act as a significant source of stress, and may also sensitize individuals to other sources of stress by reducing their ability to cope. Within these limits, the common assumption of a relationship between the experience of stress and poor health appears justified.” (Teasdale, 1994)

An investigation by the Post Office occupational health service (IRS, 1994) found that “psychological problems” were the second most common reason for early retirement on health grounds [after orthopedic injury]. The pressure group The London Hazards Centre (LHC, 1994) list an array of outcomes of working excessive hours, including physical and psychological fatigue, increased risk of heart disease, sleep difficulties, sexual disorders, gastric disturbances, headaches, backaches, dizziness, weight loss, apathy, depression, disorganization, feelings of incapability, irritability, intolerance, boredom and

cynicism. The “most extreme consequence” is sudden death. Cranwell-Ward (1995) reports that death from overwork [*karoshi* in Japanese] has been officially registered as a fatal illness in Japan since 1989, and goes on “in 1990 the labor ministry received 777 applications for compensation because of *karoshi*.” (LHC, 1994)

A more common outcome of stress/strain is an increase in accident rates at work (LHC, 1994). Carter and Corlett (1981), in a review of the literature on mental health and involvement in accidents, reported that “the mental state of the operator,

whether he is fatigued or over-aroused, alert or distracted, has been the most frequently suggested reason for accident-causation during shiftwork.” Cartwright et al (1993) studied accidents involving company car drivers from three subsidiaries of a major company, and related them to stress levels. They found the highest rates in the subsidiary which also returned higher levels of occupational stress, poorer physical health, poorer mental health and lower job satisfaction. They concluded that “the significantly higher levels of occupational stress within [the subsidiary with the highest accident rate] indicate that stress is playing a major role in predicting accident rates.”

Prolonged exposure to stress can result in the phenomenon of ‘burnout’, defined as “exhaustion, underachievement, and the inability to handle personal relationships” (LHC, 1994),

Cox (1993) identifies from the literature several effects of stress which he believes may be of “direct concern to organizations.” Some of these, such as “reduced availability for work involving high turnover, absenteeism and poor time keeping” he classifies as “essentially ‘escape’ strategies.” Others involve what is described as ‘presenteeism’ - people continue to report for work but their performance and involvement is poor. Cox suggests that this may result in impaired work performance and productivity, with consequent increases in client complaints. Fingret (1994) also emphasizes the damage caused to organizations by presenteeism, claiming that “occupational health practitioners and psychologists are well aware of significant levels of stress and psychological maladjustment which have not resulted in significant sickness absence.” Fingret argues that this may be even more damaging to business efficiency than the absences which “though carrying physical illness labels, are in fact related to lack of mental well-being.” Cooper (1994) refers to the “huge costs ... of people turning up to work who are so distressed by their jobs or some aspect of the organizational climate that they contribute little, if anything, to their work.” (Cooper, 1994)

Where employees are required to exercise creativity and initiative these effects may be even more pronounced. Talbot, Cooper and Barrow (1992) studies found significant negative correlations between stress and the potential for creativity, although they were unable to ascribe a causal relationship between stress and creativity because “both may be an outcome of something else.” Karasek and Theorell (1990) hypothesis that “accumulated level of unresolved strain [or anxiety level] appears to restrict a person’s ability to learn solutions to new problems. The literature on burnout has also demonstrated that prolonged job stress is associated with decline in initiatives at work.” (Karasek, 1990)

Task performance is also found to be impaired when stress exceeds an individual's tolerance level. Selye (1982) maintains that "under stress people often perform at higher levels, but if the stress continues exhaustion sets in and leads to a range of problems. (Selye, 1982).

### 3. MATERIAL AND METHODS.

#### 3.1 Stress:

Stress has become an indispensable part of our daily life. We experience stress when life changes or when events occur. Working in a demanding environment is always stressful. Stress is physical tension or excitement or feeling of anxiety that occurs when the demands placed on people are thought to exceed their ability to cope.

The physical or psychological demands from the environment that cause this condition are called stressors. Stressors can take various forms, but all stressors have one thing in common: they create stress or the potential for stress when an individual perceives them as representing a demand that may exceed that person's ability to respond. (Luthan 2005)

#### 3.2 Research Topic:

Keeping in mind the negative impact of job stress on the health, wellbeing, performance and job satisfaction etc. of female nurses, the researcher chosen the subject topic for research. The case study of public sector hospitals of Lahore that is LRH, KTH, HMC were selected. because of the sense of cognizance of utility and importance of this kind of research topic. So, the researcher conducted research to dig out the main causes of job stress and its impact on job performance and job satisfaction in order to improve performance and job satisfaction of female nurses working in these hospitals.

#### 3.3. Impediments in Research Process:

By and large, Pakistani society is not research oriented and as a result the quantum of quality research work carried out here is extremely low as compared to the work done by other nations of the world, particularly European Nations and other advanced countries of the globe. The trend however is fast changing and the people, particularly those seeking higher education are taking keen interest in research work, regardless of numerous problems being faced in the process. A researcher, before embarking on any research project, has to think several times as to how he will manage the assignment. The biggest hurdle in the way of research work, in our society, is the non-cooperative and unfriendly attitude of the people in public sector as well as private sector organizations in assisting this research scholar. The people sitting at the helms of the affairs in different organizations/ departments exhibit very discouraging attitude towards research work with regard to provision of data. The environment of mistrust prevails in most of the public and private sector organizations and as such, the researchers are usually denied access to necessary data. Sometimes, the research scholar has to move from pillar to post in quest of requisite data which heavily cost his time, energies and resources but in vain. The main plea or pretext presented for non-provision of data to the researches is the phobia of leakage of official secrecy and confidentiality of the concerned record. Moreover, in Pakistan the clerical community, at large, is the custodian of so called secret and confidential official documents/

papers. These individuals are mostly bereft of broad vision and at the same time are ignorant of the significance and utility of research work for the society, due to their low level of education and understanding. Therefore, at the very outset, refusing him to get access to official data discourages the researcher. This situation, in some cases, assumes so cumbersome dimensions that the incumbent researcher has to go through the agonizing scenario by waiting for several months and sometimes to lay his hands on the needed data for his research project. The apathetic and un-patronizing attitude and lack of code of conduct on the part of government officers/official vis-à-vis employees in private sector organizations to extend much needed help to the researchers has further aggravated the already deteriorating situation.

#### 3.4. Nature of Research:

Primarily the nature of research conducted is descriptive and analytical. Efforts have been made to dig out the root causes of job stress of nursing staff and its effect on performance and job satisfaction. The work environment of public sector hospitals is a factory of stress for nurses. Efforts have been made to suggest suitable and sustainable remedial measures for improvement of the existing work environment in these public sector hospitals of Lahore in particular and others in general.

#### 3.5. Research Design:

Although the nature and concomitant dimensions of the topic are very extensive, but due to time constraints, financial impediments and above all due to hardships in the collection of data on the subject, the scope of research was so designed to manage its completion within bounds. The scope of research was kept limited to the female nursing staff of public sector hospitals of Lahore that is LRH, KTH and HMC only. This study utilized a descriptive, analytical research and used questionnaires to describe the causes of stress/ stressors and its impact on performance and job satisfaction. The strategy of this research design was to survey and collect data from the female nursing staff. There was no intervention involved in this study, and therefore a descriptive, analytical research design was most appropriate for this study.

This research has examined to what extent differences in one characteristic/variable is related to differences in one or more other characteristic or variables. So, it has been proved that correlation exist between various discussed variables or characteristics because with increase in one or more variables other fall or increases. This research study is a correlation research design (Leedey & Ormrod, 2001). Correlation research is known as a form of non-experimental research. "A correlation research design examines the extent to which differences in one characteristic or variable are related to differences in one or more other characteristics or variables. A correlation exists if, when one variable increases, another variable either increases or decreases in a somewhat predictable fashion" (Leedy & Ormrod, 2001, p. 180). There will not be any manipulation done to the variables observed. This research design helped to determine the correlation among variables. These variables were: job stress, its impact on job performance and job satisfaction experienced by female nursing staff.

### 3.6 Population /sample/selection of the participants

The population that was assessed in this study includes only female nursing staff of major three posts graduate teaching hospitals of Lahore that is LRH, KTH and HMC. The female nurses selected for this research was of various age group, service cadre, background and educated status. The subjects were selected from various wards.

### 3.7 Data Collection

The data was collected and completed over several months in the summer /winter of 2008-2009. The researcher distributed the questionnaires to small number of nurses at a time, during various shifts and days of the week, till data was collected from more than 365 nurses. The questionnaires were distributed to nurses in different Wards at various times and days to avoid disrupting patient care and work flow of the nurses. The data collected were coded and entered into the SPSS data system. Data was then tested for normality and finally analyzed to determine correlation between the variables identified i.e., Job stress and job performance, and job satisfaction assessed in this correlation research design. There was no anticipated impact on this setting immediately, though hopefully the survey results will positively influence this work environment futuristically. A correlation study examines the extent to which one variable is related to one or more variables (Leedy & Ormrod, 2001)

### 3.8 Variables

There are multiple variables (job stress, performance, job satisfaction) that were being examined in this study. The variables being assessed in this study are job stress and its effect on performance and job satisfaction. Variables were assessed among female nursing staff participating in this study. The variables in this study were examined to determine if a significant relationship exists between them. (See appendix of questionnaire for detail variables)

### 3.9 Measures:

The Questionnaire used in this study contained; General Section, which has collected information regarding demographical factors such as age, family status, work experience, marital status, service cadres and permanent background. One Section relates to determining stressors/causes of job stress and other two sections relate to digging out effects of job stress on job performance and job satisfaction (see appendix of questionnaire for detail variables) .

### 3.10 Data Analysis

The Primary data were collected through questionnaires. Then the data was analyzed through the SPSS. The data collected from the assessments were analyzed using the 15<sup>th</sup> version of SPSS. The descriptive statistics were used to obtain the demographic information of the sample. Descriptive statistics are used to describe a set of data (Howell, 2004). The data was statistically analyzed using a Pearson correlation (chi square).

### 3.11 Research Questions:

The research questions in this study all pertains to the identification of job stress and the relationship between job stress experienced by female nurses and its effect on

job performance and job satisfaction. The research questions in this study are as follows; Is there stress in the hospital settings?

Is there an overall significant relationship between job stress and job performance?

Is there a significant relationship between job stress and job satisfaction?

Is there a significant relationship between job stress and various age groups?

Is there a significant relationship between job stress and service length (experience)?

### 3.12 Research Hypotheses:

H1 Nursing profession is full of stress.

H2 Job Stress leads to decline in performance.

H3 Job Stress negatively affects job satisfaction.

H4 various age groups and job stress are co-related.

H5 Job Stress and experience (service length) has co-relation.

H6 Job Stress and service cadres have co-relation.

H7 Background (rural, urban) and family status (educated, uneducated) are co-related with job stress.

### 3.13 Expected Findings:

It was expected to find out in this research study that the public sector hospitals are factories to manufacture stress. Further to find out that there is a significant relationship among various variables in question such as job stress and job performance, job satisfaction, demographical factors.

### 3.14 Primary Data:

Primary data for the purpose of subject was collected through a close ended questionnaire. The questionnaires were distributed personally to the respondents in these hospitals. But the pace of responses received from the respondents remained very slow. Thus, several months were consumed in the collection of Primary Data from the respondents. The main focus of attention remained were three tertiary hospitals of Lahore. 500 questionnaires were distributed among the respondents out of which only 365 questionnaires were received back, some invalid questionnaires were rejected and 315 questionnaires were selected for analysis.

### 3.15 Scoring of Questionnaire:

The questionnaire contained four sections with option yes and no.

1. General section pertains to age wise split, experience, service cadres, marital status, background etc.

2. Section A relates to determining job stressors/causes of job stress.

3. Section B relates to digging out effect of job stress on performance.

4. Section C relates to work out effect of job stress on job satisfaction.

### 3.16 Statistical Tools Used:

For analysis of primary data, statistical tools were used. These are chi-square tests and Pearson-method (p- value). However, chi-square tests and chi-square analysis was done through Pearson method. As per scoring given above, the entire data of 315 questionnaires was tabulated in an Excel Spread Sheet. The same data was then fed into SPSS (15th Version) for calculation of results. The



results produced by the SPSS tool were then tabulated and interpreted.

**3.17.** Descriptive Analysis of Primary Data: The replies of the respondents were tabulated and analyzed descriptively to know the ratios of different scales (options) given in the questionnaire in the shape of percentages as per detail given in the following paragraph.

Factors	Yes	No	total
Rush of patients	255(81.0%)	60(19.0%)	315(100%)
Unhealthy work environment	291(92.4%)	24(7.6%)	315(100%)
Dangerous working condition	284(90.2%)	31(9.8%)	315(100%)
Insufficient resources	294(93.3%)	21(6.7%)	315(100%)
Peoples suffering	253(80.3%)	62(19.7%)	315(100%)
Gazing	223(70.8%)	92(29.2%)	315(100%)
Rotating shift	159(50.5%)	156(49.5%)	315(100%)
Conflict between home and work demand	232(73.3%)	83(26.3%)	315(100%)
Compulsory overtime	181(57.5%)	134(42.5%)	315(100%)
Lack of professional respect	267(84.8%)	48(15.2%)	315(100%)

**3.18.** Tabulation of Questionnaires: The responses received from the respondents were initially tabulated according to two scales (options) contained in the questionnaire. These scales were simply YES and NO. The results derived from the respondents received have been shown in tables for convenience of statistical analysis and keeping in view the significance of relevant responses, option of yes and no has been provided.

**3.19.** Statistical Analysis of Primary Data: For carrying out detailed statistical analysis of the primary data, the following statistical tools have been used.

**3.19.1** Chi-square analysis: Chi-square analysis was carried out on the basis of age, experience, marital status background, and status etc. The said variable of the respondents has been taken into account for statistical analysis.

**3.19.2** Correlation: Through the statistical tool, correlation of the relevant variables pertaining to hypothesis has been found.

**3.20 HUMAN SUBJECT PROTECTION:** This study posed no risk to the involved nurses. The researcher has tried his best to ensure protection of privacy of respondents. Researcher had access only to the information, computer based or manual files that had no subject identification. Nurses in this study did not receive payment for participation. Informed consent was obtained for completion of the questionnaires and survey. There was no intervention, manipulation of variables in this study. All female nurses were approached and surveyed individually or in groups of maximum three or four.

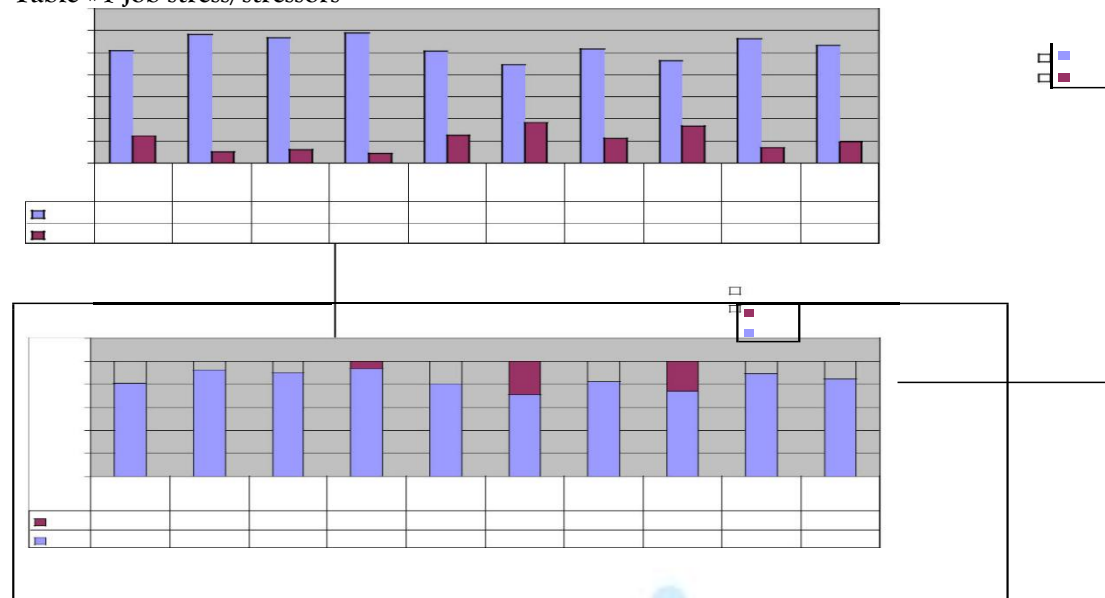
**3.21 Research model.** The researcher's entire research is based on the below model which is self-explanatory. According to this model the researcher first has tried to work out the causes of job stress and then to determine the effects of job stress on the job performance and job satisfaction of the respondents.

**RESULTS**  
In this part, the researcher has endeavored to examine the major causes of job stress in the hospital settings and how

job stress affects the job performance and job satisfaction of the respondents. It has been established that hospital setting is a factory to manufacture stress. It has all the raw materials required to produce stress during job.

**4.1 CAUSES OF JOB STRESS/STRESSORS;**  
In this section, the respondents identified various factors which cause them job stress. Details of how much (percentage) a factor is stressful are provided below.

Table #1 job stress/stressors



Source : Field survey

## FACTORS VALUES

Yes

No

350  
300  
250  
200  
150  
100  
50

0 Rush of Unhealt Danger Insuffici People Gazing Rotatin Conflict Compu Lack of patient hy work ous

ent s g shift between lsory profess

Yes 255 291 284 294 253 223 259 232 281 267

No 60 24 31 21 62 92 56 83 34 48

Graph 1

## FACTORS VALUES IN PERCENTAGE

No

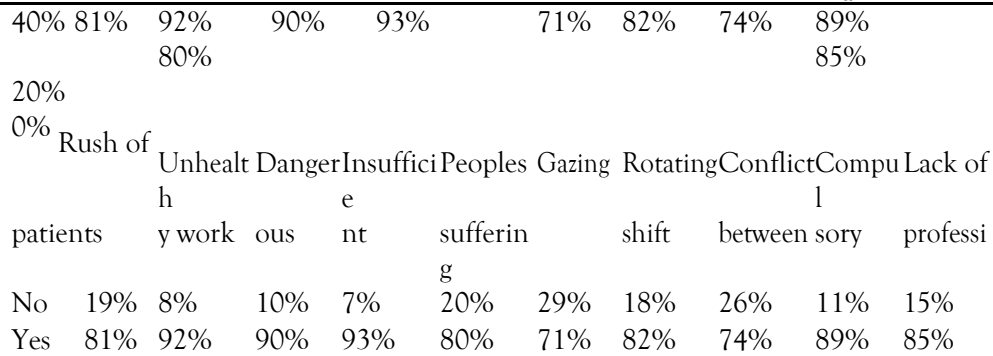
Yes

120%

100%

80%

60%



Graph ii

*H1 The nursing profession is full of stress:*

Out of the total 315 respondents, 81% (255) pointed out that rush of patients in hospitals is one of the causes of stress during job (table 1). 92.4 % (291), respondents say that unpleasant and unhealthy work environment is a cause of job stress, 90.2 % (284) identified that potentially dangerous working conditions are causing them stress on job. Further,

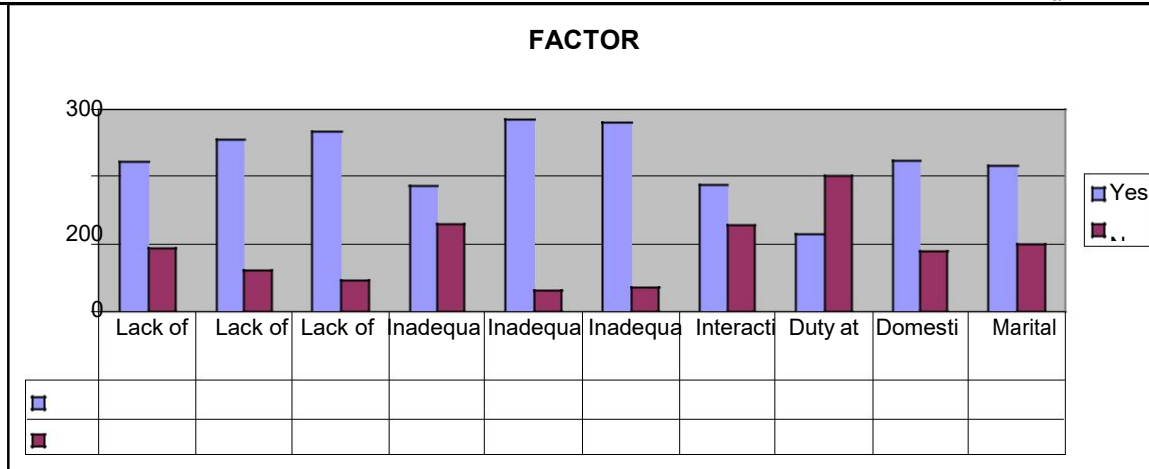
the respondents identified the above factors which cause them stress on job (details are given in the above table regarding respondents, expressing them 63

agreement (Yes) and disagreement (No) for stressors/causes of stress and their percentage).

**Table #2 Stressors**

Factors	Yes	No	Total
Lack of performance feedback	222(70.5%)	93(29.5%)	315(100%)
Lack of recognition	254(80.6%)	61(19.4%)	315(100%)
Lack of promotion chances	268(85.1%)	47(14.9%)	315(100%)
Inadequate accommodation	185(58.7%)	130(41.3%)	315(100%)
Inadequate pay	284(90.2%)	31(9.8%)	315(100%)
Inadequate benefits	279(88.6%)	36(11.4%)	315(100%)
Interaction focused on poor performance	188(59.7%)	127(40.3%)	315(100%)
Duty at night	114(36.2%)	201(63.8%)	315(100%)
Domestic problems	225(71.4%)	90(28.6%)	315(100%)
Marital problems	215(68.3%)	100(31.7%)	315(100%)

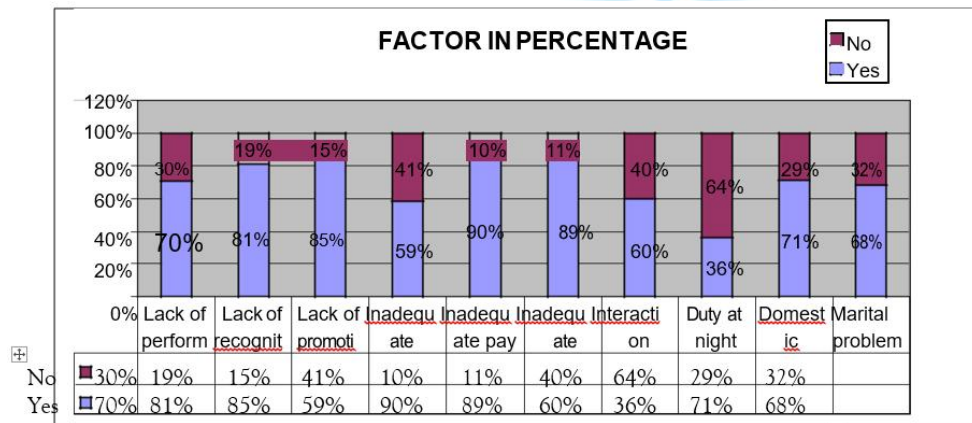




Source : Field survey

performa		recogniti		te	te pay	te	on	night	c	problem	
		promotio									
Yes	222	254		268	185	284	279	188	114	225	215
No	93	61		47	130	31	36	127	201	90	100

Graph iii



Graph IV

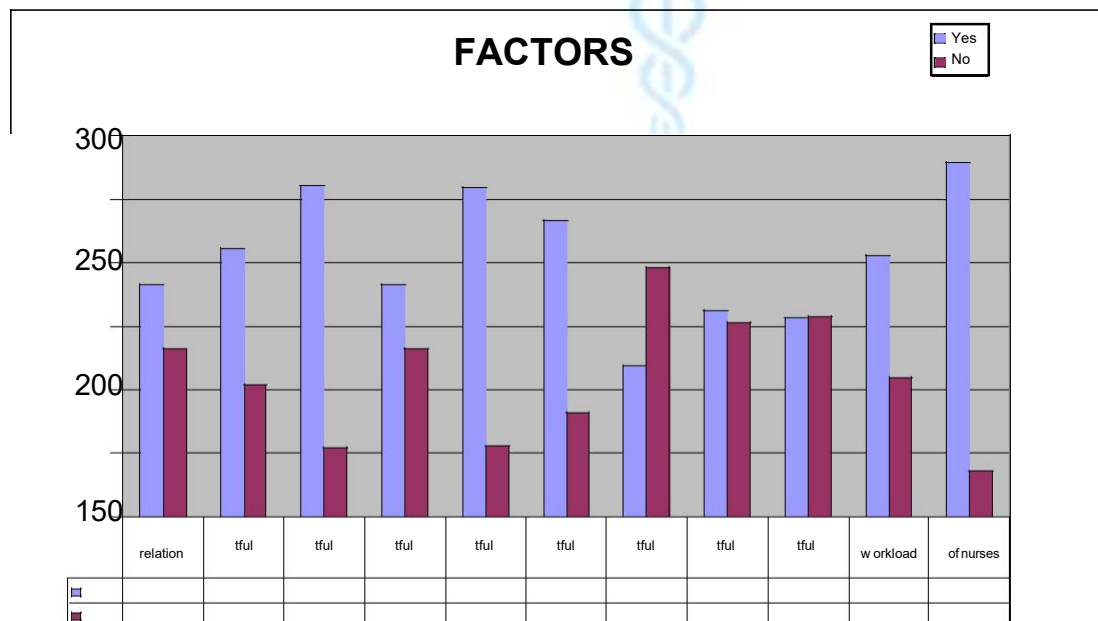
Out of the total 315 respondents, 70.5% (222) pointed out that lack of performance feedback is one of the causes of stress during job (table 2). 80.6 % (254) respondents say that lack of appreciation is a cause of job stress, 85.1 % (268) identified that lack of promotion chances are causing them stress on job . 92.2 %(284) respondents reported that inadequate

pay is a potent cause of stress. Further, the respondents identified the above factors which cause them stress on job (details are given in the above table 2 regarding respondents expressing their agreement (Yes) and disagreement (No) for stressors/causes of stress and their percentage)

Table #3 Stressors

Factors	Yes	No	Total
Estranged relation	183(58.1%)	132(41.9%)	315(100%)
Disrespectful behavior of doctors	211(67.0%)	104(33.0%)	315(100%)
Disrespectful behavior of patients	260(82.5%)	55(17.5%)	315(100%)
Disrespectful behavior of head nurse	183(58.1%)	132(41.9%)	315(100%)
Disrespectful behavior of patients attendant	259(82.2%)	56(17.8%)	315(100%)
Disrespectful behavior of visitors	233(74.0%)	81(26.0%)	315(100%)
Disrespectful	119(37.8%)	196(62.2%)	315(100%)

behavior of in laws			
Disrespectful behavior of relatives	162(51.4%)	153(48.6%)	315(100%)
Disrespectful behavior of hostel warden	157(49.8%)	158(50.2%)	315(100%)
Excessive workload	306(97.1%)	9(2.9%)	315(100%)
Shortage of nurses	279(88.6%)	36(11.4%)	315(100%)



Source : Field survey

	behavior	behavi	behavi	behavi	behavi	behavi	behavi	behavi	behavi		
		or	or	or	or	or	or	or	or		
Yes	183	211	260	183	259	233	119	162	157	206	279
No	132	104	55	132	56	82	196	153	158	109	36

Graph v

Out of the total 315 respondents, 82.5% (260) pointed out that disrespectful behavior of patients is one of the causes of stress during job (table 3). 82.2% (259) respondents say that disrespectful behavior of patient's attendants is a cause of job stress, Further, the respondents identified the above factors which cause them stress on job (details are given in the above table regarding respondents expressing their agreement (Yes) and disagreement(No) for stressors/causes of stress and their percentage).

## 4.2 EFFECT OF JOB STRESS ON JOB PERFORMANCE;

*H2 Job Stress leads to decline in job performance.*

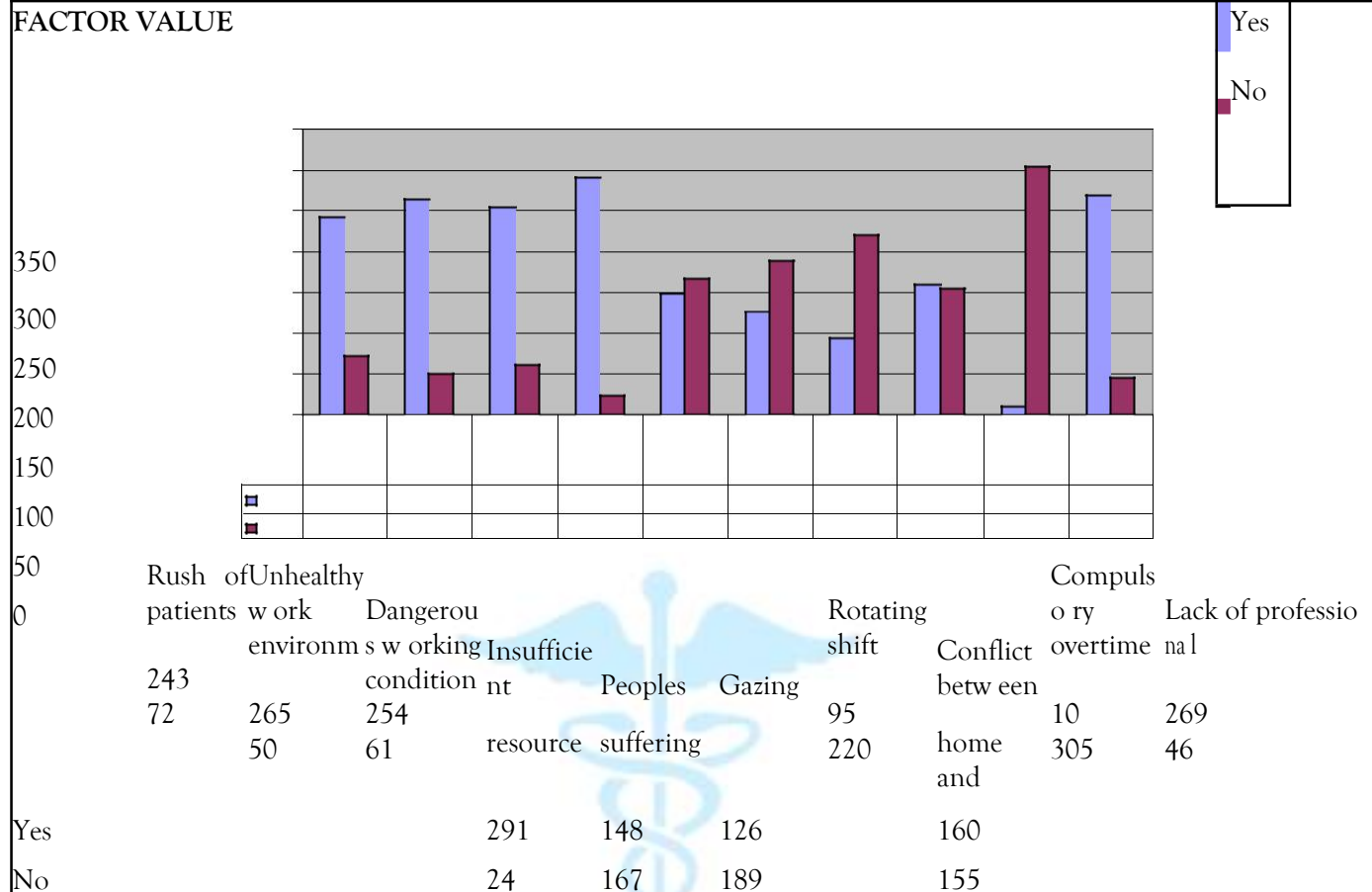
The section pertains to digging out the effect of job stress on the job performance of the respondents. In this section the researcher has examined the negative effect of various factors/ stressors on job performance of the respondents in the public sector hospitals of Lahore i.e. Mayo Hospital Lahore. So, it has been proved that job stress negatively affects job performance of the respondents.

**Table #4 Stressor's effect on performance**

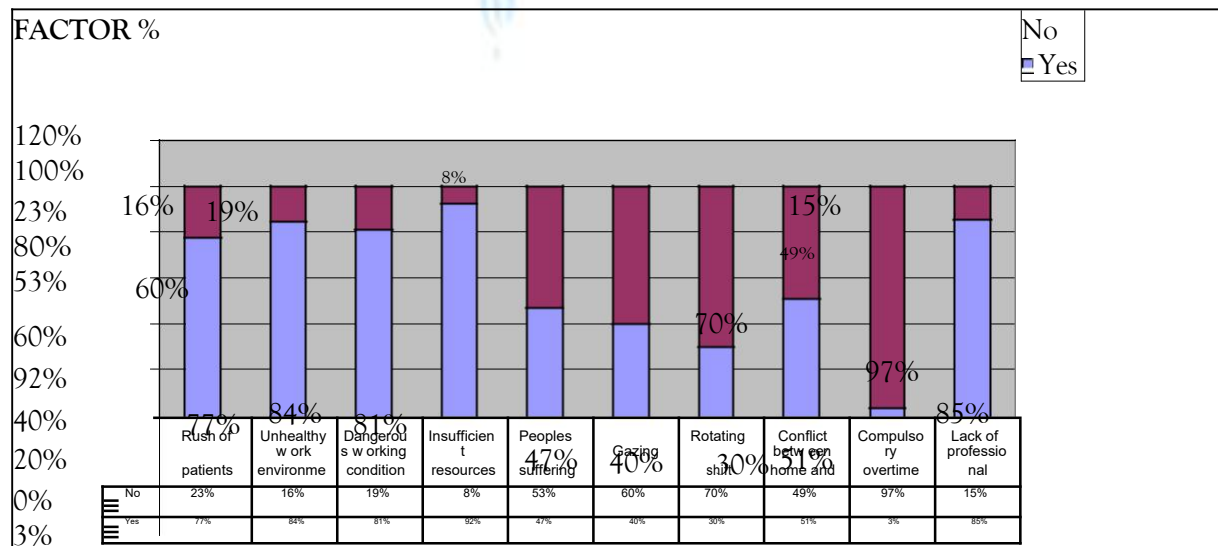
Factors	Yes	No	Total
Rush of patients	243(77.1%)	72(22.9%)	315(100%)
Unhealthy work environment	265(84.1%)	50(15.9%)	315(100%)
Dangerous working condition	254(80.6%)	61(19.4%)	315(100%)
Insufficient resources	291(92.4%)	24(7.6%)	315(100%)
Peoples suffering	148(47.0%)	167(53.0%)	315(100%)
Gazing	126(40.0%)	189(60.0%)	315(100%)
Rotating shift	95(30.2%)	220(69.8%)	315(100%)
Conflict between home and work demand	160(50.8%)	155(49.2%)	315(100%)
Compulsory overtime	107(34.0%)	208(66.0%)	315(100%)
Lack of professional respect	269(85.4%)	46(14.6%)	315(100%)



Source : Field survey



Graph vi



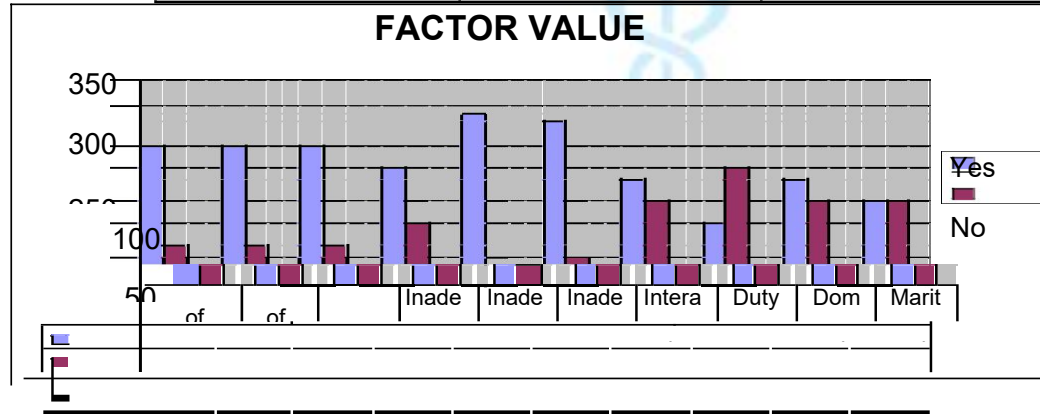
Graph vii

Out of the total 315 respondents, 77.1% (243) indicated that rush of patients in the hospital negatively affect their job performance, 84.1% (265) respondents signified that unhealthy work environment also negatively affect their performance on job. 92.4

% (291) respondents reported that insufficient resources negatively affect their performance on job. Further the details of various factors negatively affecting the respondent's job performance and their percentage is given in the above tables 4 above.

**Table# 5 Stressor's effect on performance**

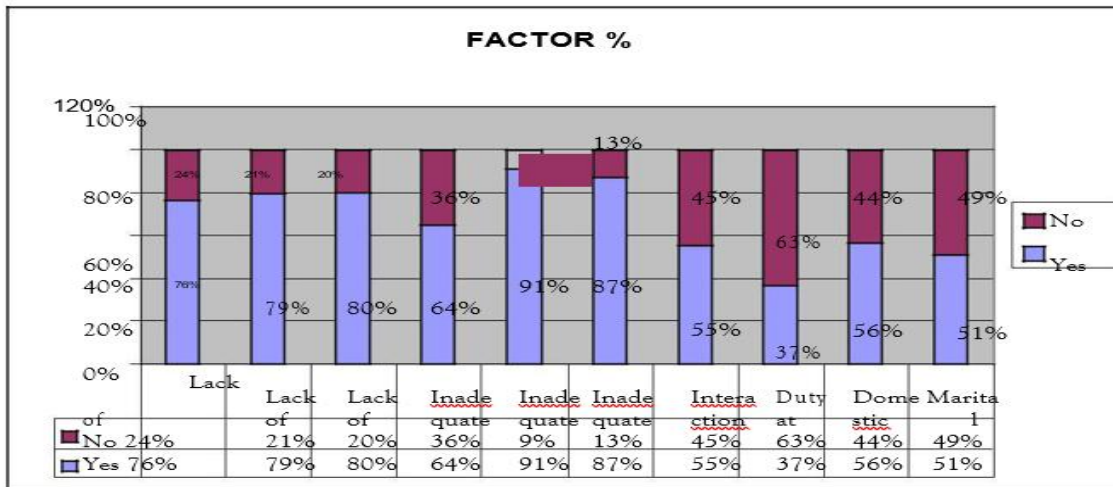
Factors	Yes	No	Total
Lack of performance feedback	240(76.2%)	75(23.8%)	315(100%)
Lack of recognition	250(79.4%)	64(20.3%)	315(100%)
Lack of promotion chances	252(80.0%)	63(20.0%)	315(100%)
Inadequate accommodation	203(64.4%)	111(35.2%)	315(100%)
Inadequate pay	286(90.8%)	29(9.2%)	315(100%)
Inadequate benefits	274(87.0%)	41(13.0%)	315(100%)
Interaction focused on poor performance	175(55.6%)	140(44.4%)	315(100%)
Duty at night	115(36.5%)	200(63.5%)	315(100%)
Domestic problems	177(56.2%)	138(43.8%)	315(100%)
Marital problems	161(51.1%)	154(48.9%)	315(100%)



Source: Field survey

Graph viii

Yes	240	250	252	203	286	274	174	115	177	161
No	75	65	63	112	29	41	141	200	138	154



Graph ix

Out of the total 315 respondents ,79.4% (250) indicated that lack of performance feedback in the hospital negatively affect their job performance, 80.0% (252) respondents signified that lack of promotion chances also negatively affect their performance on job. 90.8% (286) respondents reported that inadequate pay negatively affects their performance on job. Further the details of various factors negatively affecting the respondents job performance and their percentage of Yes and No is given in the above tables 5.

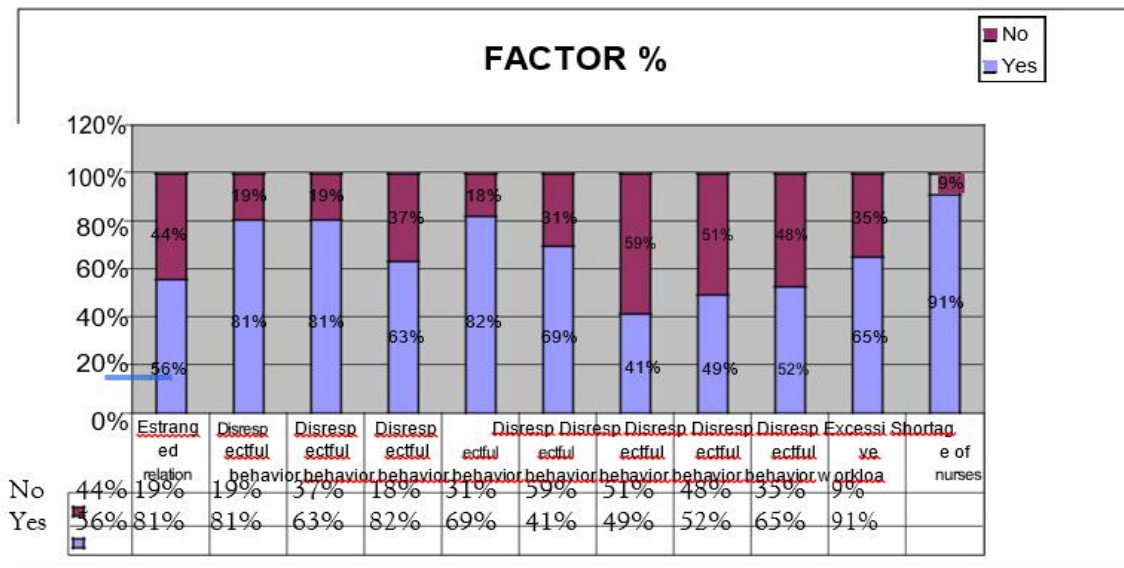
Table# 6 Stressor's effect on performance

Factors	Yes	No	Total
Estranged relation	176(55.9%)	139(41.1%)	315(100%)
Disrespectful behavior of doctors	225(71.4%)	90(28.6%)	315(100%)
Disrespectful behavior of patients	254(80.6%)	61(19.4%)	315(100%)
Disrespectful behavior of head nurse	198(62.9%)	117(37.1%)	315(100%)
Disrespectful behavior of patients attendant	259(82.2%)	56(17.8%)	315(100%)
Disrespectful behavior of visitors	218(69.2%)	97(30.8%)	315(100%)
Disrespectful behavior of in laws	130(41.3%)	185(58.7%)	315(100%)
Disrespectful behavior of relatives	155(49.2%)	160(50.8%)	315(100%)
Disrespectful behavior of hostel warden	165(52.4%)	150(47.6%)	315(100%)
Excessive workload	305(96.8%)	10(3.2%)	315(100%)
Shortage of nurses	287(91.1%)	28(8.9%)	315(100%)

Source: Field survey



70 Graph x



Graph xi

Out of total 315 respondents, 80.6% reported that disrespectful behavior of patients negatively affects their performance on job. 82.2% respondents indicated disrespectful behavior of patient's attendants affects negatively their performance. Excessive work load (96.8%) and shortage of nurses (91.1%) in the hospitals are major stressors affecting job performance negatively. Further, details of factors are given in the above table 6.

### 4.3 EFFECT OF JOB STRESS ON JOB SATISFACTION

*H3 Job Stress negatively affects job satisfaction.*

This section relates to various factors causing job stress and its negative effect on the job satisfaction of the respondents. The researcher has tried here to work out how job satisfaction is affected by prevailing job stress in the hospital setting. The researcher has proved that job stress in the hospital negatively affect job satisfaction of respondents.

71 Table# 7 stress and job satisfaction

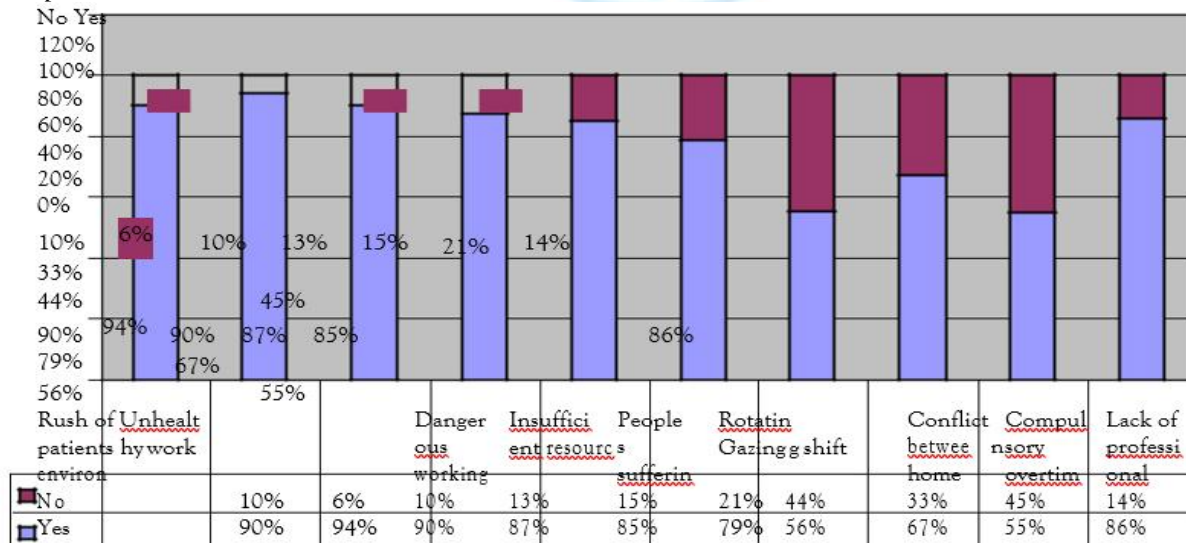
Factors	Yes	No	Total
Rush of patients	285(90.5%)	30(9.5%)	315(100%)
Unhealthy work environment	297(94.3%)	18(5.7%)	315(100%)
Dangerous working condition	284(90.2%)	31(9.8%)	315(100%)
Insufficient resources	275(87.3%)	40(12.7%)	315(100%)
Peoples suffering	268(85.1%)	46(14.6%)	315(100%)
Gazing	249(79.0%)	66(21.0%)	315(100%)
Rotating shift	175(55.6%)	140(44.4%)	315(100%)
Conflict between home and work	212(67.3%)	103(32.7%)	315(100%)

demand			
Compulsory overtime	172(54.6%)	143(45.4%)	315(100%)
Lack of professional respect	270(85.7%)	45(14.3%)	315(100%)

Source: Field survey



Graph xii



#### FACTOR %

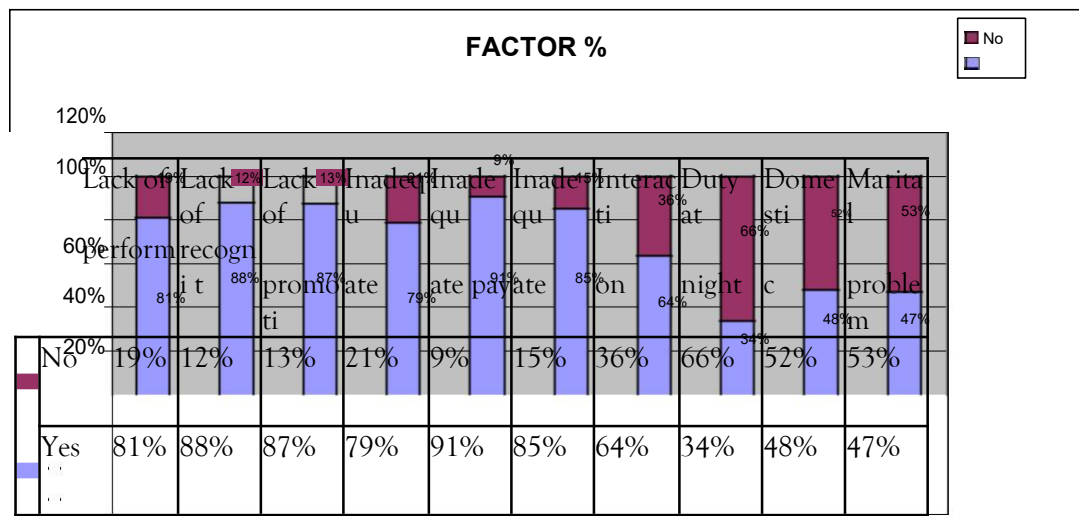
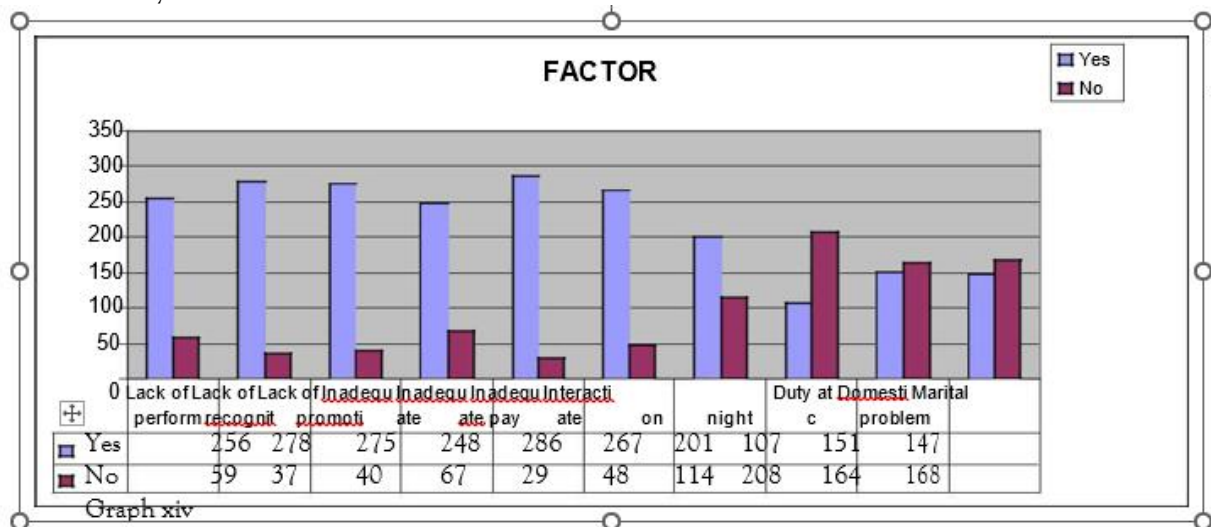
Out of the total 315 respondents, 90.5% (285) have expressed their agreement with the contention that rushes of patients affect their job satisfaction and it results in the decline of job satisfaction. The respondents also reported that unhealthy work environment (94.3%) and insufficient resources (87.3%) negatively affect their job satisfaction. Other factors and their negative affect on job satisfaction of the respondents are given in detail in the above given table 7.

Table #8 stress and job satisfaction

Factors	Yes	No	Total
---------	-----	----	-------

Lack of performance feedback	256(81.3%)	59(18.7%)	315(100%)
Lack of recognition	278(88.3%)	37(11.7%)	315(100%)
Lack of promotion chances	275(87.3%)	40(12.7%)	315(100%)
Inadequate accommodation	248(78.7%)	67(21.3%)	315(100%)
Inadequate pay	286(90.8%)	29(9.2%)	315(100%)
Inadequate benefits	267(84.8%)	48(15.2%)	315(100%)
Interaction focused on poor performance	201(63.8%)	114(36.2%)	315(100%)
Duty at night	107(34.0%)	208(66.0%)	315(100%)
Domestic problems	151(47.9%)	164(52.1%)	315(100%)
Marital problems	147(46.7%)	168(53.3%)	315(100%)

Source: Field survey





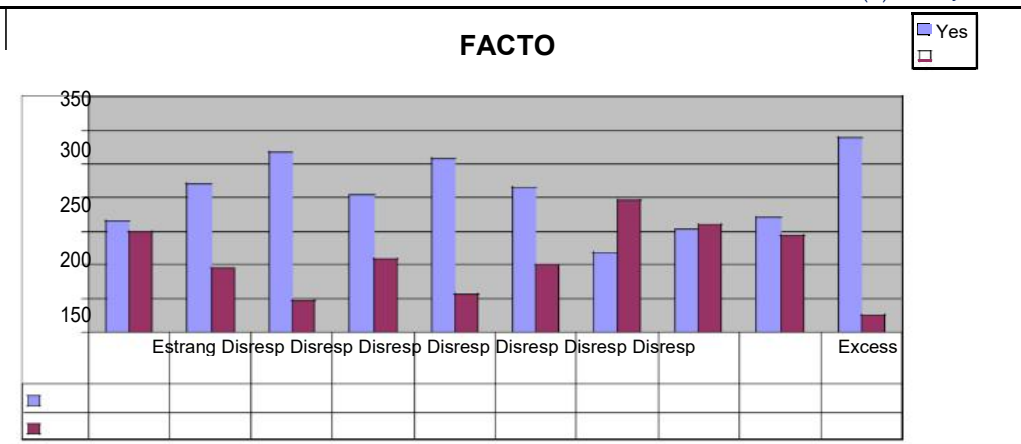
Out of the total 315, 81.3% respondents have expressed their agreement with the contention that lack of performance feedback negatively affect their job satisfaction and it results in the decline of job satisfaction. The respondents also reported that lack of appreciation (88.3%), insufficient benefits (84.8%) and insufficient pay (90.8%) negatively affect their job satisfaction. Other factors and their negative affect on job satisfaction of the respondents are given in detail in the above given table 8.

74 Table# 9 stress and job satisfaction

Factors	Yes	No	Total
Estranged relation	166(52.7%)	149(47.3%)	315(100%)
Disrespectful behavior of doctors	221(70.2%)	94(29.8%)	315(100%)
Disrespectful behavior of patients	268(85.1%)	47(14.9%)	315(100%)
Disrespectful behavior of head nurse	205(65.1%)	110(34.9%)	315(100%)
Disrespectful behavior of patients attendant	259(82.2%)	56(17.8%)	315(100%)
Disrespectful behavior of visitors	215(68.3%)	10(31.7%)	315(100%)
Disrespectful behavior of in laws	119(37.8%)	196(62.2%)	315(100%)
Disrespectful behavior of relatives	154(48.9%)	161(51.1%)	315(100%)
Disrespectful behavior of hostel warden	171(54.3%)	144(45.7%)	315(100%)
Excessive workload	289(91.7%)	26(8.3%)	315(100%)
Shortage of nurses	267(84.8%)	48(15.2%)	315(100%)

Source: Field survey

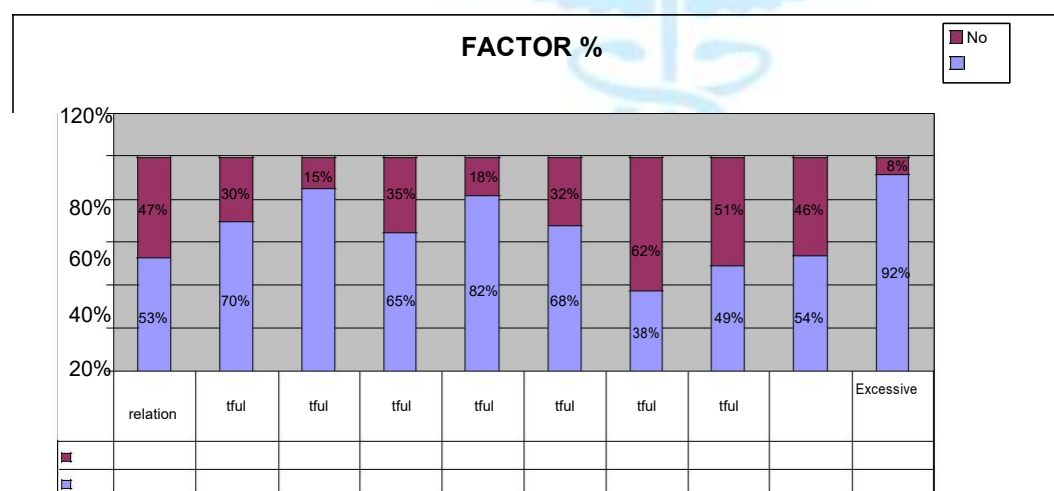
	ed	ectful	ectful	ectful	ectful	ectful	ectful	ectful	ectful	ve
Yes	166	221	268	205	259	215	119	154	171	289
No	149	94	47	110	56	100	196	161	144	26



Graph xvi

75

	behavior	behavi	behavi	behavi	behavi	behavi	behavi	behavi	behavior	
		or	or	or	or	or	or	or	r	
No	47%	30%	15%	35%	18%	32%	62%	51%	46%	8%
Yes	53%	70%	85%	65%	82%	68%	38%	49%	54%	92%



Graph xvii

Out of the total 315, 85.1% respondents have expressed their agreement with the contention that disrespectful behavior of patients negatively affects their job satisfaction and it results in the decline of job satisfaction. The respondents also reported that excessive workload (91.7%) and shortage of nurses (84.8%) negatively affect their job satisfaction. Other factors and their negative affect on job satisfaction of the respondents are given in detail in the above given table 9.

#### 4.4 DEMOGRAPHY

Here the researcher provided information on demography of the respondents that is Age distribution, Experience, marital status, service cadres, family status and rural or urban background. To collect primary data a total 500 questionnaires were distributed amongst the respondents (female nurses). Out of this number, 364 questionnaires

were collected, of which 49 questionnaires were rejected and declared invalid, 315 questionnaires were selected for analysis

**Table#10 Age: Distribution**

	Frequency	Percent	Valid Percent	Cumulative Percent
Valid 15-20	37	11.7	11.7	11.7
21-25	28	8.9	8.9	20.6
26-30	54	17.1	17.1	37.8
31-35	37	11.7	11.7	49.5
36-40	30	9.5	9.5	59.0
41-45	37	11.7	11.7	70.8
46-50	43	13.7	13.7	84.4
51-55	32	10.2	10.2	94.6
56-60	17	5.4	5.4	100.0
Total	315	100.0	100.0	

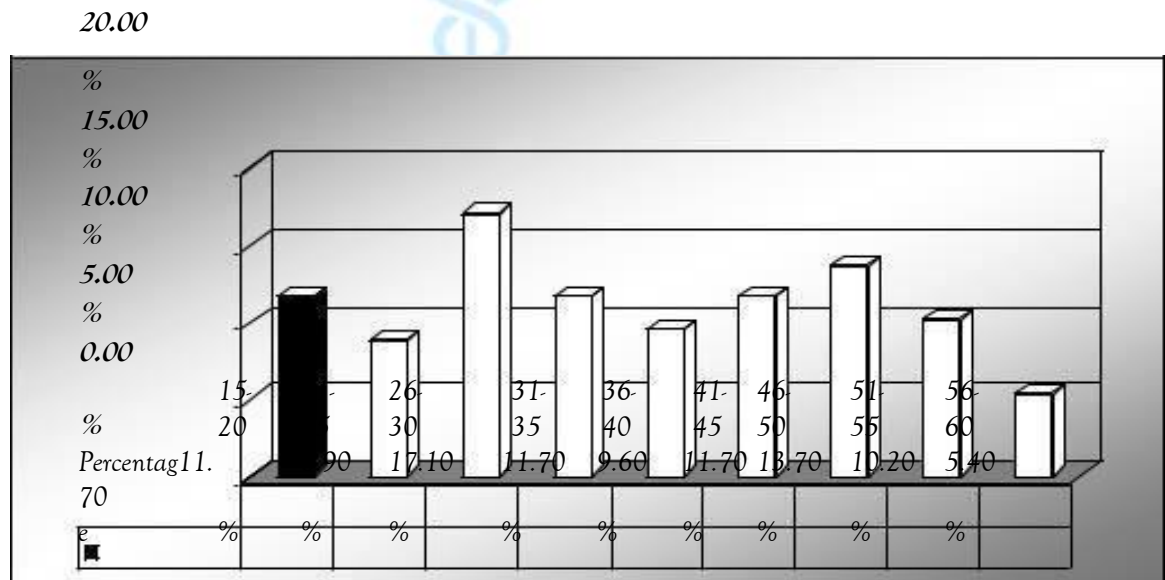
source: field survey

#### 4.4.1)

#### GE DISTRIBUTION:

Table 10 pertains to age distribution of respondents, commencing from age groups 15-20 years, 21-25 years..... up to 56-60 years. Out of total 315 questionnaires, the first age group frequency is 37(11.7%) and the last group is 17(5.4%). Details are in table 10 above.

**Age Distribution**



Graph xviii

**Table#11: Service length**

Experience in year	Frequency	Percent	Valid Percent	Cumulative Percent
Valid 1-5	67	21.3	21.3	21.3



6-10	67	21.3	21.3	42.5
11-15	41	13.0	13.0	55.6
16-20	80	25.4	25.4	81.0
21-25	34	10.8	10.8	91.7
26-30	16	5.1	5.1	96.8
31 and above	10	3.2	3.2	100.0
Total	315	100.0	100.0	

source: field survey

#### 4.4.2) EXPERIENCE/SERVICE LENGTH:

The service length (experience of nurses) is given in table 11. The experience (service length) ranges from 1-5 years, 6-10 years..... up to 31 years and above. The percentage of 1st group having experience of (1-5) years is 21.3% (67) and of last



group (31 years and above) is 3.2% (10). Details are in table 11.



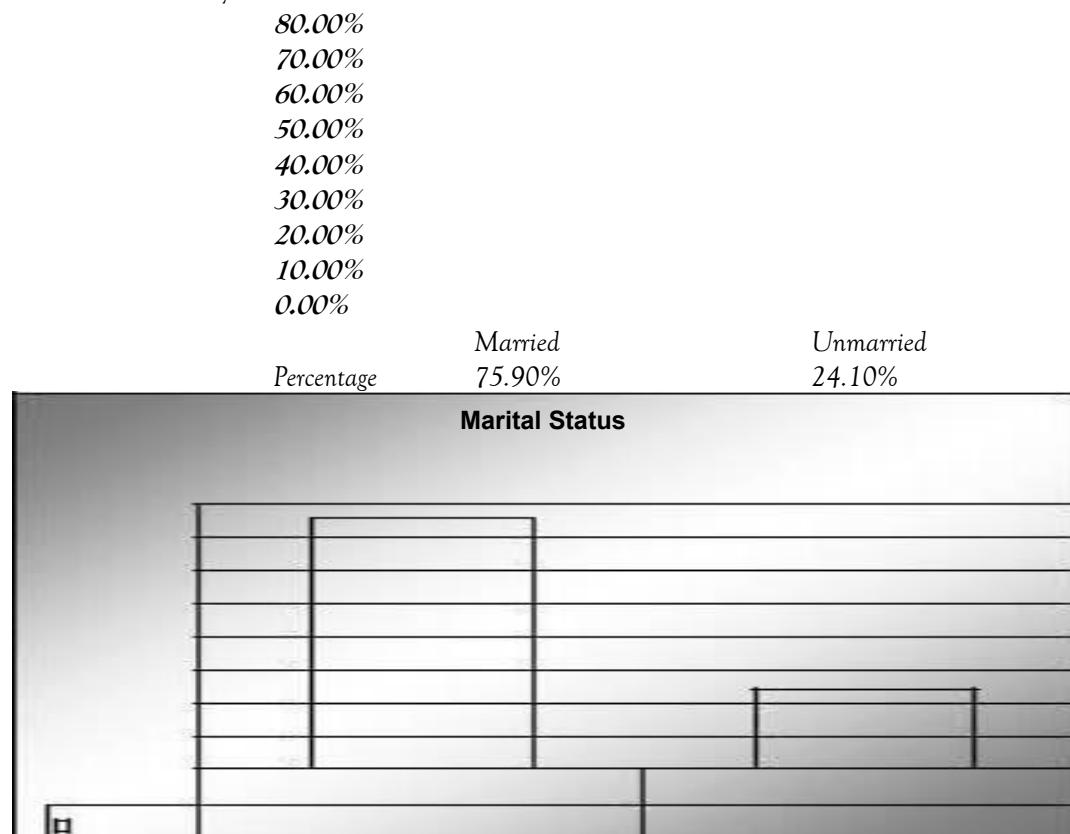
Graph xix

Table#12: Marital Status

	Frequency	Percent	Valid Percent	Cumulative Percent
Valid Married	239	75.9	75.9	75.9
Un-married	76	24.1	24.1	100.0

Total	315	100.0	100.0	
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source: field survey



Graph xx

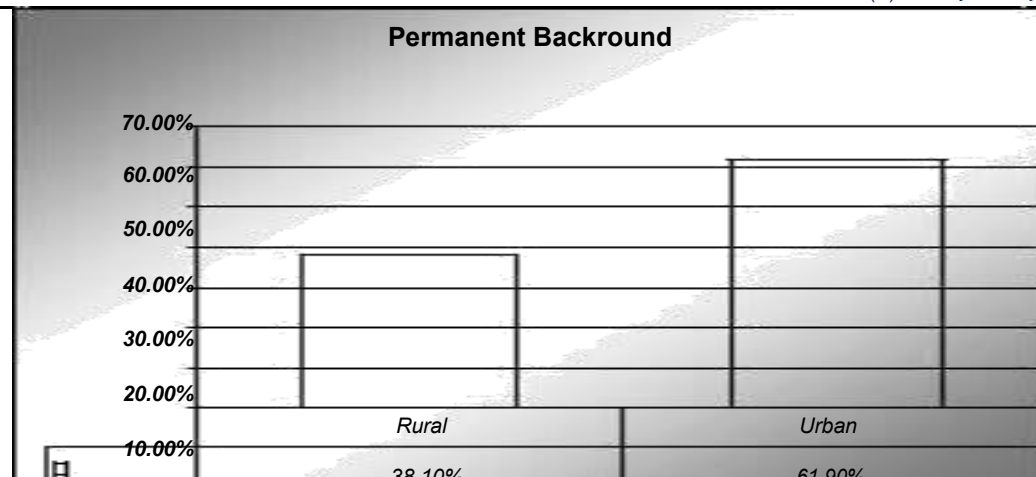
#### 4.4.3) MARITAL STATUS AND BACKGROUND:

According to data collected from the respondents in the hospitals, overwhelming majority of respondents (female nurses) are married that is 75.9 % (239) and unmarried are 24.1% (76).

Table#13: Permanent Background

	Frequency	Percent	Valid Percent	Cumulative Percent
Valid Rural	120	38.1	38.1	38.1
Urban	195	61.9	61.9	100.0
Total	315	100.0	100.0	

source: field survey



Graph xxi

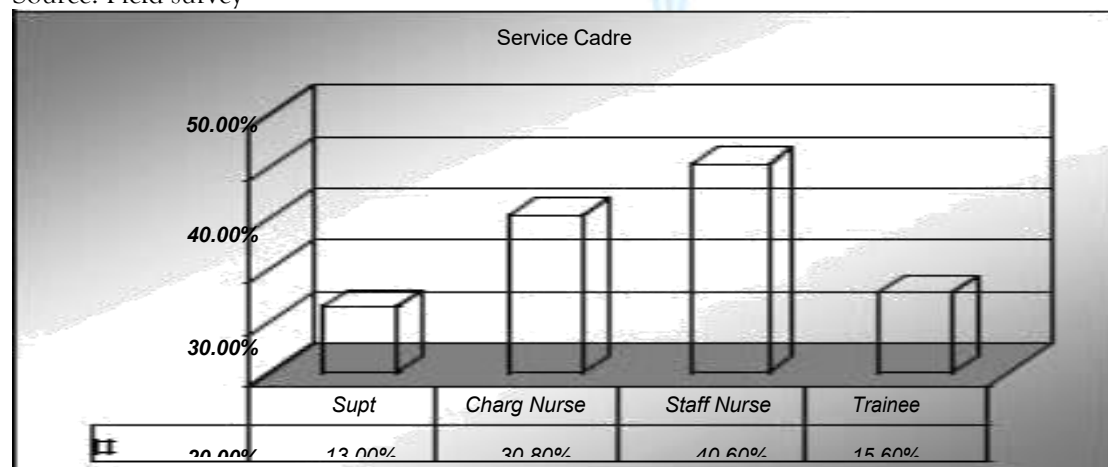
The rural percentage of respondents is 38.1% (120) and urban is 61.9 (195). It reveals that majority of nurses are from urban background.

**NOTE:** It seems families from rural background do not allow their (female) off springs to join profession of nursing. (Social stigma attached with this profession in our pakhtoon society).

Table#14: Service cadre

	Frequency	Percent	Valid Percent	Cumulative Percent
Valid Supdt	41	13.0	13.0	13.0
Charge Nurse	97	30.8	30.8	43.8
Staff Nurse	128	40.6	40.6	84.4
Trainee	49	15.6	15.6	100.0
Total	315	100.0	100.0	

Source: Field survey



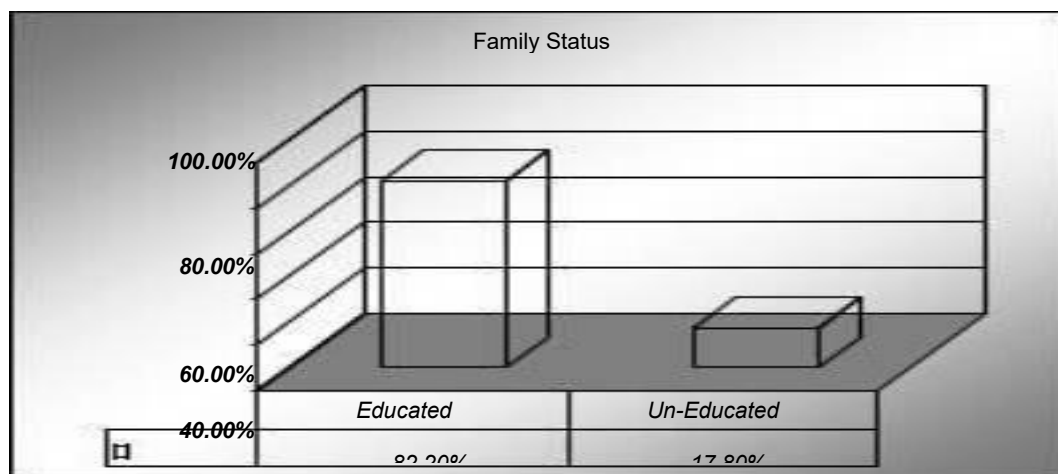
Graph xxii

Table#15  
Family Status



	Frequency	Percent	Valid Percent	Cumulative Percent
Valid Educated	259	82.2	82.2	82.2
Un-educated	56	17.8	17.8	100.0
Total	315	100.0	100.0	

Source: Field survey



Graph xxiii

**4.4.4) SERVICE CADRE AND FAMILY STATUS:**

Table 14 signifies the percentage (frequency) of various service cadres that is, Superintendent nurse 13.0% (41), charge nurse 30.8% (97), staff nurse 40.6%(128), trainee 15.6% (49). Overwhelming majority of nurses are from educated families

82.2% (259) and uneducated respondents are 17.8%(56), as evident in table 15. **NOTE;** It seems that families from uneducated background do not want their offspring's to join the profession of nursing. The nursing profession carries no or little respect in rural circles. The cultural trends in educated circles clearly show that nursing profession is respected and educated families do allow their young members to join it.

**4.12 EFFECT OF STRESS ON JOB SATISFACTION**

This Section relates to working out the negative effect of various stressors, on job satisfaction of the respondents. The researcher has endeavored to determine how job satisfaction of respondents is affected.

Detailed description of the various tables is provided below.

**Table #16 job satisfaction and age distribution**

Unhealthy work environment	Age									Total
	15-20	21-25	26-30	31-35	36-40	41-45	46-50	51-55	56-60	
Yes	37	26		50	36	30	36	36	31	297



		12.5%	8.8%		16.8%	12.1%	10.1%	12.1%	12.1%	10.4%	5.1%	100.0%
	No		2		4	1		1	7	1	2	18
			11.1%		22.2%				38.9%	11.1%		
			28		5.6%			5.6%	43	5.6%	1%	100.0%
Total		37		54	37		30	37	13.7%	32	17	315
			8.9%		11.7%					10.2%	5.4%	
		11.7%		17.1%			9.5%	11.7%				100.0%

#### 4.12.1 Unhealthy work environment:

The statistics in the table 83 show that out of total 297 respondents, 16.8% falling in the age group 31-35 years and 5.1% of the age group 56-60 years have reported that unhealthy work environment negatively affect their job satisfaction. Chi-Square results (Chi-Square = 16.161, P value = 0.040) indicate significant co relation between above discussed factors/variable and various age groups.

**Table#17 job satisfaction and age distribution**

	Age									Total
Working conditions	15-20	21-25	26-30	31-35	36-40	41-45	46-50	51-55	56-60	
Yes	34	25	47	36	29	32	33	32	16	284
	12.0%	8.8%	16.5%	12.7%	10.2%	11.3%	11.6%	11.3%	5.6%	100.0%
No	3	3	7	1	1	5	10		1	31
	9.7%	9.7%	22.6%	3.2%	3.2%	16.1%	32.3%		3.2%	100.0%
Total	37	28	54	37	30	37	43	32	17	315
	11.7%	8.9%	17.1%	11.7%	9.5%	11.7%	13.7%	10.2%	5.4%	100.0%

Source: Field survey

#### 4.12.2 DANGEROUS WORKING CONDITIONS:

The statistics in the table 84 shows that 16.5% falling in the age group 26-30 years and 5.6% of the age group 56-60 years has reported that dangerous working conditions negatively affect their job satisfaction. Chi-Square results (Chi-Square = 17.376, P value = 0.026) indicates significant co relation between above discussed factors/variable and various age groups.

**Table#18 job satisfaction and age distribution**

	Age									Total
Rotating shift	15-20	21-25	26-30	31-35	36-40	41-45	46-50	51-55	56-60	
Yes	23	21	39	18	22	19	13	15	5	175
	13.1%	12.0%	22.3%	10.3%	12.6%	10.9%	7.4%	8.6%	2.9%	100.0%
No	14	7	15	19	8	18	30	17	12	140
	10.0%	5.0%	10.7%	13.6%	5.7%	12.9%	21.4%	12.1%	8.6%	100.0%
Total	37	28	54	37	30	37	43	32	17	315
	11.7%	8.9%	17.1%	11.7%	9.5%	11.7%	13.7%	10.2%	5.4%	100.0%

source: Field survey

#### 4.12.3 ROTATING SHIFT:

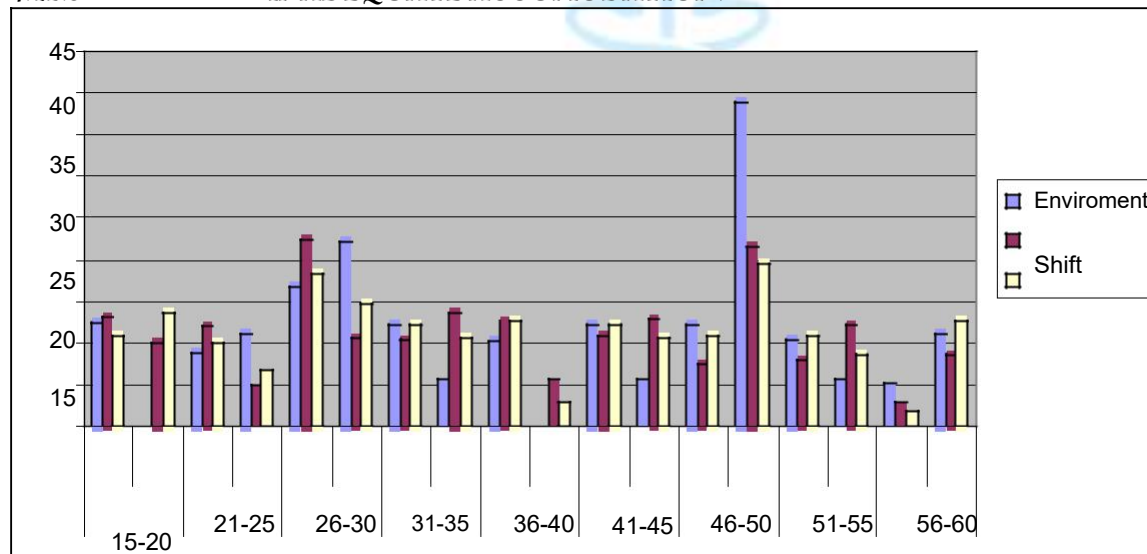
The statistics in the table 85 shows that 22.3% of respondents falling in the age group 26-30 years and 7.4% respondents of the age group 46-50 years have reported that rotating shift negatively affect their job satisfaction. Chi-Square results (Chi-Square = 32.686, P value = 0.0001) indicates highly significant co relation between above discussed factor/variable and various age groups.

#### 4.12.4 CONFLICTING DEMAND:

The statistics in the table 86 show that 18.49% respondents falling in the age group 26-30 years and 1.9% respondents of the age group 56-60 years have reported that conflicting demand negatively affect their job satisfaction. Chi-Square results (Chi- Square = 27.946, P value = 0.0001) indicate highly significant co relation between above discussed factor/variable and various age groups.

Graph xxxiii

#### 4.12.5 INADEQUATE ACCOMODATION:



The statistics in the table 87 show that 17.7% respondents falling in the age group 26- 30 years and 7.7% respondents of the age group 36-40 years have reported that inadequate accommodation negatively affect their job satisfaction. Chi-Square results (Chi-Square = 25.58, P value = 0.0001) indicate highly significant co relation between above discussed factor/variable and various age groups.

Table#19 job satisfaction and age distribution

	Age									Total
Pay	15-20	21-25	26-30	31-35	36-40	41-45	46-50	51-55	56-60	
Yes	36	25	49	35	30	27	37	30	17	286



		12.6 %	8.7%	17.1%	12.2%	10.5%	9.4%	12.9%	10.5%	5.9%	100.0%
No	1	3.4%	10.3%	17.2%	6.9%		10	6	2		29
Total	37	11.7 %	8.9%	17.1%	11.7%	30	37	43	32	17	315

Source: Field survey

#### 4.12.6 INADEQUATE PAY:

The statistics in the table 88 shows that 17.1% respondents falling in the age group 26-30 years and 8.7% respondents of the age group 21-25 years have reported that inadequate pay negatively affects their job satisfaction. Chi-Square results (Chi-Square = 22.905, P value = 0.003) indicates highly significant co relation between above discussed factor/variable and various age groups.

Table#20 job satisfaction and service length

		Service length							Total
		1-5	6-10	11-15	16-20	21-25	26-30	31 and above	
Working environment	Yes	66	64	39	73	33	12	10	297
		22.2 %		13.1 %	24.6%	11.1%	4.0%	3.4%	100.0%
No		1	3	2	7	1	4		18
		5.6 %	16.7%	11.1 %	38.9%	5.6%	22.2%		100.0%
Total		67	67	41	80	34	16	10	315
		21.3 %	21.3%	13.0 %	25.4%	10.8%	5.1%	3.2%	100.0%

Source: Field survey

#### 4.12.7 UNPLEASANT AND UNHEALTHY WORKING ENVIROMENT:

The statistics in the table show that 22.2% respondents falling in the experience group 1-5 years and 3.4% respondents of the experience group 31 and above years have reported that unpleasant and unhealthy work environment negatively affect their job satisfaction. Chi-Square results (Chi-Square = 15.965, P value = 0.014) indicate highly significant co relation between above discussed factor/variable and various experience groups.

#### 4.12.8 ROTATING SHIFT:

The statistics in the table show that 26.4% respondents falling in the experience group 1-5 years and 1.7% respondents of the experience group 31 and above years have reported that rotating shift negatively affect their job satisfaction. Chi-Square results (Chi-Square = 21.634, P value = 0.001) indicate significant co relation between above discussed factor/variable and various age groups.





**Table#21** job satisfaction and service length

	Service length							Total
Conflicting demands	1-5	6-10	11-15	16-20	21-25	26-30	31 and above	
Yes	45 21.2%	49 23.1%	31 14.6%	57 26.9%	19 9.0%	8 3.8%	3 1.4%	212 100.0%
No	22 21.4%	18 17.5%	10 9.7%	23 22.3%	15 14.6%	8 7.8%	7 6.8%	103 100.0%
Total	67 21.3%	67 21.3%	41 13.0%	80 25.4%	34 10.8%	16 5.1%	10 3.2%	315 100.0%

Source; Field survey

#### 4.12.9 CONFLICTING DEMANDS:

The statistics in the table show that 21.2% respondents falling in the experience group 1-5 years and 1.4% respondents of the experience group 31 and above years have reported that conflicting demands negatively affect their job satisfaction. Chi-Square results (Chi-Square = 13.403, P value = 0.037) indicate highly significant co relation between above discussed factor/variable and various age groups.

**Table#22** job satisfaction and service length

	Service length							Total
overtimes	1-5	6-10	11-15	16-20	21-25	26-30	31 and above	
Yes	36 20.9%	45 26.2%	28 16.3%	31 18.0%	23 13.4%	6 3.5%	3 1.7%	172 100.0%
No	31 21.7%	22 15.4%	13 9.1%	49 34.3%	11 7.7%	10 7.0%	7 4.9%	143 100.0%
Total	67 21.3%	67 21.3%	41 13.0%	80 25.4%	34 10.8%	16 5.1%	10 3.2%	315 100.0%

#### 4.12.10 COMPULSORY OVERTIME:

The statistics in the table show that 20.9% respondents falling in the experience group 1- 5 years and 1.7% respondents of the experience group 31 and above years have reported that compulsory overtime negatively affect their job satisfaction. Chi-Square results (Chi-Square = 22.160, P value = 0.001) indicate highly significant co relation

between above discussed factor/variable and various age groups.

**Table#23** job satisfaction and service length

	Service length							Total
Prof. respect	1-5	6-10	11-15	16-20	21-25	26-30	31 and above	
Yes	62 23.0%	55 20.4%	32 11.9%	68 25.2%	32 11.9%	11 4.1%	10 3.7%	270 100.0%
No	5 11.1%	12 26.7%	9 20.0%	12 26.7%	2 4.4%	5 11.1%		45 100.0%

Total	%	67	41	80	34	16	10	315
	21.3	21.3%	13.0%	25.4%	10.8%	5.1%	3.2%	100.0%
	%							

#### 4.12.11 LACK OF PROFESSIONAL RESPECT:

The statistics in the table show that 23.0% respondents falling in the age group 1-5 years and 3.7% respondents of the age group 31 and above years have reported that lack of professional respect negatively affects their job satisfaction. Chi-Square results (Chi-Square = 12.655, P value = 0.049) indicate highly significant co relation between above discussed factor/variable and various age groups.

Table #24		1-5	6-10	11-15	16-20	21-25	26-30	31 above	and	
job	Yes	60	64	32	66	31	12	10		275
satisfac		21.								
tion		8%	23.3%	11.6%	24.0%	11.3%	4.4%	3.6%		100.0%
and	No	7	3	9	14	3	4			40
service		17.								
length		5%	7.5%	22.5%	35.0%	7.5%	10.0%			100.0%
Total		67	67	41	80	34	16	10		315
		21.3%	21.3%	13.0%	25.4%	10.8%	5.1%	3.2%		100.0%

#### 4.12.12 LACK OF PROMOTION CHANCES:

The statistics in the table show that 21.8% respondents falling in the age group 1-5 years and 3.6% respondents of the age group 31 and above years have reported that lack of promotion chances negatively affect their job satisfaction. Chi-Square results (Chi-Square = 13.320, P value = 0.038) indicate highly significant co relation between above discussed factor/variable and various age groups.

Table#25 job satisfaction and service length

	Service length							Total
Interaction	1-5	6-10	11-15	16-20	21-25	26-30	31 and above	
Yes	47	39	27	57	20	4	7	201
	23.4 %	19.4%	13.4%	28.4%	10.0%	2.0%	3.5%	100.0%
No	20	28	14	23	14	12	3	114
	17.5 %	24.6%	12.3%	20.2%	12.3%	10.5%	2.6%	100.0%
Total	67	67	41	80	34	16	10	315
	21.3 %	21.3%	13.0%	25.4%	10.8%	5.1%	3.2%	100.0%

Source: Field survey

#### 4.12.13 INTERACTION FOCUSED ON POOR PERFORMANCE:

The statistics in the table show that 23.4% respondents falling in the experience group 1-5 years and 3.5% respondents of the experience group 31 and above years have reported that interaction focused on poor performance only negatively affect their job satisfaction. Chi-Square results (Chi-Square = 15.036, P value = 0.020) indicate significant co relation between above discussed factor/variable and various age groups.

Table#26 job satisfaction and service length

Duty at night	Service length	Total
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			1-5	6-10	11-15	16-20	21-25	26-30	31 above	and	1-5
Total	Yes	21	24	27	11	22	8	12	3		107
			22.4%	25.2%	10.3%	20.6%	7.5%	11.2%	2.8%		100.0%
	No		43	40	30	58	26	4	7		208
			20.7%	19.2%	14.4%	27.9%	12.5%	1.9%	3.4%		100.0%
			67	67	41	80	34	16	10		315
			3.3%	21.3%	13.0%	25.4%	10.8%	5.1%	3.2%		100.0%

#### 4.12.14 DUTY AT NIGHT:

The statistics in the table show that 22.4% respondents falling in the age group 1-5 years and 2.8% respondents of the age group 31 and above years have reported that duty at night negatively affect their job satisfaction. Chi-Square results (Chi-Square = 17.455, P value = 0.008) indicate significant co relation between above discussed factor/variable and various age groups.

#### 4.12.15 DOMESTIC PROBLEM:

The statistics in the table show that 13.9% respondents falling in the experience group 1-5 years and 2.6% respondents of the experience group 31 and above years have reported that domestic problems negatively affect their job satisfaction. Chi-Square results (Chi-Square = 20.485, P value = 0.002) indicate significant co relation between above discussed factor/variable and various age groups.

**Table#27 job satisfaction and service length**

Estranged relation			Service length							
			1-5	6-10	11-15	16-20	21-25	26-30	31 and ab	
Total	Yes	Count	25	36	25	52	15	9	4	
		% within Count	15.1%	21.7%	15.1%	31.3%	9.0%	5.4%	2.4%	
	No	Count	42	31	16	28	19	7	6	
		% within Count	28.2%	20.8%	10.7%	18.8%	12.8%	4.7%	4.0%	
			Count	67	67	41	80	34	16	10
			% within	21.3%	21.3%	13.0%	25.4%	10.8%	5.1%	3.2%

#### 4.12.16 ESTRANGED RELATION:

The statistics in the table show that 15.1% respondents falling in the experience group 1- 5 years and 2.4% respondents of the age group 31 and above years have reported that estranged relations negatively affect their job satisfaction. Chi-Square results (Chi-Square = 14.106, P value = 0.028) indicate highly significant co relation between above discussed factor/variable and various age groups.

**Table#28 job satisfaction and service length**

Shortage of nurses		Service length						
		1-5	6-10	11-15	16-20	21-25	26-30	31 and ab
Count		58	64	27	66	31	12	9
% within		21.7%	24.0%	10.1%	24.7%	11.6%	4.5%	3.4%

Count	9	3	14	14	3	4	1
% within	18.8%	6.3%	29.2%	29.2%	6.3%	8.3%	2.1%
Count	67	67	41	80	34	16	10
% within	21.3%	21.3%	13.0%	25.4%	10.8%	5.1%	3.2%

#### 4.12.17 SHORTAGE OF NURSES:

The statistics in the table show that 21.7% respondents falling in the experience group 1-5 years and 3.4% respondents of the age group 31 and above years have reported that shortage of nurses negatively affect their job satisfaction. Chi-Square results (Chi-Square = 20.317, P value = 0.002) indicate significant co relation between above discussed factor/variable and various age groups.

#### 4.13 SERVICE CADRES

The researcher has determined the co relation between various service cadres and stressor's effect on job satisfaction. It has been proved through analysis that various service cadres and job stress negative effect on job satisfaction are co related.

##### 4.13.1 Unhealthy work environment:

The statistics in table show that out of total 297 respondents, 41.8% staff nurse and 16.5% of trainee respondents agree with the notion that Unhealthy work environment negatively affect their job satisfaction. However, the ratio of the staff nurses is higher than the ratio of trainee respondents. The Chi square results (chi square=19.090, p value= 0.0001) indicate significant co relation exist between unhealthy working environment and service cadre

Table#29 job satisfaction and service cadres

\Insufficient Resources		Service cadre				Total
		Supdt	Charge Nurse	Staff Nurse	Trainee	
Yes	Count	31	80	118	46	275
% within		11.3%	29.1%	42.9%	16.7%	100.0%
No	Count	10	17	10	3	40
% within		25.0%	42.5%	25.0%	7.5%	100.0%
Total	Count	41	97	128	49	315
% within		13.0%	30.8%	40.6%	15.6%	100.0%

Source: Field survey

##### 4.13.2 Insufficient resources:

The statistics in table show that out of total 275 respondents, 42.9% staff nurse and 16.7% of trainee respondents agree with the notion that insufficient resources negatively affect job their satisfaction. However, the ratio of the staff nurse is higher than the ratio of trainee respondents. The Chi square results (chi square=11.762, p value= 0.008) indicate significant co relation exist between insufficient resources and service cadre

Table#31 Insufficient resources

Gazing	Service cadre				Total
	Supdt	Charge Nurse	Staff Nurse	Trainee	

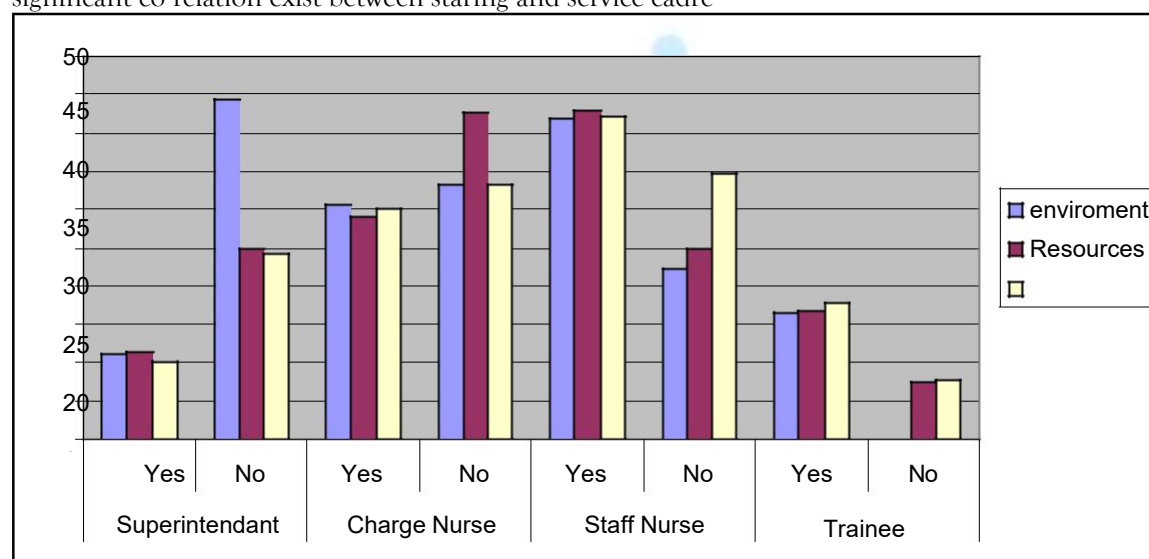


Yes	Count	25	75	105	44	249
% within		10.0%	30.1%	42.2%	17.7%	100.0%
Q36						
No	Count	16	22	23	5	66
% within		24.2%	33.3%	34.8%	7.6%	100.0%
Q36						
Total	Count	41	97	128	49	315
% within		13.0%	30.8%	40.6%	15.6%	100.0%
Q36						

Source: Field survey

#### 4.13.3 Staring/Gazing:

The statistics in table shows that out of total 249 respondents, 42.2% staff nurse and 17.7% of trainee respondents agree with the notion that staring negatively affect job satisfaction. However, the ratio of the staff nurses is higher than the ratio of trainee respondents. The Chi square results (chi square=12.366, p value= 0.006) indicate significant co relation exist between staring and service cadre



Graph xxxiv

Table#31 job satisfaction and service cadres

Rotating Shift		Service cadre				Total
		Supdt	Charge Nurse	Staff Nurse	Trainee	
Yes	Count	11	54	79	31	175
	% within	6.3%	30.9%	45.1%	17.7%	100.0%
No	Count	30	43	49	18	140
	% within	21.4%	30.7%	35.0%	12.9%	100.0%
Total	Count	41	97	128	49	315
	% within	13.0%	30.8%	40.6%	15.6%	100.0%

Source: Field survey

#### 4.13.4 Rotating shift:

The statistics in table shows that out of total 175 respondents, 45.1% staff nurse and 17.7% of trainee respondents agree with the notion that rotating shift negatively affect job satisfaction. However, the ratio of the staff nurses is higher than the ratio of trainee respondents. The Chi square results (chi square=16.852, p value= 0.001) indicate significant co relation exist between rotating shift and service cadre

**Table#32** job satisfaction and service cadres

Over Time		Service cadre				Total
		Supdt	Charge Nurse	Staff Nurse	Trainee	
Yes	Count	18	41	86	27	172
% within		10.5%	23.8%	50.0%	15.7%	100.0%
No	Count	23	56	42	22	143
% within		16.1%	39.2%	29.4%	15.4%	100.0%
Total	Count	41	97	128	49	315
% within		13.0%	30.8%	40.6%	15.6%	100.0%

Source: Field survey

#### 4.13.5 Compulsory overtime:

The statistics in table shows that out of total 172 respondents, 50.0% staff nurse and 15.7% of trainee respondents agree with the notion that compulsory overtime negatively affect job satisfaction. However, the ratio of the staff nurses is higher than the ratio of trainee respondents. The Chi square results (chi square=16.031, p value= 0.001) indicate significant co relation between compulsory overtime and service cadre

**Table#33** job satisfaction and service cadres

Lack of feedback		Service cadre				Total
		Supdt	Charge Nurse	Staff Nurse	Trainee	
Yes	Count	23	79	109	45	256
% within		9.0%	30.9%	42.6%	17.6%	100.0%
No	Count	18	18	19	4	59
% within		30.5%	30.5%	32.2%	6.8%	100.0%
Total	Count	41	97	128	49	315
% within		13.0%	30.8%	40.6%	15.6%	100.0%

Source: Field survey

#### 4.13.6 Lack of performance feedback:

The statistics in table shows that out of total 256 respondents, 42.6% staff nurse and 17.6% of trainee respondents agree with the notion that lack of performance feedback negatively affect job satisfaction. However, the ratio of the staff nurses is higher than the ratio of trainee respondents. The Chi square results (chi square=21.933, p value= 0.0) indicate significant co relation between lack of performance feedback and service cadre

**Table#34** job satisfaction and service cadres

Lack of promotion chances		Service cadre				Total
		Supdt	Charge Nurse	Staff Nurse	Trainee	
Yes	Count	32	79	120	44	275
% within		11.6%	28.7%	43.6%	16.0%	100.0%
No	Count	9	18	8	5	40
% within		22.5%	45.0%	20.0%	12.5%	100.0%
Total	Count	41	97	128	49	315
% within		13.0%	30.8%	40.6%	15.6%	100.0%

Source: Field survey

#### 4.13.7 Lack of promotion chances:

The statistics in table shows that out of total 275 respondents, 43.6% staff nurse and 16.0% of trainee respondents agree with the notion that lack of promotion chances negatively affect job satisfaction. However, the ratio of the staff nurses is higher than the ratio of trainee respondents. The Chi square results (chi square=11.245, p value= 0.010) indicate significant co relation between lack of promotion chances and service cadre.

**Table#35** *job satisfaction and service cadres*

Inadequate pay		Service cadre				Total
		Supdt	Charge Nurse	Staff Nurse	Trainee	
Yes	Count	32	86	120	48	286
% within		11.2%	30.1%	42.0%	16.8%	100.0%
No	Count	9	11	8	1	29
% within		31.0%	37.9%	27.6%	3.4%	100.0%
Total	Count	41	97	128	49	315
% within		13.0%	30.8%	40.6%	15.6%	100.0%

Source: Field survey

#### 4.13.8 Inadequate pay:

The statistics in table show that out of total 286 respondents, 42.0% staff nurse and 16.8% of trainee respondents agree with the notion that inadequate pay negatively affect job satisfaction. However, the ratio of the staff nurses is higher than the ratio of trainee respondents. The Chi square results (chi square=12.844, p value= 0.005) indicate significant co relation between inadequate pay and service cadre.

**Table#36** *job satisfaction and service cadres*

Inadequate Benefits		Service cadre				Total
		Supdt	Charge Nurse	Staff Nurse	Trainee	
Yes	Count	29	84	115	39	267
% within		10.9%	31.5%	43.1%	14.6%	100.0%
No	Count	12	13	13	10	48
% within		25.0%	27.1%	27.1%	20.8%	100.0%
Total	Count	41	97	128	49	315
% within		13.0%	30.8%	40.6%	15.6%	100.0%

Source: Field survey

#### 4.13.9 Inadequate benefits:

The statistics in table show that out of total 267 respondents, 43.1% staff nurse and 14.6% of trainee respondents agree with the notion that inadequate benefits negatively affect job satisfaction. However, the ratio of the staff nurses is higher than the ratio of trainee respondents. The Chi square results (chi square=10.075, p value= 0.018) indicate significant co relation between inadequate benefits and service cadre

**Table#37 job satisfaction and service cadres Interaction**

On poor performance only		Service cadre				Total
		Supdt	Charge Nurse	Staff Nurse	Trainee	
Yes	Count	29	60	73	39	201
% within		14.4%	29.9%	36.3%	19.4%	100.0%
No	Count	12	37	55	10	114
% within		10.5%	32.5%	48.2%	8.8%	100.0%
Total	Count	41	97	128	49	315
% within		13.0%	30.8%	40.6%	15.6%	100.0%

Source: Field survey

#### 4.13.10 Interaction focused on poor performance:

The statistics in table show that out of total 201 respondents, 36.3% staff nurse and 19.4% of trainee respondents agree with the notion that interaction focused on poor performance negatively affect job satisfaction. However, the ratio of the staff nurses is higher than the ratio of trainee respondents. The Chi square results (chi square=8.843, p value= 0.031) indicate significant co relation between interaction focused on poor performance and service cadre.

#### 4.13.11 Domestic problems:

The statistics in table show that out of total 151 respondents, 38.4% staff nurse and 9.3% of trainee respondents agree with the notion that domestic problems negatively affect job satisfaction. However, the ratio of the staff nurses is higher than the ratio of trainee respondents. The Chi square results (chi square=13.398, p value= 0.004) indicate significant co relation exist between domestic problems and service cadre.

**Table#38 job satisfaction and service cadres**

Estranged relation		Service cadre				Total
		Supdt	Charge Nurse	Staff Nurse	Trainee	
Yes	Count	19	63	66	18	166
% within		11.4%	38.0%	39.8%	10.8%	100.0%
No	Count	22	34	62	31	149
% within		14.8%	22.8%	41.6%	20.8%	100.0%
Total	Count	41	97	128	49	315
% within		13.0%	30.8%	40.6%	15.6%	100.0%

Source: Field survey

#### 4.13.12 Estranged relation:

The statistics in table show that out of total 166 respondents, 39.8% staff nurse and 10.8% of trainee respondents agree with the notion that estranged relation negatively affect job satisfaction. However, the ratio of the staff nurses is higher than the ratio of trainee respondents. The Chi square results (chi square=11.580, p value= 0.009) indicate significant co relation between estranged relation and service cadre.



**Table#39 job satisfaction and service cadres**

Head nurse behavior		Service cadre				Total
		Supdt	Charge Nurse	Staff Nurse	Trainee	
Yes	Count	16	60	91	38	205
% within		7.8%	29.3%	44.4%	18.5%	100.0%
No	Count	25	37	37	11	110
% within		22.7%	33.6%	33.6%	10.0%	100.0%
Total	Count	41	97	128	49	315
% within		13.0%	30.8%	40.6%	15.6%	100.0%

Source: Field survey

#### 4.13.13 Disrespectful behavior of head nurses:

The statistics in table show that out of total 205 respondents, 44.4% staff nurse and 18.5% of trainee respondents agree with the notion that disrespectful behavior of head nurse negatively affect job satisfaction. However, the ratio of the staff nurses is higher than the ratio of trainee respondents. The Chi square results (chi square=18.082, p value= 0.000) indicate significant co relation between disrespectful behavior of head nurse and service cadre

**Table#40 job satisfaction and service cadres**

Warden behavior		Service cadre				Total
		Supdt	Charge Nurse	Staff Nurse	Trainee	
Yes	Count	9	49	78	35	171
% within		5.3%	28.7%	45.6%	20.5%	100.0%
No	Count	32	48	50	14	144
% within		22.2%	33.3%	34.7%	9.7%	100.0%
Total	Count	41	97	128	49	315
% within		13.0%	30.8%	40.6%	15.6%	100.0%

#### 4.13.14 Disrespectful behavior of hostel warden:

The statistics in table show that out of total 171 respondents, 45.6% staff nurse and 20.5% of trainee respondents agree with the notion that disrespectful behavior of hostel warden negatively affect job satisfaction. However, the ratio of the staff nurses is higher than the ratio of trainee respondents. The Chi square results (chi square=25.914, p value= 0.000) indicate significant co relation between disrespectful behavior of hostel warden and service cadre

**Table#41 job satisfaction and service cadres**

workload		Service cadre				Total
		Supdt	Charge Nurse	Staff Nurse	Trainee	
Yes	Count	33	90	121	45	289
% within		11.4%	31.1%	41.9%	15.6%	100.0%
No	Count	8	7	7	4	26
% within		30.8%	26.9%	26.9%	15.4%	100.0%
Total	Count	41	97	128	49	315
% within		13.0%	30.8%	40.6%	15.6%	100.0%

Source: Field survey

#### 4.13.15 Excessive workload:

The statistics in table show that out of total 289 respondents, 41.9% staff nurse and 15.6% of trainee respondents agree with the notion that excessive workload negatively affect job satisfaction. However, the ratio of the staff nurses is higher than the ratio of trainee respondents. The Chi square results (chi square=8.312, p value= 0.040) indicate significant co relation between excessive workload and service cadre.

Table#42 job satisfaction and service cadres

Shortage of nurses		Service cadre				Total
		Supdt	Charge Nurse	Staff Nurse	Trainee	
Yes	Count	30	77	115	45	267
% within		11.2%	28.8%	43.1%	16.9%	100.0%
No	Count	11	20	13	4	48
% within		22.9%	41.7%	27.1%	8.3%	100.0%
Total	Count	41	97	128	49	315
% within		13.0%	30.8%	40.6%	15.6%	100.0%

Source: Field survey

#### 4.13.16 Shortage of nurses:

The statistics in table show that out of total 267 respondents, 43.1% staff nurse and 16.9% of trainee respondents agree with the notion that shortage of nurses negatively effect job satisfaction. However, the ratio of the staff nurses is higher than the ratio of trainee respondents. The Chi square results (chi square=10.897, p value= 0.012) indicate significant co relation between shortage of nurses and service cadre.

#### 4.14 MARITAL STATUS:

The researcher has determined the co relation between marital status and stressor's effect on job satisfaction. It has been proved through analysis that marital status and job stress negative effect on job satisfaction are co related.

Table#43 job satisfaction and marital status

Gazing		Marital Status		Total
		Married	Un-married	
Yes	Count	183	66	249
% within		73.5%	26.5%	100.0%
No	Count	56	10	66
% within		84.8%	15.2%	100.0%
Total	Count	239	76	315
% within		75.9%	24.1%	100.0%

Source: Field survey

#### 4.14.1 Gazing:

The statistics in the table show that out of total 249 respondents, 73.5% married respondents agree that gazing negatively affect their job satisfaction. The ratio of married respondents is higher than unmarried respondents (26.5%). The chi square (chi square=3.674, p value 0.055) results indicate highly significant co relation between gazing and marital status.

#### 4.14.2 Interaction focused of poor performance:

The statistics in the table show that out of total 175 respondents, 71.4% married respondents agree that interaction focused on poor performance only negatively affect job satisfaction. The ratio of married respondents is higher than unmarried respondents (28.6%). The chi square (chi square=4.249, p value 0.039) results indicate highly significant co relation between interaction focused on poor performance and marital status.

**Table#44** job satisfaction and marital status

Inadequate Pay		Marital Status		Total
		Married	Un- married	
Yes	Count	212	74	286
% within		74.1%	25.9%	100.0%
No	Count	27	2	29
% within		93.1%	6.9%	100.0%
Total	Count	239	76	315
% within		75.9%	24.1%	100.0%

Source: Field survey

#### 4.14.3 Inadequate pay:

The statistics in the table show that out of total 286 respondents, 74.1% married respondents agree that inadequate pay negatively affect job satisfaction. The ratio of married respondents is higher than unmarried respondents (25.9%). The chi square (chi square=5.180, p value 0.023) results indicate highly significant co relation between inadequate pay and marital status.

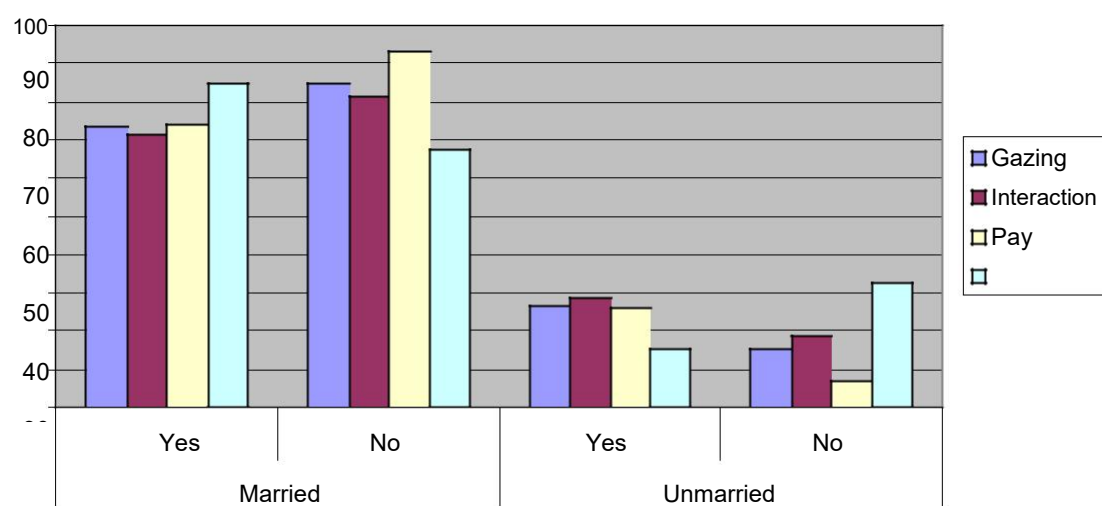
**Table#45** job satisfaction and marital status

Domestic problem		Marital Status		Total
		Married	Un-married	
Yes	Count	128	23	
% within Q319		84.8%	15.2%	10
No	Count	111	53	
% within Q319		67.7%	32.3%	10
Total	Count	239	76	
% within Q319		75.9%	24.1%	10

Source: Field survey

#### 4.14.4 Domestic problem:

The statistics in the table show that out of total 151 respondents, 84.8% married respondents agree that domestic problems negatively affect job satisfaction. The ratio of married respondents is higher than unmarried respondents (15.2%). The chi square (chi square=12.536, p value 0.0001) results indicate highly significant co relation between domestic problem and marital status.



Graph xxxv

Table#46 job satisfaction and marital status

Disrespectful behavior of head nurse		Marital Status		Total
		Married	Un-married	
Yes	Count	146	59	205
% within		71.2%	28.8%	100.0%
No	Count	93	17	110
% within		84.5%	15.5%	100.0%
Total	Count	239	76	315
% within		75.9%	24.1%	100.0%

Source: Field survey

#### 4.14.5 Disrespectful behavior Head nurses:

The statistics in the table show that out of total 205 respondents, 71.2% married respondents agree that disrespectful behavior of head nurses negatively affect job satisfaction. The ratio of married respondents is higher than unmarried respondents (28.8%). The chi square (chi square=6.945, p value 0.008) results indicate highly significant co relation between disrespectful behavior of head nurses and marital status.

Table#47 job satisfaction and marital status

Disrespectful behavior of in laws		Marital Status		Total
		Married	Un-married	
Yes	Count	98	21	119
% within		82.4%	17.6%	100.0%
No	Count	141	55	196





% within		71.9%	28.1%	100.0%
Total	Count	239	76	315
% within		75.9%	24.1%	100.0%

Source: Field survey

#### 4.14.6 Disrespectful behavior of in laws:

The statistics in the table show that out of total 119 respondents, 82.4% married respondents agree that disrespectful behavior of in laws negatively affect job satisfaction. The ratio of married respondents is higher than unmarried respondents (17.6%). The chi square (chi square=4.387, p value 0.036) results indicate highly significant co relation between disrespectful behavior of in laws and marital status.

Table#48 job satisfaction and marital status

Disrespectful behavior of relatives		Marital Status		Total
		Married	Un-married	
Yes	Count	106	48	154
% within		68.8%	31.2%	100.0%
No	Count	133	28	161
% within		82.6%	17.4%	100.0%
Total	Count	239	76	315
% within		75.9%	24.1%	100.0%

Source: Field survey

#### 4.14.7 Disrespectful behavior of relatives:

The statistics in the table show that out of total 154 respondents, 68.8% married respondents agree that disrespectful behavior of relatives negatively affect job satisfaction. The ratio of married respondents is higher than unmarried respondents (31.2%). The chi square (chi square=8.162, p value 0.004) results indicate highly significant co relation between disrespectful behavior of relatives and marital status.

#### 4.14.8 Disrespectful behavior of hostel warden:

The statistics in the table show that out of total 171 respondents, 67.8% married respondents agree that warden behavior negatively affect job satisfaction. The ratio of married respondents is higher than unmarried respondents (32.2%). The chi square (chi square=13.198, p value 0.0001) results indicate highly significant co relation between disrespectful behavior of hostel warden and marital status.

#### 4.15 Family Status;

The researcher has determined the co relation between family status and stressor's effect on job satisfaction. It has been proved through analysis that family status and job stress negative effect on job satisfaction are co related. Below part of descriptive analysis provide co-relation between family status and various variables.

Table#49 job satisfaction and family status

Performance feedback		Family Status		Total
		Educated	Un- educated	
Yes	Count	216	40	256

% within		84.4%	15.6%	100.0%
No	Count	43	16	59
% within		72.9%	27.1%	100.0%
Total	Count	259	56	315
% within		82.2%	17.8%	100.0%

Source: Field survey

#### 4.15.1 Lack of performance feedback:

The statistics in the table show that out of total 256 respondents, 84.4% respondents of educated background agree that lack of performance negatively affect job satisfaction.

The ratio of respondents of educated background is higher than of respondents of uneducated background (15.6%). The chi square (chi square=4.333, p value 0.037)

results indicate highly significant co relation between family status and lack of performance feedback.

Table#50 job satisfaction and family status

Inadequate Hostel		Family Status		Total
		Educated	Un- educated	
Yes	Count	213	35	248
% within		85.9%	14.1%	100.0%
No	Count	46	21	67
% within		68.7%	31.3%	100.0%
Total	Count	259	56	315
% within		82.2%	17.8%	100.0%

Source: Field survey

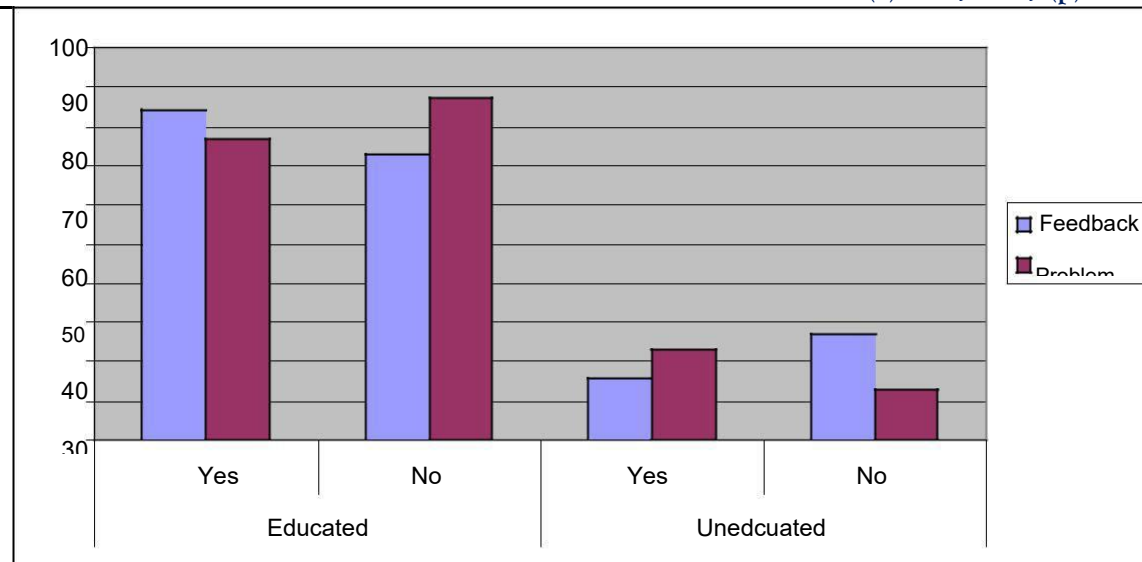
#### 4.15.2 Inadequate hostel:

The statistics in the table show that out of total 248 respondents, 85.9% respondents of educated background agree that inadequate hostel negatively affect job satisfaction. The ratio of respondents of educated background is higher than of respondents of uneducated background (14.1%). The chi square (chi square=10.714, p value 0.001) results indicate highly significant co relation between family status and inadequate hostel.

#### 4.15.3 Domestic problem:

The statistics in the table show that out of total 151 respondents, 76.8% respondents of educated background agree that domestic problem negatively affect job satisfaction.

The ratio of respondents of educated background is higher than of respondents of uneducated background (23.2%). The chi square (chi square=5.788 p value 0.016) results indicate highly significant co relation between family status and domestic problems.



#### 4.15.4 Dangerous working condition

The statistics in the table show that out of total 284 respondents, 64.8% respondents of urban background agree that dangerous working condition negatively affect their job satisfaction. The ratio of respondents of urban background is higher than of respondents of rural background (35.2%). The chi square results (chi square=10.78 p value 0.001) indicate highly significant co relation between background and the variable in question.

Table#51 job satisfaction and permanent background

Insufficient Resources		Permanent Background		Total
		Rural	Urban	
Yes	Count	99	176	275
% within		36.0%	64.0%	100.0%
No	Count	21	19	40
% within		52.5%	47.5%	100.0%
Total	Count	120	195	315
% within		38.1%	61.9%	100.0%

Source: Field survey

#### 4.15.5 INSUFFICIENT RESOURCES:

The statistics in the table show that out of total 275 respondents, 64.0% respondents of urban background agree that insufficient resources negatively affect job satisfaction. The ratio of respondents of urban background is higher than that of rural background (36.0%). The chi square (chi square=4.031 p value 0.045) results indicate highly significant co relation between background and the variable in question.

Table#52 Lack of professional respect

Lack of professional respect		Permanent Background		Total
		Rural	Urban	
Yes	Count	95	175	270
% within		35.2%	64.8%	100.0%
No	Count	25	20	45
% within		55.6%	44.4%	100.0%
Total	Count	120	195	315

% within	38.1%	61.9%	100.0%
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#### 4.15.6 Lack of professional respect:

The statistics in the table show that out of total 270 respondents, 64.8% urban respondents have expressed their agreement with the contention that lack of professional respect negatively affect their job satisfaction. The ratio of rural respondents (35.2%) is lower to that of urban respondent. Chi square results (chi square= 6.787, p value= 0.009) indicate highly significant co relation between lack of professional respect and permanent background.

**Table#53 job satisfaction and permanent background**

feedback			Permanent Background		Total
			Rural	Urban	
Yes	Count		86	170	256
	% within		33.6%	66.4%	100.0%
No	Count		34	25	59
	% within		57.6%	42.4%	100.0%
Total	Count		120	195	315
	% within		38.1%	61.9%	100.0%

Source: Field survey

#### 4.15.7 FEEDBACK:

The statistics in the table show that out of total 256 respondents, 66.4% urban respondents have expressed their agreement with the contention that lack of performance feedback negatively affect their job satisfaction. The ratio of rural respondents (33.6%) are lower to that of urban respondent. Chi square results (chi square= 11.744, p value= 0.001) indicate significant co relation between lack of performance feedback and permanent background.

**Table#54 job satisfaction and permanent background**

Lack of recognition			Permanent Background		Total
			Rural	Urban	
Yes	Count		100	178	278
	% within		36.0%	64.0%	100.0%
No	Count		20	17	37
	% within		54.1%	45.9%	100.0%
Total	Count		120	195	315
	% within		38.1%	61.9%	100.0%

Source: Field survey

#### 4.15.8 Lack of recognition for excellent work:

The statistics in the table show that out of total 278 respondents, 64.0% urban respondents have expressed their agreement with the contention that inadequate benefits negatively affect their job satisfaction. The ratio of rural respondents (36.0%) is lower to that of urban respondent. Chi square results (chi square= 4.528, p value= 0.033) indicate significant co relation between lack of recognition for excellent work and permanent background.

**Table#55 job satisfaction and permanent background**

Lack of promotion chances	Permanent Background	Total
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		Rural	Urban	
Yes	Count	97	178	275
% within		35.3%	64.7%	100.0%
No	Count	23	17	40
% within		57.5%	42.5%	100.0%
Total	Count	120	195	315
% within		38.1%	61.9%	100.0%

Source: Field survey

**4.15.9 Lack of promotion chances:**

The statistics in the table show that out of total 275 respondents, 64.7% urban respondents have expressed their agreement with the contention that lack of promotion chances negatively affect their job satisfaction. The ratio of rural respondents (35.3%) are lower to that of urban respondent. Chi square results (chi square= 7.316, p value= 0.007) indicate significant co relation between lack of promotion chances and permanent background.

**Table#56 job satisfaction and permanent background**

Inadequate pay		Permanent Background		Total
		Rural	Urban	Rural
Yes	Count	104	182	286
% within		36.4%	63.6%	100.0%
No	Count	16	13	29
% within		55.2%	44.8%	100.0%
Total	Count	120	195	315
% within		38.1%	61.9%	100.0%

Source: Field survey

**4.15.10 Inadequate pay:**

The statistics in the table show that out of total 286 respondents, 63.6% urban respondents have expressed their agreement with the contention that inadequate pay negatively affect their satisfaction on job. The ratio of rural respondents (36.4%) is lower to that of urban respondent. Chi square results (chi square= 3.950, p value= 0.047) indicate significant co relation between inadequate pay and permanent background.

**4.15.11 Inadequate benefits:**

The statistics in the table show that out of total 267 respondents, 64.8% urban respondents have expressed their agreement with the contention that inadequate benefits negatively affect their satisfaction on job. The ratio of rural respondents (35.2%) is lower to that of urban respondent. Chi square results (chi square= 6.202, p value= 0.013) indicate significant co relation between inadequate benefits and permanent background.

**Table#57 job satisfaction and permanent background**

Duty at night		Permanent Background		Total
		Rural	Urban	
Yes	Count	51	56	107
% within		47.7%	52.3%	100.0%



	No	Count	69	139	208
	% within	Count	33.2%	66.8%	100.0%
Total	% within		120	195	315
			38.1%	61.9%	100.0%

Source: Field survey

#### 4.15.12 Duty at night:

The statistics in the table show that out of total 107 respondents, 52.3% urban respondents have expressed their agreement with the contention that inadequate benefits negatively affect their satisfaction on job. The ratio of rural respondents (47.7%) is lower to that of urban respondent. Chi square results (chi square= 6.291, p value= 0.012) indicate significant co relation between duty at night and permanent background.

Table#58 satisfaction and permanent background

Domestic problems		Permanent Background		Total
		Rural	Urban	
Yes	Count	67	84	151
	% within	44.4%	55.6%	100.0%
No	Count	53	111	164
	% within	32.3%	67.7%	100.0%
Total	Count	120	195	315
	% within	38.1%	61.9%	100.0%

Source: Field survey

#### 4.15.13 Domestic problems:

The statistics in the table show that out of total 151 respondents, 55.6% urban respondents have expressed their agreement with the contention that domestic problems negatively affect their satisfaction on job. The ratio of rural respondents (44.4%) is lower to that of urban respondent. Chi square results (chi square= 4.844, p value= 0.028) indicate significant co relation between domestic problems and permanent background.

Table#59 job satisfaction and permanent background

workload		Permanent Background		Total
		Rural	Urban	
Yes	Count	99	190	289
	% within	34.3%	65.7%	100.0%
No	Count	21	5	26
	% within	80.8%	19.2%	100.0%
Total	Count	120	195	315
	% within	38.1%	61.9%	100.0%

Source: Field survey

#### 4.15.14 EXCESSIVE WORKLOAD:

The statistics in the table show that out of total 289 respondents, 65.7% urban respondents have expressed their agreement with the contention that excessive

workload negatively affect their satisfaction on job. The ratio of rural respondents (34.3%) is lower to that of urban respondent. Chi square results (chi square= 21.884, p value= 0.0001) indicate significant co relation between excessive workload and permanent background.

**Table#60**      **job satisfaction and permanent background**

Shortage of nurses		Permanent Background		Total
		Rural	Urban	
Yes	Count	94	173	267
% within		35.2%	64.8%	100.0%
No	Count	26	22	48
% within		54.2%	45.8%	100.0%
Total	Count	120	195	315
% within		38.1%	61.9%	100.0%

Source: Field survey

#### 4.15.15      **Shortage of nurses:**

The statistics in the table show that out of total 267 respondents, 64.8% urban respondents have expressed their agreement with the contention that shortage of nurses negatively affect their satisfaction on job. The ratio of rural respondents (35.2%) is lower to that of urban respondent. Chi square results (chi square= 6.202, p value= 0.013) indicate significant co relation between shortage of nurses and permanent background.

In this part of dissertation, the researcher has considered job stress dynamics and then how to manage stress in the work environment. This chapter has focused on the stress experienced by employee in the organizations and managing consequences of job stress or stress management techniques have been examined. Some individuals in the organizations feel more stress while others do not feel stress at all, even by the same factor. At the end of the chapter the researcher has suggested measures how to manage job stress of the employee from the organization as well as individual perspective.

Stress is a dynamic condition in which an individual is confronted with challenge, an opportunity, demand or resource related to what the individual desires and the outcome of which is uncertain and unexpected. (Luthans 2005) What causes stress?

What are its consequences for individual employees? How job Stress affect job performance and job satisfaction of female nurses of public sector hospitals?

The researcher has endeavored in this study to examine the causes of stress and what relationship exist between job stress and job performance, job stress and job satisfaction of female nurses of public sector hospitals of Lahore. In this chapter, the results of this research study have been discussed. This chapter ends with concluding thoughts on this research study as well as suggestions for how this study can be further used to understand the relationship between job stress & job performance, job satisfaction & demographical factors.

## RECOMMENDATIONS AND CONCLUSION

### 5.1      **Summery**

Job stress is increasingly becoming an epidemic in the work environment. Most of the employees say they are under extreme stress at work environment. Organizations are finally waking up to the fact that a lot of human potentials are being drained away/wasted because of job stress. Chronic job stress is equally troublesome in other regions of the world too. For example, nearly one third of the American employees often or very often feel overworked or overwhelmed by work and over half of them say they experience high levels stress at least once each week. In the United Kingdom, 83 percent of human resource managers indicate that stress is a problem in their organization. An international study reported that people born after 1955 are up to three times as likely to experience more stress related disorder as were their grandparents.

## 5.2 Summary of the Results

A correlation research design was used in this study. The Questionnaires are used in this research study to collect data on causes of job stress & relationship between job stress & job performance, job stress and job satisfaction. The demographic questionnaire in this study was used to collect characteristic data on a sample of female nurses of public sector hospitals of Lahore. The Job Stress Questionnaire in this study was used to determine the causes & what relationship exist between job stress & job performance, job stress and job satisfaction of female nurses of public sector hospitals of Lahore. Multiple variables were taken into consideration and examined/analyzed. The data from female nurses of three major public sector hospitals of Lahore were collected. A total of 315 questionnaires were selected for data analysis. Pearson correlation analysis was used to assess the relationship between the various variables in question.

It has been established that public sector hospitals are factories to manufacture stress. The consequences of job stress are more chronic and severe for employees as well as for the organization as a whole. A negative correlation exists between job stress and job performance and then job stress and job satisfaction. A brief explanation of each hypothesis is as follows:

*H1: Nursing profession is full of stress.*

It has been derived from the findings that female nursing job is full of stress. Nurses have admitted that various stressors existing in the hospitals are continuously causing them stress.

*H2: Job stress leads to decline in performance.*

Job stress of nurses has negative relation with job performance in hospitals. Based on the findings of this study, it appears that performance declines with the increase in job stress in hospitals settings and vice versa.

*H3: Job stress negatively affects job satisfaction.*

It does appear that job satisfaction has significant negative relationship to overall job stress among female nurses. Based on the findings of this study, it appears that job satisfaction declines with the increase in job stress in hospitals settings and hence hypothesis has been established proved.

*H4: Various age groups and job stress are co-related.*

Various age groups experience different a level of job stress. Research findings revealed that there is strong co-relation between various age groups and job stress. Hence, hypothesis has been proved.

*H5: Job stress and experience (service length) of the respondents are co-related.*

It has been proved in the analysis that there is highly significant co-relation between job stress and experience of the female nursing staff working in the public sector hospitals of Lahore. So, the hypothesis has been established.

*H6: Job stress and various service cadres are co-related.*

It has been indicated in the analysis that there is strong co-relation between job stress and service cadres of the female nursing staff working in the public sector hospitals. So, the hypothesis has been proved.

*H7: background (rural, urban) and family status (educated, uneducated) are co-related with job stress.*

Background and family status are strongly co-related with job stress experienced by the respondents. Chi-square & p-value results have established the facts. So, the hypothesis has been proved.

## 5.3 Discussion of the Results

**Research Question 1:** Is there job stress in the public sector hospitals settings of Lahore. The research question has been investigated by help of some variables and has been analyzed by statistical programme SPSS which has proved that public hospital settings is a factory to manufacture stress. So, the first research question is proving the hypothesis that by its very nature nursing job is full of stress. The findings suggests that for better performance and job satisfaction of the female nurses, the stressors must be reduced, eliminated and then eradicated from the public sector hospitals of Lahore.

**Research Question 2:** Is job stress negatively affect performance of the nurses. Research question 2 focused on investigating the negative relation that exist between job stress and performance, so the second research question has been proved by endorsing the concern hypothesis that performance

reduces if job stress inflates. It has been proved in the analysis part by using the same statistical programme SPSS.

**Research Question 3:** Is there a significant negative relationship between job stress and job satisfaction the analysis proved that there is inverse relation between the two above variable. Hence the above research question has been established.

**Research Question 4:** Is there a significant relationship between various age groups and job stress? The analysis, using the statistical programme SPSS endorses the correlation between various age groups and job stress and yet proves the hypothesis.

**Research Question 5:** is there significant relationship between experience of respondents and job stress? so the research question has been established. Both discussed variables have highly significant correlation

**Research Question 6:** is there significant relationship between job stress and service cadre, the analysis has proved the research question and yet hypothesis.

**Research Question 7:** Is there significant relationship between job stress and background (rural/urban), and family status (educated and uneducated) it has been proved in the analysis.

### Conclusions

The researcher strongly suggests that job stress should be taken as a serious issue by the employee and the employer both. It has been proved that with the increase in job stress, job performance and job satisfaction falls. Recommendations for future Research with increased job stress is on the rise among dynamic organizations of current era. It is essential to equip employees with the necessary skills, techniques and tools to help reduce their job stress. The job stress can affect the individual, clients and organization as a whole. Increased levels of job stress, can lead to higher decline in job satisfaction and job performance. Stress results lower performance and job

satisfaction, further quality of services to clients suffers. Female Nursing staff could possibly encounter physical, emotional, and mental stress. Job stress causes employees to encounter many different feelings that could turn into resistance, lack of motivation, and feeling overworked, bored and burn out. All of these factors contribute to the morale and the theories regarding the fit between the individual and work environment and the sense of control the employee has over his or her work environment. The Department of Social Work can use the results/findings of the research presented in this study to increase the awareness of their employees and teach them about perceptions of the job stress. Furthermore, employers can help them to understand how job stress can affect other areas in the environment. Integrating perceptions into the workplace can be used as a tool to increase awareness relating to job stress and its negative affect on job performance and job satisfaction. Female Nursing staff is constantly encountering trouble, crisis and conflict in the work environment that requires them to cope with. Organizations can help to reduce the overall effects of job stress by developing and implementing prevention and intervention methods to help employees cope with job stress.

Research suggests that coping skills, education and training can help reduce job stress. One suggestion that could be utilized here would be to include the combination of confidence, approach/avoidance style, and personal control along with coping skills training to measure the effects of job stress among nursing staff.

This combination can be explored in a study to examine if the combination can help with job stress and day to day interactions with clients in the social work field. Another suggestion for future research would include assessing the participants for other factors such as burnout, motivation, problem solving awareness, and self-efficacy. These variables in combination with confidence and control have been found to reduce job stress (Heppner, Hibbel, Neal, Weinstein, & Rabinowitz, 1982; Keoske, Kirk, & Keoske, 1993).

Future research could assess for cause and effect between variables to determine the effect of job stress, since this study assessed causation of job stress and correlation between the said variables that job stress





performance and job satisfaction. Although this study clearly shows that job performance & job satisfaction have relationship with job stress, this study will help to increase awareness and insight into the continuing concerns of job stress. Finally, it is recommended that this study be explored further to examine if the findings of this study hold true in other geographical locations and industries. Job stress continues to be a growing concern in organizations today. It is essential to try to reduce the amount of job stress in the work environment in order to facilitate a more productive and contented working environment. This study has attempted to extend the understanding of job stress. The researcher has explored in this research study what typical relationship exists between job stress and job performance, job satisfaction. Individuals that are aware of their own perceptions are more likely to make a positive change in the workplace (Peterson & Wilson, 2004).

The researcher suggests the more organizations understand about job stress and the more effective the organization as a whole will be. The results of this study can help to provide further insight to social work and other human services agencies regarding job stress.

#### **RECOMENDATION**

1. Reduce the stress level of staff nurses
2. Give them moral support
3. Reduce the work overload
4. To provide comfortable environment
5. To give them appreciation letter
6. To provide further insight to social work and other human services agencies regarding job stress.
7. Give professional respect.
8. Give better accommodation.

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## ANNEXURE

### INFORMED CONSENT FORM

#### REQUEST TO CONDUCT A STUDY CONTRIBUTORY FACTORS FOR DEPRESSION AND ITS CONSEQUENCES FOR PARA- MEDICAL STAFF OF DIFFERENT HEALTH CARE FACILITIES

Respected Sir/Madam,

I am a Masters student of Public Health student at the Government College University Faisalabad, Pakistan in the Department of Public Health.

The proposed study will be in fulfillment of their requirements of the above-mentioned degree. The aim of the study is to find out the factors for depression and its consequences for para- medical staff of different health care facilities

I kindly request permission to collect data from you. A structured questionnaire will be used as a data collection tool. Please find attached the provisional questionnaire. Any changes on the questionnaire will be communicated to you before it is used.

You will be given full information about the study. The information you provide will be confidential and anonymous. Before the data is collected you will have to give a written consent to participate in the study. You have a right to discontinue with the study if you no longer wish to do so.

I..... have clearly understood the explanation by

the researcher on what the research is about and I was given an opportunity to ask questions and seek clarity where I did not understand. I understand that I have a right to withdraw from this study without facing any penalties. I understand that the information I have provided will be kept confidential and anonymous.

1. Participant's signature..... Date.....