



**OCCURRENCE OF STRESS IN NURSES IN HOSPITAL ENVIRONMENT**  
**OCORRÊNCIA DO ESTRESSE EM ENFERMEIROS NO AMBIENTE HOSPITALAR**  
**OCURRENCIA DEL ESTRÉS EN ENFERMEROS EN EL AMBIENTE HOSPITALARIO**

Lauro Geovane Morais Rodrigues<sup>1</sup>, Johny Carlos de Queiroz<sup>2</sup>, Lucídio Clebeson de Oliveira<sup>3</sup>, Rejane Maria Paiva de Menezes<sup>4</sup>, Gleyce Any Freire de Lima<sup>5</sup>

**ABSTRACT**

**Objective:** to analyze stress causes in nurses in the hospital and the reflections on the quality of care. **Method:** exploratory and descriptive qualitative study, conducted with 10 nurses. In the data production, a semi-structured interview, recorded and transcribed was used following these steps: pre-analysis, material exploration with the identification of textual centers, treatment and data interpretation, analyzed by the Analysis Technique content. This study had the project approved by the Research Ethics Committee, CAAE 5677.0.000.351-09. **Results:** stress is linked to triggering factors such as lack of materials, the health professionals in the emergency room, disorganized unit and equipment unable to ready use in emergency/urgency situations, insufficient number of nursing professionals, and the lack of an integrated job making difficult human relationships. **Conclusion:** it was observed that the factors that trigger stress negatively affect the quality of life of nursing professional harming their assistance. **Descriptors:** Nursing; Stress; Hospital.

**RESUMO**

**Objetivo:** analisar fatores desencadeantes do estresse em enfermeiros no hospital e os reflexos na qualidade da assistência. **Método:** estudo exploratório-descritivo, com abordagem qualitativa, realizado com 10 enfermeiros. Na produção dos dados, utilizou-se a entrevista semiestruturada, registrada e transcrita, seguindo os passos: pré-análise, exploração do material com a identificação dos núcleos textuais, tratamentos e interpretação dos dados, os quais foram analisados mediante a Técnica de Análise de Conteúdo. Este estudo teve o projeto aprovado pelo Comitê de Ética em Pesquisa, CAAE nº 5677.0.000.351-09. **Resultados:** o estresse está ligado aos seguintes fatores desencadeantes: falta de materiais, do profissional médico na emergência, unidade desorganizada e equipamentos sem condições de pronto uso em situações de urgência/emergência, número insuficiente de profissionais de enfermagem, além da falta de um trabalho integrado dificultando as relações humanas. **Conclusão:** observou-se que os fatores que desencadeiam o estresse interferem negativamente na qualidade de vida do profissional de enfermagem prejudicando, assim, sua assistência. **Descritores:** Enfermagem; Estresse; Hospital.

**RESUMEN**

**Objetivos:** analizar factores desencadenantes del estrés en enfermeros en el hospital y los reflejos en la calidad de la asistencia. **Método:** estudio exploratorio-descriptivo con enfoque cualitativo, realizado con 10 enfermeros. En la producción de los datos, se utilizó la entrevista semi-estructurada, registrada y transcripta, siguiendo los pasos: pre-análisis, exploración del material con la identificación de los núcleos textuales, tratamientos e interpretación de los datos, los cuales fueron analizados mediante la Técnica de Análisis de Contenido. Este estudio tuvo su proyecto aprobado por el Comité de Ética en Investigación, CAAE 5677.0.000.351-09. **Resultados:** el estrés está ligado a los factores desencadenantes, como falta de materiales, del profesional médico en la emergencia, unidad desorganizada y equipamientos sin condiciones de pronto uso en situaciones de urgencia/emergencia, número insuficiente de profesionales de enfermería, además de la falta de un trabajo integrado dificultando las relaciones humanas. **Conclusión:** se observó que los factores que desencadenan el estrés interfieren negativamente en la calidad de vida del profesional de enfermería perjudicando su asistencia. **Descriptores:** Enfermería; Estrés; Hospital.

<sup>1</sup>Nurse, Specialist in Nursing and Worker's Health, Public Health Secretary of Rio Grande do Norte/SESAP. Mossoró (RN), Brazil. Email: [lauro\\_morais@hotmail.com](mailto:lauro_morais@hotmail.com); <sup>2</sup>Nurse, Master degree Professor in Nursing, Nursing School, State University of Rio Grande do Norte/UERN and Nursing School Nova Esperança of Mossoró/Facene. Mossoró (RN), Brazil. E-mail: [johnycarlos@uol.com.br](mailto:johnycarlos@uol.com.br); <sup>3</sup>Nurse, Specialist Professor in Nursing and Worker's Health, Nursing School, State University of Rio Grande do Norte/UERN and Nursing School Nova Esperança of Mossoró/Facene. Mossoró (RN), Brazil. E-mail: [lucidioclebeson@hotmail.com](mailto:lucidioclebeson@hotmail.com); <sup>4</sup>Nurse, Ph.D. Professor in Fundamental Nursing, Undergraduate/ Graduate Program in Health Care Nursing, Federal University of Rio Grande do Norte/UFRN. Natal (RN), Brazil. E-mail: [rejemene@terra.com.br](mailto:rejemene@terra.com.br); <sup>5</sup>Nurse, Master degree student, Graduate Program in Nursing, Federal University of Rio Grande do Norte/PPGENF/UFRN. Natal (RN), Brazil. E-mail: [gleyceany\\_freire@hotmail.com](mailto:gleyceany_freire@hotmail.com)

## INTRODUCTION

With the adversities of life of health professionals in hospitals, unpleasant signs and symptoms appear causing alarming consequences for workers' health. Such signals are reflections of a worn-out life that is stress. Stress happens when the individual is subjected to an excessive burden of stressors. It shows three different phases: first, alarm - breaking the homeostasis sensations; second resistance - search rebalancing, with energy wear; finally, exhaustion - the body's defenses do not respond to the necessary stimulus to restore homeostasis.<sup>1,2</sup>

It is understood that, as far as the individual responds to stressful stimulus, they determine the stress level they are being dominated. To make it worse, the intense, prolonged or chronic stress can have a negative impact on physical and mental health causing the Burnout syndrome.<sup>3</sup>

Among the healthcare courses, Nursing is one of the most affected by the stressors coming from the hospital environment, as the pain of others, long hours of work, labor relations, death. The activity of the nurse is directly related to patients' assistance at all levels of attention, especially in the hospital dealing with critically ill patients. Therefore it is required a full view to the human being dependent on care, domain of technologies, theoretical and practical knowledge and articulation of this knowledge to facilitate the systematization of care.<sup>4</sup>

The stress was cited primarily in scientific studies in 1926 to describe the observed signals (pressure, loss of appetite, depression and fatigue) of a group of patients suffering from several diseases and different symptoms from the disease.<sup>5</sup>

Stress is classified through biogenic agents and automatically by stressors such as: cold, hunger, pain; psychosocial factors, which has the ability to stress a person because of his life story; external, arising from contingencies or imposed conditions that affect the body; internal, determined by the individual.<sup>6</sup>

Today, work is marked by big changes in regard to organizations, the imposed conditions and labor relationships, which are introduced in the lives of workers. Thus, stress is one of the diseases considered emerging comprising physical and mental changes affecting the personal and professional life of humanity.<sup>7,8</sup> Thus, it is observed in various scientific sectors the concern of stress in social contexts. In the health area it is widely discussed because the signals presented with the stress favor the

careless to the patient that needs attention and with himself, which is defined as occupational stress related to work environment associated with stress, that is the constant life of the individual, generating numerous losses.<sup>9</sup>

In this context, the question is: How stress can influence the work of nurses in the hospital? Thus, the present study aims at:

- Analyze the factors that trigger stress in nurses in the hospital work environment and the effects on the quality of care delivered to patients.

## METHOD

The research was conducted at the Regional Hospital Hélio Morais Marinho (HRHMM), linked to the State Department of Public Health (SESAP), located in the municipality of Apodi, State of Rio Grande do Norte, Brazil.

The hospital is characterized as a General Hospital, small, short stay, open clinical staff, structured horizontally, in order to assist patients of the Unified Health System (SUS).

Fez parte do estudo um total de 10 enfermeiros, de um total de 13 na instituição, com regime de trabalho de quarenta horas semanais.

To characterize the study population, inclusion criteria was defined as: employment in that hospital; voluntary participation and get availability; both genders; and consented to the Term of Informed Consent Form (TCLE).

Exclusion criteria include nurses on leave, licenses and medical certificates, and refusing to participate in the study.

It was opted for a descriptive research, which describes a situation by study in a given space to interpret current phenomenon. It also used a qualitative approach, applicable to human beings in naturalistic scenario attributing meanings through the experiences from contexts lived.<sup>10,11</sup>

A questionnaire divided into two parts was used: the first consisting in obtaining the profile of nurses (closed questions) and the second consisting of exclusively subjective questions (open questions).

This study had the research project approved by the Research Ethics Committee of the Nursing School Nova Esperança of Mossoró (FACENE/FAMENE) by Opinion Number 194/2009 and CAEE: 5677.0.000.351-09. The research followed the legal and ethical recommendations of the National Council of Health 466/2012.

The participants, ensuring their anonymity and identified by names of birds, signed the

Term of Informed Consent (TCLE), which does not refer to the professionals' gender.

Through content analysis there was carried out the survey of the analyzed material (pre-analysis) proposed by Bardin<sup>12</sup>; exploration of the material by text clippings to develop the themes, covering the interpretation of data obtained for this study.

## RESULTS

After analyzing the selected data, the results were summarized and grouped into three thematic categories: first, triggering factors of stress; further the behaviors for coping with stress; finally, the stress and the quality of care. The categories are shown below.

The listed factors that trigger stress have been reported on several occasions by various professionals during the process of work and in several sectors of the hospital.

*"Lack and shortage of inputs, lack of staff, inadequate infrastructure, poor working conditions, fights in the workplace, lack of concern for the assistance from staff, poor appreciation of the service by superiors."* (Sabiá, Canário, Papagaio and Andorinha)

Numerous factors are shown that influence the appearance of signs of stress, by stressful hours and potential for worsening of this. The absenteeism of professionals to the work environment is seen, a fact that overloads the activities and responsibilities.

The disagreements among professionals difficult synchronizing the team's goals, disadvantaging the harmonious relationship, influencing the low productivity for patient care. In this context, the lack of a leader on the team is genesis for the irresolute, monotonous and not humane work, thus generating stress and not continuing care.

The care expresses its body of knowledge, skills and attitudes, trying to understand the human being as a whole, factors hindering and founding the mechanization of tasks, limited often to erroneous technics, ignoring care with the patient and himself.<sup>13</sup>

Regarding the logistics of the reporting service, there is the main aggravating factors in favor of the stress commonly seen in public hospital environments.

*Lack of materials at the time of the procedures; lack of medical professional at the time of an emergency; [...]; disorganized unit and equipment unable to ready use in emergencies; insufficient number of assistants and technical professionals who make up the majority of the workforce in the nursing team.* (Gavião)

It is not easy to confront with different natures problems, especially with the "installed" stress. It is humanly impossible to live with so many adversities and with numerous stressful events, which result in imbalance between psychological demands and job control, which may result in harmful consequences to the health of nurses.<sup>14</sup>

For a joy work and confronting stress, it is important to conduct strategies, such as teamwork that is an excellent tool for addressing the problems of assistance, so that responsibilities are decentralized, supported the decisions and shared, facilitating the management of the service and overcoming the problems and the "natural stress" service.

*Teamwork, because often not individually depends on the nurse but rather a set of things that should go together to be able to work.* (Canário)

The collective work faces stress, however, it is necessary to add the positive interrelationships between the team and/or hospital staff with patients, family, that is social support is a resource that must be used and cultivated by the individual using it even for the everyday stress coping.<sup>15</sup>

It is considered in that coping process, the meaning of humanization of service that is a decisive "stage" in preventing stress. Therefore, it requires training and continuous awareness favoring it.

*Training with the professionals on how to serve the people with humanization. Through this, it is believed that employees will become more committed and respected the needs of patients seeking health care.* (Graúna)

In another aspect favoring coping, it positively establishes the rights of rest and comfortably rest, recovery through good salaries, health monitoring, update for qualification and committed to the cause.

*Be committed, be ethical and humane, providing solutions according to their personal and local possibilities. [...] Better wages; nursing apartment for rest; periodic examinations identifying the health of the worker; to assert their rights, of course not forgetting their duties; praise when necessary; updating of knowledge through courses or others.* (Gavião)

Among the most used resources to prevention of stress, both in personal life and professional, there is the practice of leisure and rest - regular physical exercise and relaxation, diet rich in nutrients, learning to control tensions.<sup>15</sup>

Stress relates to the health service hospital and its consequences on the professionals with the quality of care, as they are involved in the



Rodrigues LGM, Queiroz JC de, Oliveira LC de et al.

Occurrence of stress in nurses in hospital...

care with the patient in such a way that identifies various emotional disorders such as irritation, moodiness and inability to do the work.<sup>16</sup>

Stress reduces the employee's level of attention and often influences in low esteem for the work. (Sabiá)

In addition to emotional disorders, other losses in care are brought by work organization, its conditions and overload, which led to the increase of stress, decreasing attention to the patient.<sup>16</sup>

*When you are not so well, you pass it for patients, which makes the quality of care and the provision of services difficult involving the patient holistically. (Canário)*

*For those involving personnel with work, irritation or depressed state in customer service appear. (Andorinha)*

*It disconcentrates the professional, it discourages, it makes the most hostile environment. (Golinha)*

*If you are not well, you cannot provide good service to patients. (Beija-Flor)*

It is known that the extreme need to face the stress, given the numerous testimonials that limit the health care of people assuming that health services should always be aware of problematic issues related to stress and the contexts of the internal job searching for reflect and resolve the premises of this problem.

## CONCLUSION

It was observed that there are numerous triggers of stress and countless consequences, especially when in quality of life of the professional as well as the ideal carrying out of their work in the face of constant routines. There are many adversities distorting the direction of what is intended to what is done.

What we can enhance greater inefficiency there are troubled assistance provided to patients because the stressed professional will never have the ability to watch each other in an integral manner, aggravated it in the intensive sectors, which patients need more detailed care.

This study showed an example of the reality that permeates nursing in public hospitals in Brazil. It reflects on public health and the professions that permeate it, being guaranteed rights and duties neglected.

Stress will always exist in any profession. However, there are ways to prevent it, such as self-care being actions that alleviate the bio-psycho-social and professional consequences. Finally, the results of this study will serve to the academy and the scientific community to discuss the

eventuality brought here, agreeing, disagreeing and pointing to solutions that work in nursing organizations take steps towards professionals to work more and better for the people.

## REFERENCES

1. Menzani G, Bianchi ERF. Stress dos enfermeiros de pronto socorro dos hospitais brasileiro. Rev Eletr Enf [Internet]. 2009 [cited 2011 Mai 10];11(2):327-33. Available from: <http://www.fen.ufg.br/revista/v11/n2/v11n2a13.htm>
2. Magalhães AP, Castro NMS. Fatores determinantes de estresse em enfermeiros que atuam em centro de terapia intensiva (CTI) unidade de terapia (UTI) e pronto socorro. [Internet] 2010 [cited 2011 Mai 10]. Available from: [http://www.nelydecastro.com.br/recomendacoes\\_bibliograficas/index.htm](http://www.nelydecastro.com.br/recomendacoes_bibliograficas/index.htm).
3. França SPS, Martino MMF De, Silva LL et al. Critical analysis on the concept of stress in health care used in scientific publications. J Nurs UFPE on line [Internet]. 2012 [cited 2013 Apr 10];6(10):2542-50. Available from: [http://www.revista.ufpe.br/revistaenfermagem/index.php/revista/article/view/2606/pdf\\_1575](http://www.revista.ufpe.br/revistaenfermagem/index.php/revista/article/view/2606/pdf_1575)
4. Giordani JN, Bisogno SBC, Silva LAA. Percepção dos enfermeiros frente às atividades gerenciais na assistência ao usuário. Acta Paul Enferm. 2012;25(4):511-6.
5. Associação Educacional Dom Bosco [Internet]. Rio de Janeiro: SANTOS LP, WAGNER R. Gerenciando o estresse Ocupacional: uma nova abordagem [cited 2013 Apr 20]. Available from: [http://www.aedb.br/seget/artigos07/265\\_Gerenciamento%20do%20Estresse%20Ocupacional%20Uma%20Nova%20Abordagem.pdf](http://www.aedb.br/seget/artigos07/265_Gerenciamento%20do%20Estresse%20Ocupacional%20Uma%20Nova%20Abordagem.pdf)
6. Lipe ME e colaboradores. Stress: conceitos básicos. In: LIPP, M.E.N. (org.). Pesquisas sobre stress no Brasil: saúde, ocupações e grupos de risco. Campinas, SP: Papirus, p.17-31, 1996a.
7. Benevides-Pereira AMT. Burnout: quando o trabalho ameaça o bem-estar do trabalhador. 3rd ed. São Paulo: Casa do Psicólogo, 2008.
8. Hanzelmann RS, Passos JP. Imagens e representações da enfermagem acerca do stress e sua influência na atividade laboral. Rev esc enferm USP [Internet]. 2010 [cited 2013 Apr 20];44(3):694-701. Available from: <http://www.scielo.br/pdf/reeusp/v44n3/20.pdf>.

Rodrigues LGM, Queiroz JC de, Oliveira LC de et al.

Occurrence of stress in nurses in hospital...

9. Paschoal T, Tamayo A. Ergonomia, Estresse e trabalho. Validação da escala de estresse no trabalho. Estudos de Psicologia [Internet] 2004 [cited 2011 Mai 10];9(1):45-52. Available from: <http://www.scielo.br/pdf/epsic/v9n1/22380.pdf>
10. Marconi MA, Lakatos EM. Técnicas de pesquisa. São Paulo: Atlas, 2006.
11. Marcus MT, Liehr PR. Abordagens de Pesquisa Qualitativa. In: Lobiondo-Wood G, Haber J. Pesquisa em enfermagem. Métodos, avaliação crítica e utilização. 4th ed. Rio de Janeiro: Guanabara Koogan, 2001. p.122-139.
12. Minayo MCS. O desafio do conhecimento: pesquisa qualitativa em saúde. 10. ed. São Paulo: Hucitec, 2007. 406 p.
13. Graças EM, Santos GF. Metodologia do cuidar em enfermagem na abordagem fenomenológica. Rev Esc Enferm USP [internet]. 2009 [cited 2013 Apr 17];43(1):200-7. Available from: <http://www.scielo.br/pdf/reeusp/v43n1/26.pdf>
14. Urbanetto JS, Silva PC, Hoffmeister E, Negri BS, Pinheiro da Costa BE, Poli de Figueiredo CE. Estresse no trabalho da enfermagem em hospital de pronto-socorro: análise usando a Job Stress Scale. Rev Esc Enferm. USP 2011;19(5):[10 telas].
15. Corral-Mulato S, Baldissera VDA, Santos JL, Philbert LAS, Bueno SMV. Estresse na vida do acadêmico em enfermagem. (Des)conhecimento e prevenção. Invest Educ Enferm. 2011;29(1):109-117.
16. Feitosa Lima G, Simonetti SH. Ferraz Bianchi ER. Kobayashi RM. Caracterización del estrés de enfermeros que trabajan en hospital especializado en cardiología. Rev Elet trim de Enferm [Internet]. 2012 [cited 2013 Apr 17];28(11):90-104. Available from: <http://scielo.isciii.es/pdf/eg/v11n28/docencia2.pdf>

Submission: 2014/08/05

Accepted: 2015/04/28

Publishing: 2015/05/15

#### Corresponding Address

Gleyce Any Freire de Lima  
Universidade Federal do Rio Grande do Norte  
Centro de Ciências da Saúde  
Bairro Lagoa Nova, s/n  
CEP 59078970 – Natal (RN), Brasil