DIFFERENCE OF WORK STRESS ON GROUPS MEDICALS AND NURSES

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ABSTRACT

This study aims to determine the existence of difference of work stress levels in the medical and nursing groups. Respondents in this study were derived from medical and nursing groups in the outpatient department at a hospital in Indonesia. The sampling technique used is the total sample technique (census) with the total number of samples being equal to the total population, which is 141 people. Data retrieval was carried out using the work stress scale. Its validity was measured using the Pearson Product Moment formula and its reliability using the Cronbach alpha formula. The results of analysis show that the value of t count is greater than t table so that Ho is rejected. This shows that there are differences of work stress in the medical and nursing groups. To measure the work stress level in both groups using the mean and resulted that the mean work stress in the medical group is smaller than the mean work stress in the nursing group. This shows that the work stress level of medical group is smaller than the nursing group.

INTRODUCTION

The health services have developed into very complex service institutions. In addition to the increasing needs for public health and the community’s increasing demand for high service quality, the development of science and technology in the health sector has caused health workers to work together in providing medical services to the community or bettering the life of their patients. As stated by many health sociologists (among others: LenFreidson, Mechanic and Cockerham), the three main components of the health care system are employment, facilities and technology (Lumenta, 1989: 20). The Government of Republic of Indonesia’s Regulation Number 32 of 1996 regulates seven classes of health workers, namely: medical personnel, nursing staff, pharmacy personnel, public health personnel, nutrition workers, physical firepower and medical technical personnel. This classification does not specifically explain their respective roles but merely restrict their functions and responsibilities.

In health services, medical staff and nurses are given more attention because their roles and functions give shape to efforts in the health services. Medical personnel, nurses and patients have their respective duties and responsibilities and must be able to interact and work together. A medical personnel is responsible for identifying the patient’s health history, conduct physical examination, establish a diagnosis and determine measures to be taken for treatment. Medical personnel will forward to the nurse any information on a need-to-know basis and treatment measures for the patient. In the outpatient department, the nurse also needs to prepare the equipment needed by the medical staff. The comparison between the number of medical staff and nurses per population is 1 medical personnel for 6,000 residents and 1 nurse for 1,400 residents, indicating a heavy workload (Lumenta, 1989: 53). In addition to the heavy workload, medical personnel and nurses must face life and death situations every day. Any mistake can have serious consequences. Work that demands such level of responsibility for human life can lead to stress (Smet, 1994: 117).

Work stress is a psychological condition that affects work balance and ability (Schultz & Schultz, 1994: 402). Work stress is very detrimental because it can lead to decreased work productivity, motivation and ability to work. Work stress is an accumulation of several stressors in the workplace. Classification of work stressors according to Quick and Quick (1984: 50) is: workloads, routines, range of activities, excessive workload and work that does not provide security; role demands, namely: role conflict and role ambiguity; physical and psychological environment; demands in interpersonal relations, including: status mismatches, group pressure and leadership style. Wolfgang (in Berry, 1997: 419) has conducted a comparative study on stress levels between medical personnel, nurses and pharmacists. Apparently, nurses have the highest stress level depending on where they are...
stationed. Nurses at the emergency department, ICU and wards are often reported to have high stress levels. One important thing that affects the stress level of health workers is their relationship with patients. These interactions also occur in the outpatient department and have the potential as work stressor. Based on this, a study was conducted to determine the differences of work stress levels in the medical and nursing groups in the outpatient department of a hospital in Indonesia.

**Literature Review**

**Stress**

Schultz & Schultz (1994:404) describes that stress involves physical and psychological factors in response to stimuli that are usually unpleasant and suppressing in the environment. Similar understanding with Schultz & Schultz was also stated by Chaplin (1991:488) in the Complete Dictionary of Psychology citing that stress is a stressed state, both physically and psychologically. Based on that definition, stress is generally interpreted as a reaction to stresses arising from the environment and marked with negative feelings in individuals, such as feeling threatened and depressed.

**Work Stress**

Schultz & Schultz (1994:402) describes work stress as a psychological factor that influences work balance and ability. Robbins (1993:611) states that work stress is a dynamic condition that is faced and perceived by individuals between opportunities or demands on their desires. According to Quick et al (1990:43), job stress is the number of demands on individuals caused by work or the environment in which individuals are located and it cannot be avoided because of a part of life. Based on these definitions, work stress is an individual record of the overall factors of the work environment that demand self-adjusting reactions and have the potential to cause pressure, affect life and individual workability.

Work stress is an accumulation of several sources of stress in the workplace. Grouping the sources of work stress by Quick and Quick (1984: 50) are:

1. Workload, matters relating to workload, namely: routine tasks, range of activities, excessive workload and work that does not provide security.
2. The role demands, in this case there are 2 kinds, namely: role conflict and role obscurity.
3. Environment in the form of physical environment and psychological environment.
4. Demands in interpersonal relationships include: status mismatches, group pressure and leadership style.

**Development of Hypotheses**

Based on the explanation described above, the following research hypothesis has been formulated:

(Ha): There is a difference of work stress levels in medical and nursing groups.

(Ho): There is no difference of work stress levels in the medical and nursing groups.

The independent variables in this study are the medical and nursing groups, while the dependent variable is work stress. Respondents were derived from medical and nursing groups in the outpatient department of a hospital in Indonesia. The definition of medical group in this study includes doctors and dentists in the outpatient department at the hospital, while nursing group in this study includes nurses in the outpatient department at the hospital. The sampling technique used is the total sample technique (census) with a total number of samples being equal to the total population, which is 141 people.

Data retrieval was carried out using the work stress scale. The work stress scale consists of 66 items with compiled indicators referring to the four types of work stress factors according to Quick & Quick (1984: 50), namely: workload, role demands, environment and demands in interpersonal relationships. The work stress measurement tool was a Likert scale modified to display four categories of answers, namely: Strongly Agree, Agree, Disagree, and Strongly Disagree. The attitude statement on this scale can contain positive things as follows: if it contains statements that support and favors the object of attitude, this statement is called favorable. However, the attitude statement can also contain negative things, namely unfavorable statements. The assessment of attitude is listed in Table 1.

<table>
<thead>
<tr>
<th>Response</th>
<th>Score</th>
</tr>
</thead>
<tbody>
<tr>
<td>Strongly Disagree</td>
<td>4</td>
</tr>
<tr>
<td>Disagree</td>
<td>3</td>
</tr>
<tr>
<td>Agree</td>
<td>2</td>
</tr>
<tr>
<td>Strongly Agree</td>
<td>1</td>
</tr>
</tbody>
</table>

To measure the validity and correlation between factors, the Pearson Product Moment formula where the calculation uses SPSS version 10.01 was used. Measurement of reliability was carried out using Cronbach alpha formula and calculations using SPSS version 10.01. The technique used to test hypotheses is a statistical t-test technique which serves to measure the distribution of differences in both means. If the results of the analysis show that the value of t count is greater than t table, Ho is rejected. If the results of the analysis show that the value of t count is smaller than t table, Ho is accepted. Furthermore, the mean distribution is used to measure work stress levels in the medical and nursing groups.

**RESULT AND DISCUSSION**

The trials and implementation of the research were carried out together with the way the entire population was sampled. After the instrument is tested for the validity of the item, the data is reused by using valid items. The following are the characteristics of the research sample listed in Table -2.
The work stress scale consists of 66 items, after validity testing with a significance level of 5% from 141 subjects there are 6 items that are irrelevant and 60 items that conform with the validity coefficient of the item is 0.182. The complete arrangement of the results of the correlation analysis between work stress scale factors is listed in Table 3.

Table 3 Correlation Analysis Between Work Stress Scale Factors

<table>
<thead>
<tr>
<th>No</th>
<th>Description</th>
<th>N</th>
<th>( n_a )</th>
<th>N</th>
<th>( n_b )</th>
<th>N</th>
<th>( n_c )</th>
<th>( n_d )</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>TFV1</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
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<td></td>
</tr>
<tr>
<td>1</td>
<td>Pearson Correlation</td>
<td>1.000</td>
<td>.607</td>
<td>.516</td>
<td>.585</td>
<td>.916</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Sig. (2-tailed)</td>
<td>N</td>
<td>141</td>
<td>141</td>
<td>141</td>
<td>141</td>
<td>141</td>
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<tr>
<td></td>
<td>TFV2</td>
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</tr>
<tr>
<td>2</td>
<td>Pearson Correlation</td>
<td>.607</td>
<td>1.000</td>
<td>.455</td>
<td>.410</td>
<td>.751</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Sig. (2-tailed)</td>
<td>N</td>
<td>141</td>
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<td>141</td>
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<td>TFV3</td>
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</tr>
<tr>
<td>3</td>
<td>Pearson Correlation</td>
<td>.516</td>
<td>.455</td>
<td>1.000</td>
<td>.408</td>
<td>.710</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Sig. (2-tailed)</td>
<td>N</td>
<td>141</td>
<td>141</td>
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<td>TFV4</td>
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</tr>
<tr>
<td>4</td>
<td>Pearson Correlation</td>
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<td>.410</td>
<td>.408</td>
<td>1.000</td>
<td>.753</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Sig. (2-tailed)</td>
<td>N</td>
<td>141</td>
<td>141</td>
<td>141</td>
<td>141</td>
<td>141</td>
<td></td>
</tr>
<tr>
<td></td>
<td>TFV5</td>
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<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>Pearson Correlation</td>
<td>.916</td>
<td>.751</td>
<td>.710</td>
<td>.753</td>
<td>1.000</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Sig. (2-tailed)</td>
<td>N</td>
<td>141</td>
<td>141</td>
<td>141</td>
<td>141</td>
<td>141</td>
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</tbody>
</table>

In terms of measurement of reliability in this study, the reliability coefficient is 0.9263. This indicates a very reliable measuring instrument used to measure work stress.

From the data analysis process with the t-test technique, the value of \( t = 9.682 \) with \( p = 0.000 \), where \( t \) table = 9.157, was obtained. This means that the value of the t-test is greater than t-table, resulting in Ho which states "There is no difference of work stress levels in the medical and nursing groups", is rejected and Ha says "There are differences of work stress levels in the medical and nursing groups", is accepted.

Mean number of work stresses in the medical group was 175.76, while the mean number of the nursing group was 193.07. From these data, the largest mean is in the nursing group, which indicates that the nursing group is more stressful than the medical group.

**CONCLUSION**

This study aims to determine the differences of work stress levels in the medical and nursing groups. Based on the results of research data analysis and discussion, it can be concluded that there are differences of work stress levels in the medical and nursing groups. In addition, when viewed from the mean, the results of the study also show that the nursing group has a greater mean value of work stress compared to the medical group.

**References**


**How to cite this article:**


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