**Review Paper**

**A Review on Job Stressor in the Perspective of Health Care Industry**

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**Abstract**

This paper is about gaining a better understanding of what types of situations cause stress in health care providers and how that stress affects job performance. The five key independent variables are workload, procedural injustice, role stress, work-family conflict, and physical environment. The purpose of this study is to identify the relationship between the job stressor such as workload, procedural injustice, role ambiguity, work-family conflict, and physical environment towards job performance.

**Keywords:** Stress, workload, procedural injustice, work-family conflict, physical environment.

**Introduction**

Job related stress is a widespread problem in the workplace today. There are many different causes of stress, called stressors and they vary from person to person. People must be aware of the signs of stress, and try to prevent it before it begins to affect their lives. Stress has both mental and physical effects on people. If there is an unhealthy level of stress and it is not reduced or prevented, it can lead to many health problems, mental problems and family problems. There are many things that both employees and employers can do to alleviate or prevent stress in the workplace. Stress management techniques are plentiful, and they must be employed by people today to ensure that they remain happy and healthy.

People’s lives are getting busier all the time. Economic, social, psychological, demographic, political and ecological changes around the world are forcing individuals to reassess the concept of work and the effects of stress and burnout on the workforce. More women employed than ever before and dual-career families become common. More and more employees are experiencing a reduced quality of work-life. This is reflected most greatly in work-life imbalance and job stress. These two problems cause risks to workers’ well-being as well as to organizational performance and have received more attention this decade than ever before.

Stress related health problems are rampant in our society. Life-threatening situations are uncommon, but current life styles keep our body in a state of continuous imbalance. There are various groups of people who suffer from stress. Thus it can be said that no people are relieved from stress in one way or another. One of them is health care providers. An estimated 75-90 percent of all primary care health providers see patients with stress related problems. Sustained psychological stress has been associated with numerous health consequences, especially for those who interpret daily hassles of life as being stressful.

**Literature Review**

**Job Stress:** Job stress is the result of overload on individuals’ senses and their inability to complete tasks. Moreover, job stress results from the interaction of the worker and the conditions of the work (“Managing job stress”). Conflict arising from the differing demands of home and work is an important source of stress in the nursing profession. The end result of prolonged exposure to this stress is job burnout.

Nowadays, job stress is as much a business issue as it is a health issue. Job stress costs the businesses hundreds of billions of dollars a year in employee burnout, turnover, higher absenteeism, lower production and increased health care costs. Job stress in the nursing profession has been a global problem. Job stress can have adverse mental and physical health consequences and can lead to decreased satisfaction with ones job.

Stressors, the causes of stress, include any environmental conditions that place a physical or emotional demand on the person. A job stressor has been typically defined as an antecedent condition within ones job or the organization that requires an adaptive response on the part of the employee. The negative reaction to a stressor is called “distress” or “strain” and has been operationalized. According to Glazer and, work-related stressors are defined as markers of the work itself, including aspects of the work environment (physical stressors, e.g., noise or heat), psychosocial environment (e.g., relations with co-workers and managers) or the job role (e.g., role ambiguity, and role conflict). There are numerous stressors in organizational settings and other life activities. Stressors can be
viewed as antecedent conditions in the person and in the environment that lead to the appraisal of different types of stress states.

**Definition of Dependent Variable**

**Job Performance:** Job performance is the level of productivity of an individual employee, relative to his or her peers, on several job-related behaviors and outcomes. Job performance is defined as the expected value of a set of behaviors an individual carries out over time\(^{10}\). These behaviors should make some contribution to organizational goals.

Effective performance of a job may be assessed by looking at the attainment of output objectives (i.e. result) or the appropriate execution of procedures and processes. Effective job performance has positive effects on both an organization and its employers. There are three individual job performance dimensions to be discussed in this review, summated to create a measurement of overall job performance in health care industry, which are quality, absenteeism, and new learning\(^{11}\).

**Quality:** Nursing performance indicators are the result of a convergence of forces, including rising demands for care, concerns about quality and cultural changes that seek greater transparency and accountability in public services\(^{12}\). Some of the factors that determine quality of patient care include: Accessibility to care; Timeliness of care; Effectiveness of care; Efficacy of care; Appropriateness of care; Efficiency of care; Continuity of care; Privacy of care; Confidentiality of care; Participation of patient and patient family in care; and Safety of care environment.

**Absenteeism:** Absence is a phenomenon that is present in organizations that are large and small, public or private, urban or rural\(^{13}\). Absenteeism is a problem among hospitals and other highly formalized and centralized bureaucratic organizations. Nurse absenteeism is a growing management concern. The findings tend to support a negative relationship; increased absence results in decreased performance\(^{14}\). Absenteeism can be influenced by work culture and the content of the work itself. It can contribute to understaffed units, staffing instability and other factors that could have a negative impact on patient care\(^{15}\). There are many factors that contribute to absence. Some are caused by involuntary versus voluntary and avoidable versus unavoidable.

**New Learning:** Learning was described as occurring in stages: concrete experiences, observation and reflection on the experience, conceptualization and generalization, then theoretical testing in new and more complex situations\(^{16}\). Learning is cyclical, with new learning coming from new experiences. Consequently, learning occurs in a comprehensive manner, beginning with performance (concrete experience) and ending with educational growth. Fluctuations in performance can be attributed to changes in such factors as focus, interest, energy, ability, situational circumstances, or favourable/ unfavourable conditions for learning. Increased knowledge or improved attitudes and skills usually suggest more effective job performance.

**Relationship between Work Stressor and Job Performance**

**Workload:** Workload was referred to as “the perceived relationship between the amount of mental processing capability or resources and the amount required by the task”. “Workload” is a hypothetical construct which has been developed and is widely applied within the domain of human factors psychology\(^{17}\). This workload construct emerged from extensive, task-specific research on the capacities and limitations of the human information processing system; it reflects the perceived margin between task demands and an individual’s motivated coping capacity.

Performance can be affected by workload being too high or too low. According to the Systems Engineering Initiative for Patient Safety model of work system and patient safety, structural/organizational characteristics of health care work systems, such as nursing workload can affect quality of care and patient safety.

It was reported that excessive workload was a most significant predictor of stress with greater workload leading to greater emotional exhaustion\(^{18}\). Several studies have shown the relationship between nurses’ working conditions, such as high workload, and job dissatisfaction. Job dissatisfaction of nurses can lead to low morale, absenteeism, turnover, and poor job performance, and potentially threaten patient care quality and organizational effectiveness.

**Procedural Injustice:** Procedural justice refers to the fairness of the process by which outcomes are determined. Fairness judgments are determined by cognitive processes by which an individual evaluates procedures on the basis of their consistency, bias suppression, accuracy and ethicality\(^{19}\). It is proposed that employees will respond to fair treatment by behaving in ways that benefit the organization, resulting in improved job performance\(^{20}\). Procedural justice may also improve job performance by enhancing the acceptance of common goals in organizations. Procedural injustice is concerned with the extent of perceived fairness for the procedures by which organizational decisions are made. Instead, lack of fair treatment (i.e. procedural injustice) may lead to deterioration in job performance.

An operationalized procedural injustice is the degree of unfairness and bias in the formal decision making process leading up to the delivery of unfavorable outcomes\(^{21}\). Procedural injustice at work is correlated negatively with job satisfaction and lead to a negative effect on psychosomatic well-being.
These indicated that acceptance has effect upon fatigue and psychological aspects of well-being. Nurses tend to have more emotional instability and psychological distress, beyond the effects of demographic variables and fatigue severity\textsuperscript{22}. However, procedural injustice was revealed to have more impact on aggressive behavior.

If employee faced injustice procedures result in an unfair procedure condition, the initial outcomes become unfairness. Thus, employee may resort to illegitimate or unsanctioned responses to compensate for these procedural injustices. When employee were given feedback about their success or failure in a group competition and discovered the competing group were hanged unfair procedure in the workplace, the employee expressed anger when the group not competed fairly and expressed greater disappointment with the losing outcome but with the unfair procedure\textsuperscript{23}.

Unfairness, betrayal and procedural injustice are especially pernicious forms of conflict that may undercut organizational commitment and citizenship behaviors\textsuperscript{24, 25}. Unfair procedures and unfair treatment lead to stress and burnout. Procedural justice that has implications on persons’ sense of self-worth and identity may present another appraisal or belief that moderates the cognitive appraisal process and coping behavior in a stressful situation\textsuperscript{26}. Moreover, stress also linked to such negative outcomes as decreased job performance, increased workers’ compensation claims and increased sick time\textsuperscript{27}. For instance, experiencing injustice contributes to such negative outcomes as decreased work performance\textsuperscript{28} and increased withdrawal behavior.

Role Ambiguity: A job stressor that has received considerable research attention for its role in creating job-related stress is role ambiguity\textsuperscript{29}. Role ambiguity an additional source of stress may be present in the work place when an employee does not have adequate information in order to carry out the task or does not understand or realize the expectations with that particular role. Role ambiguity is uncertainty, stemming from the lack of availability of information for adequate role performance or task completion. Role ambiguity has been described as the single or multiple roles that confront the role incumbent, which may not be clearly articulated (communicated) in terms of behaviors (the role activities or tasks/priorities) or performance levels (the criteria that the role incumbent will be judged by)\textsuperscript{30}. The role ambiguity was stated to exists when focal persons (role incumbents) are uncertain about product-to-evaluation contingencies and are aware of their own uncertainty about them\textsuperscript{31}. Role ambiguity was further defined to be job ambiguity and indicate that job ambiguity possesses three distinct aspects: work methods, scheduling and performance criteria.

Role ambiguity was defined as a circumstance in which the desired roles sent to the employee were vague and the employee is likely to experience confusion and uncertainty in performing the desired sent roles. This situation happens in several common ways, i.e. inadequate information of job functions, vague expectations of peers and superiors and uncertainty of performance evaluation systems may cause employees to feel extensively stressed and eventually fail to perform their tasks\textsuperscript{32}. Role ambiguity involves uncertainty about aspects of the job including, but not limited to, such things as scope of responsibility and role expectations. Considerable research exists that demonstrates the negative impact of role ambiguity on employees\textsuperscript{29}.

Role ambiguity refers to unclear role expectations and therefore uncertainty in knowing whether one is meeting role expectations. Role ambiguity contributes to feelings of insecurity and at times confusion. An example of role ambiguity is the expectation that professional nurses be assertive, efficient and independent, and yet acquiesces to the rules and constraints on role performance imposed by hospital bureaucracies\textsuperscript{33}.

Role ambiguity can be further compounded by role overload, when nurses lack skills in handling role demand, establishing priorities and allocating time wisely. Employees who experience role ambiguity tend to perform at lower levels than employees who have a clear understanding of job requirements and what is expected of them.

Work Family Conflict: Work-family conflict was defined as an inter-role conflict in which responsibilities from work and family domain are no compatible\textsuperscript{34}. Work family conflict was described as a form of inter-role in which the general demands of time devoted to a strain created by job interfere with the time from family-related responsibilities. This conflict occurs when participation in the family role is made more difficult by participation in the work role, hence the term called “work-family conflict”. Further studies suggest that work-family conflict is present when the demand of one of these two domains makes it more difficult to meet the demand of others; it is hard to make a choice between family and work when choice being piled up\textsuperscript{35}. If a family balance is not restored that considers each person’s needs, family members can experience isolation, poor health, prolonged fear and depression.

One of the characteristic that leads to work-family conflict is time pressure. Time pressures occur because time devoted to one role makes it difficult to meet requirements of another role. Past studies have shown that long hours worked and work schedule inflexibility is related to high work-family conflict. Thus, work-family conflict associated with a long working hours lead to a poor work-life balance and poor quality of family relationship\textsuperscript{36}.

According to\textsuperscript{37} stated that work interfering with family had a direct relationship with work exhaustion in a study of medical technologists, provide with greatest of them were midwifery nurses. Besides, it was stated that work-family conflict may result from nurses continue to juggle multiple responsibilities of work, including those responsibilities related to the home,
family and children. These responsibilities between work and family can be incompatible in some aspect. Nevertheless, it may contribute nurse to absenteeism and turnover, both of which detract from the quality of care.

Further evidence was put forward that work-family conflict generate the specific emotional reaction in the form of guilt and hostility at work and at home. The work-family conflict thus reduces the marital satisfaction and job satisfaction. The outcomes of work-family conflict include lower quality of work life or job performance and family life, lead to emotional exhaustion and decrease in performance. In addition, increase in work-family conflict has also been associated to the outcome of increased job burnout.

**Physical Environment:** Work tasks are made of sequences of actions, carried out to achieve certain goals. Good skills of employee enable them to operate efficiently with respect to goals of the work. However, the work environment is a significant factor that should not be underestimated. Environmental pressures may sometimes cause problems for skilled performance, resulting in impaired quantity or quality of working output, or, for example, mistakes in decision making. Thus, it is important to take into consideration the environment in which employees operate. Work conditions are an example of the external environmental factor that influences the level of performance. There are various working conditions that people work under; some employees work indoors while others work outdoors. Some are exposed to intensive noise, heat, cold, different schedule times and high risk of injury/illness.

Physical environment stressors defined as the forces in the environment in general could be expected to create stress for the individuals within an organization. The physical work environment stressors have not been focused enough upon by previous research. However, it is significant to explore them since working environment and working tools are not only related to job performance; they are also one of the major factors of stress. If work tools are not provided or provided insufficiently, it has a negative effect not only on the level of stress, but also on the ability to perform.

Physical environment stressors are some stressors that are found in the physical work environment, such as excessive noise, poor lighting and safety hazards. The physical work environment can cause stress which hinders employees from performing at the desired level. This could be, for instance, the lack of the right tools or the breakdown of a computer system making it impossible to use. Environmental factors such as lack of physical resources and generally uncomfortable work settings can make the best job stressful.

Noise was defined as “unwanted sound”. It appears to affect the quality of work and the level of performance. The most noticeably affected by noise tasks are those requiring concentration. Much research has examined the effects of noise on patients, but comparatively few studies are available for healthcare staff. There is evidence that staff perceive higher sound levels as stressful. A recent study by examined the effects of higher versus lower noise levels on the same group of coronary intensive-care nurses over a period of months. Lower noise levels were linked with a number of positive effects on staff, including reduced perceived work demands, increased workplace social support, improved quality of care for patients and better speech intelligibility.

Nurses, physicians and other healthcare employees work under extremely stressful physical conditions. Nursing staff members are open to risk of injury from medical equipment such as high-intensity surgical-light sources. One study found that a light source used during surgery could potentially cause retinal damage in surgical staff. Poor ergonomic design of patient beds and nurses’ stations leads to back stress, fatigue and other injuries among nursing staff. Many hospital settings have not been rethought as jobs have changed and as a result, the design of hospitals often increases staff stress and reduces their effectiveness in delivering care.

**Conceptual Framework**

Theoretical framework as in figure 1 shows the independent variables and dependent variable. It is developed after analysis of related previous research. In this research, the dependent variable is job performance in midwifery. The five independent variables that we use such as workload, procedural injustice, role ambiguity, work-family conflict and physical environment are the job stressors that affect job performance of midwives.

![Figure-1](image_url)

**A Conceptual Framework**

**Conclusion**

Health care industry’s staff such as nurses and midwives are critical members of the health care team. Hence, studying the job stressors nurse-midwives are well worth the time, as cited in the literature review. The purpose of this inquiry was to examine how job stressors manifests itself among nurse-midwives relate to job performance. Discovering nurse-midwives perceived stressors on the job, and identifying the relationship between the job stressor towards job performance was the objectives of this conceptual paper.
References


17. Hart S. G. and Staveland L. E., Development of a multi-dimensional workload rating scale: Results of empirical and theoretical research. In P. A. Hancock & N. Meshkati (Eds.), Human mental workload (pp.139-183). Netherland: Amsterdam (1988)


