

Work Stress and Coping Pattern among Nursing Academic Staff

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ABSTRACT

Work stress has become a serious and growing problem among academic staff with several deleterious consequences. **Aim of the study** was to assess the work stress and coping patterns among nursing academic staff through: identifying sources, level and manifestations of stress among them, and their coping patterns which they used. **Methodology** The study was conducted on a group of one hundred and three academic staff who are working at faculty of nursing of Ain Shams University with different positions and departments. **Data were collected** through interview questionnaire sheet used to assess sources and manifestation of stress among nursing academic staff and their coping patterns. **Results of this study** revealed that half of academic staff suffer from high stress. Also, more than two thirds of them suffer from moderate stress from work environment followed by workload and stress from students. Two thirds of them had symptoms of stress which may be intellectual, physical, behavioral and emotional. But the most prevalent one among them was the emotional symptoms. academic staff used coping patterns such as setting limits of work, seeking advice and support from others, relaxation & suppression of feeling. **Conclusion** Half of studied subjects suffer from high stress. Two thirds of them had moderate level of stress manifestation .The study **recommended** that the encouragement for developing stress management programs and coping strategies that can be made within the faculty of nursing that will reduce work-related stress among academic staff..

Key words: Work stress, academic staff, coping patterns.

INTRODUCTION

Stress has become a major issue that has seriously affected academic staff all over the world. Academic staff has been identified as an occupational group that functions under high stress. About two out of every five academic staff were highly stressed as against one in every five in the other occupation such as nursing, security, management, etc. Stress is an inevitable and unavoidable component of life due to increasing complexities and competitiveness in living standard. Stress has become the core concern in the life of everyone, Stress is a

subject which is hard to avoid; Stress is a part of day-today living. Every individual is subjected to stress either knowingly or unknowingly. Stress, is now a major health problem/hazard (Nayak, 2008; Mathewman, et al., 2009 and Adebisi, 2013).

There is increasing pressure on academic staff, which is a result of a change in the policy and social status of higher education. The work of academic staff has largely changed in recent years. Therefore, the occupation of academics had lost the characteristics for which should be stress-free and beneficial as well as for work wellbeing as well as and quantity of work, it depends on

its quality which had become a source of stress for the academic staff. This problem arises mainly due to quality assurance and accreditation which eventually results in competition and this further compels the faculties to stay competitive and to increase their productivity **(Barkhuizen & Rothmann, 2008 and Usman, et al., 2011)**.

The workload of academic staff is described as number of hours on job and administrative work, as well as Poor relationship with colleagues can be considered as one of the important factors of stress and on the other hand, increased the teaching load and responsibilities that the academic staff found it difficult to keep a balance between their work and family responsibilities. furthermore, advancement in modern technology had complicated problems for academic staff, and there increased constant pressure coming from university administration on academic staff with regard to routine work or routine activities, hence all of these factors rated the academic staff under highly stressful professions profession **(Chang& Tseng, 2009 and Sherman 2012)**.

Within educational system, academic staff is a vital person, which runs and maintains the educational system of any society at different levels, ranging from school to university. Among these all levels the university teaching is considered as more sophisticated; which involve not only teaching of higher level courses to senior students but also requires engagement in research related activities. Hence subjecting academic staff to more work load, where they have to fulfill complex demands of academia **(Yusoff, et al., 2012)**.

The causes of stress can be environmental, social, biological or psychological factors that challenge an individual to change or adapt. For instance, environmental and social factors include the environment of a workplace and relationships with others whereas biological and

psychological factors encompass the nutritional status, emotional wellbeing and overall health levels of an individual **(Gazzaniga, et al., 2010)**.

Coping is the behavior that occurs after the person has had a chance to analyze the situation, take a reading of his or her emotions and to move to a closer or more distant position from the challenge. The goals of coping include the desire to maintain a sense of personal integrity and to achieve greater personal control over the environment. So that, modifying some aspects of the situation or the self in order to achieve a more adequate person environment fit **(National collaborating centre for mental health (NCCMH), 2010)**.

Dealing with problems or difficulties in a calm and appropriate manner is commonly referred to as coping. How academic staff copes with stress in the work environment affects the impact of stress on their psychological well-being and on physiological response. Coping behaviors or resources come in the form of physical, psychological, social, or material factors and help them overcome job-related stressors and achieve their valued outcomes with students **(Tytherleigh, et al., 2005; Gulwadi, 2006 and Sprenger, 2011)**.

Significance of the study

The work lives of nursing academic staff have many sources of stress, there are too many responsibilities including curriculum planning, teaching, accountability for student performance, classroom management and discipline, supervisory role, extracurricular activity as well as conducting a monitoring. These teaching and administrative responsibilities lead to increase workload among nursing academic staff and induce stress as well as maladaptive coping (e.g. poor quality of education, decrease the productivity and increase wasting time).

Identifying possible stressors can help nursing academic staff choose positive coping patterns rather than those negative that may be unhealthy towards other aspects of life. So the present study will conduct to identify causes of stress among nursing academic staff and their assistants as well as their positive and negative coping patterns for managing work stress in an effort to study sources of stress and coping patterns.

AIM OF THE STUDY

The aim of this study is to assess of work stress and coping patterns among nursing academic staff in faculty of nursing through:-

1. Identifying sources, level and manifestations of stress among nursing academic staff.
2. Identifying coping patterns used by nursing academic staff.

Research question

To achieve this study aim, the following research questions were developed:-

- What are the sources and manifestations of stress faced by nursing academic staff?
- What are coping patterns used by nursing academic staff?
- What are the relationships between variables?

SUBJECTS AND METHODS

Research Design

An exploratory Descriptive research design was adopted to fulfill the aim of the study and answer the research questions.

Research setting

This study was conducted at Faculty of Nursing Ain Shams University.

Subjects

A sample of convenience, (160) of academic nursing staff who are working at faculty of nursing (103) of them were included and agreed to participate in the study with different positions and departments (31) from Medical-Surgical Nursing, (21) from Maternally & Gynecological Nursing, (16) from Pediatric Nursing, (9) from Psychiatric/Mental Health Nursing, (10) from Community Health Nursing, and (16) from Nursing Administration department). It consisted of (11) professors, (12) assistant professors, (20) lecturers, (32) assistant lecturers, (28) demonstrators from both sexes, four (4) male members and (96) female members.

Tools of data collection

Interview questionnaire sheet: - (Appendix I)

This tool was developed by the investigator in a simple English language after reviewing related literatures the questionnaire used to assess work stress and coping patterns among nursing academic staff. It consisted of four parts as the following:

First part: Socio-demographic data:

It provides a descriptive data regarding nursing academic staff member's age and sex, marital status, department, years of experience, number of working hours per week, position and monthly income.

Second part: Sources of work related stress

It includes five categories that arise from 1-work environment (5items) such as lack of equipments and teaching- learning materials and lack of facilities for research, 2-work load (12items) such as too much work on extra curriculum activities and time consuming in meeting of committees, 3- colleagues and supervisors (10items) such as unfair assessment from superior and lack of participant in decision making, 4-students (10items) such as student's general low ability (careless and cooperative) and dealing with rude& impolite students and 5-family and society (6items) such as family problems as a result of workload and dealing with others nervously. Each item has responses of "low stress", "moderate stress" and "high stress".

Third part: stress manifestation

It was used to assess manifestation of stress among nursing academic staff and it includes four categories:

1-intellection symptoms (10 items) such as difficulty making decisions and poor judgment, 2-physical symptoms (14 items) such as headaches and sleep disturbances, 3-emotional symptoms (16 items) such as anger, resentment and apathy and 4-behavioral symptoms (15 items) such as eat more or less and increase use of tobacco, caffeine. Each item has responses of "rare", "sometime" and "often".

Fourth part: Coping patterns

It was used to assess positive and negative coping patterns that are used by the nursing academic staff to overcome or deal with work stress and it includes five categories: 1-seeking advice and support from others (6 items) such as seek advice/direction from others and talking about the problem with family members and friends , 2-suppression of feeling (5 items)

such as control (swallow) anger and suppress emotions and pull self from situation, 3-attempting to deal with the problematic situation (7 items) such as try to find solution to the problem and recall experience at work, 4-relaxation (13 items) such as listen to music and watch television, go to a movie and 5-setting limits of work (7 items) such as take rest time at work and work by schedule routine. Each item has responses of "rare", "sometime" and "often".

Pilot study test

A pilot study was carried out on 20 members of nursing academic staff from all academic categories and excluded from the study. They represent 10% of total sample to ensure clarity, applicability, relevance, feasibility of conduction of the study tools, and time needed for each tool. Based on the findings of the pilot study, necessary modifications and clarifications of some questions were done to have more applicable tools for data collection. Some questions and items were omitted, added and rephrased, and then the final forms were developed. Expert's advices were sought to ensure tool content validity and relevance.

Fieldwork

Data collection tool was developed in the period from April 2014 until August 2014. The study was carried out at the academic year of 2014/2015 from September, 2014 to December, 2014. Subjects of the study as mentioned were academic staff from different categorical position as Instructors, Assistant lecturers, Lecturers, Assistant professors, and professors and were from different specialties as medical surgical, pediatric, maternity, community, psychiatry and administration. They informed about the purpose of the study, then the subjects' oral consent was taken, they were informed about their rights to not participate in the study and that their answers will be taken confidentially. Every subject under study received self administered questionnaire

(four tools) and they gave appointment to deliver the tools as soon as they could for a maximum period two weeks.

Ethical consideration

An official permission was obtained from the scientific research ethical committee at Faculty of Nursing of Ain Shams University before conduction of the study. The aim of the study and the procedures were explained to the subjects to obtain their cooperation. Oral consent was obtained from members to ensure willingness to engage in the study. The researcher maintain on anonymity and confidentiality of subjects. Subjects are allowed to choose to participate or not participate, as well as they have the right to withdraw from a study at any time without penalty.

Limitations of the study

Most of the group under study was from female academic nursing staff, so the study needs to be replicated in a group of male academic nursing staff because the sources of work stress and coping patterns may differ among them.

Other limitations include the fact that the study was conducted in only a single, convenience sample; results are limited to the academic nursing staff at this Faculty and can't be generalized. The study needs to be replicated in other settings.

Administrative Design

After explanation of the study objectives, an official letter was addressed from the dean of the Faculty of Nursing requesting her cooperation and permission to conduct the study.

Validity and reliability

it was established by a panel or (jury) of five experts from psychiatric mental health nursing and administration nursing professors at Faculty of Nursing at Ain Shams University who reviewed the instruments for clarity, relevance, comprehensiveness, simplicity, understanding and applicability.

Statistical Design

The collected data were organized, categorized, tabulated and statistically analyzed using the statistical package for social science (SPSS) version (21) to assess the work stress and coping patterns among the academic staff under the study. Data were presented in tables and charts. **The statistical analysis included; percentage (%), the arithmetic mean (\bar{X}), standard deviation (SD) and Chi-square (X^2).**

Significance of result can be described as follow:

- Non significance (NS) difference obtained at $p > 0.05$
- Significance (S) difference obtained at $p \leq 0.05$
- Significance (S) difference obtained at $p \leq 0.001$.

Results

Table (1) clarifies that, the mean age of nursing academic staff was (33.89 + 9.063), more than three quarters of the studied subjects (76.7%) aged less than 40 years. In relation to gender, most of the studied subjects (96.1%) were females and approximately half of them (51.5%) were married. Regarding education, more than one third of studied subjects (41.7%) had doctorate degree, followed by master degree that represent (32%). Concerning position

more than half of studied subjects (58.3%) were demonstrators and assistant lectures. As regards to department, nearly one third of studied subjects (30.1%) were from medical surgical nursing department, followed by (20.4%) were from maternity & gynecological nursing department.

Figure (1) clarified that, about two thirds of studied subjects (65%) had moderate stress from work environment. However, most of studied subjects had their stress were ranged from moderate (39.8%) and high (50.5%) from workload. Furthermore, more than one third of studied subjects had high stress from family and colleagues and supervisors (41.7% & 34% respectively). As well as, more than one third of them suffered from moderate stress of students (33%).

Table (2) show that, more than one half of studied subjects appeared moderate level of emotional and behavioral symptoms of stress (58.3% & 53.4% respectively). One half of subject under study suffered from moderate level of physical symptoms of stress (47.6%). More than one third of subject under study suffered from moderate level of intellectual symptoms of stress (36.9%).

Figure (2) show that, approximately half of studied subjects appeared moderate level of emotional, behavioral and physical symptoms of stress (58.3%, 53.4% & 47.6% respectively).

Figure (3) shows that, more than half of studied subjects had moderate level of stress manifestation (57.3%).

Table (3) Show that, the majority of subject under study had positive coping about setting limit of work, seeking advice,

relaxation and suppression of feeling (86.4%, 84.5%, 78.6% & 79.6%) however, about two thirds of subject under study had negative coping with attempting to deal with problem.

Figure (4) Show that, the majority of subject under study had positive coping about setting limit of work, seeking advice (86.4%, 84.5% respectively).

Figure (5) show that, the majority of studied subjects had positive coping regarding sources of stress (73.8%).

Table (4) clarifies that, there is no significant relationship between socio-demographics characteristics of studied sample and their total level of stress manifestation ($p \geq 0.05$) except educational level, there is a significant relation ($\chi^2=11.57$ at $p \leq 0.05$).

Table (5) Show that, there is significant relation between total level of stress manifestation among academic staff and colleagues & supervisor, student, workload and family of stress ($\chi^2=20.38, 25.31$ & $9.928, 15.74$ at $p \leq 0.001$ & 0.05 respectively). Meanwhile, there is no significant relation between total level of stress manifestation and work environment among studied subjects ($\chi^2=7.43$ at $p \geq 0.05$).

Table (6) Show that, there is significant relation between academic staff coping patterns and their level of intelligent, physical, emotional and behavioral symptoms of stress as a component of manifestation of stress among studied subjects ($\chi^2=6.04, 6.45, 5.79$ & 13.23 at $p \leq 0.05$ & ≤ 0.001 respectively). In addition to, Indicated that, there is significant relation between total level of stress manifestation and total score of coping patterns among studied subjects ($\chi^2=8.141$ at $p \leq 0.05$).

Table (1): Distributions of socio-demographic characteristics among studied sample (n=103).

Items	No.	%
Age: <ul style="list-style-type: none"> • ≤ 40 • > 40 	<p>79</p> <p>24</p>	<p>76.7</p> <p>23.3</p>
Mean ± SD	33.89 + 9.063	
Sex: <ul style="list-style-type: none"> • Male • Female 	<p>4</p> <p>99</p>	<p>3.9</p> <p>96.1</p>
Marital status: <ul style="list-style-type: none"> • Single • Married • Divorced 	<p>46</p> <p>53</p> <p>4</p>	<p>44.7</p> <p>51.5</p> <p>3.9</p>
Education level: <ul style="list-style-type: none"> • Bachelor degree • Master degree • Doctorate degree 	<p>27</p> <p>33</p> <p>43</p>	<p>26.2</p> <p>32</p> <p>41.7</p>
Position: <ul style="list-style-type: none"> • Demonstrator • Assistant lecture • Lecture • Assistant professor • Professor 	<p>28</p> <p>32</p> <p>20</p> <p>12</p> <p>11</p>	<p>27.2</p> <p>31.1</p> <p>19.4</p> <p>11.7</p> <p>10.7</p>
Department: <ul style="list-style-type: none"> • Medical surgical • Pediatric • Maternal & gynecological • Psychiatric • Community • Administration 	<p>31</p> <p>16</p> <p>21</p> <p>9</p> <p>10</p> <p>16</p>	<p>30.1</p> <p>15.5</p> <p>20.4</p> <p>8.7</p> <p>9.7</p> <p>15.5</p>
Years of experience: <ul style="list-style-type: none"> • < 10 • 11-20 • > 20 	<p>68</p> <p>26</p> <p>9</p>	<p>66</p> <p>25.2</p> <p>8.7</p>
No of work hours/day: <ul style="list-style-type: none"> • < 6hrs • > 6hrs 	<p>40</p> <p>63</p>	<p>38.8</p> <p>61.2</p>
Monthly income: <ul style="list-style-type: none"> • Unsatisfactory • Satisfactory 	<p>63</p> <p>40</p>	<p>61.2</p> <p>38.8</p>

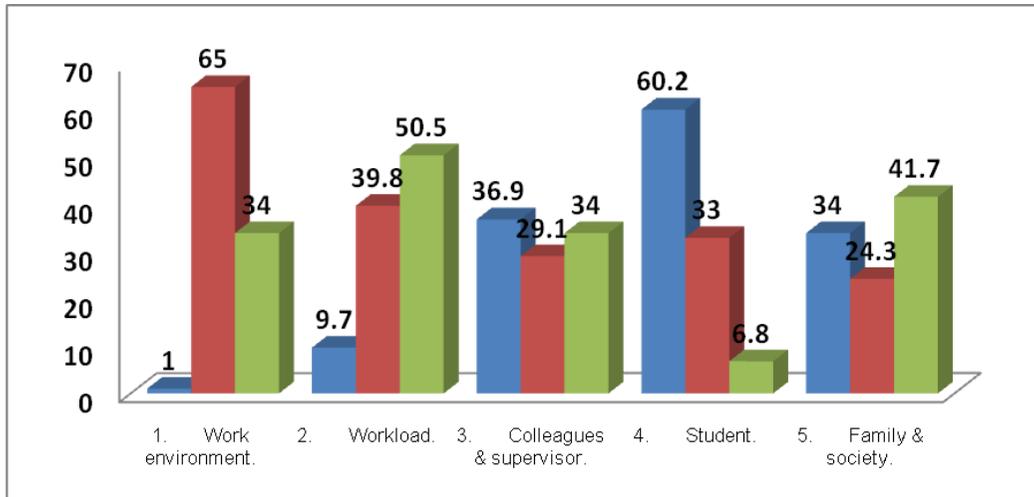
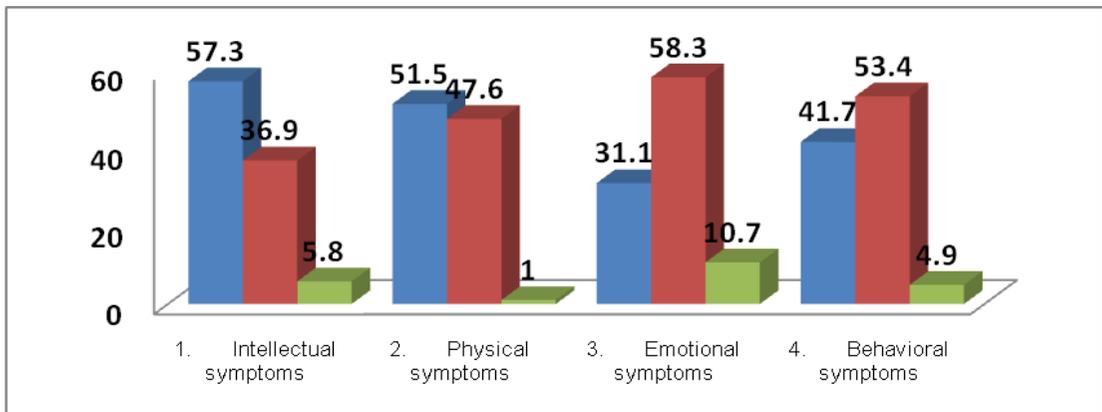


Figure (1): Total sources of stress among studied sample

Table (2): Distributions of levels of stress manifestation among studied sample (n=103).

symptoms	Low		Moderate		High	
	N	%	N	%	N	%
1. Intellectual symptoms	59	57.3	38	36.9	6	5.8
2. Physical symptoms	53	51.5	49	47.6	1	1
3. Emotional symptoms	32	31.1	60	58.3	11	10.7
4. Behavioral symptoms	43	41.7	55	53.4	5	4.9
Total level of stress manifestation	39	37.9	59	57.3	5	4.9

Figure (2): Distributions of level of stress manifestation among studied sample



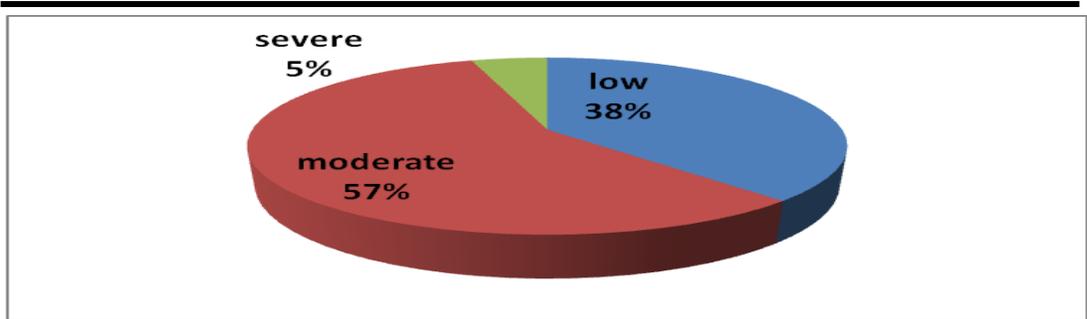


Figure (3): Total level of stress manifestation among studied sample

Table (3): Distributions of total score of coping patterns among studied sample (n=103).

Coping patterns	Positive		negative	
	N	%	N	%
1. Seeking advice and support from others	87	84.5	16	15.5
2. suppression of feeling	81	78.6	22	21.4
3. attempting to deal with problematic situation	31	30.1	72	69.9
4. relaxation	82	79.6	21	20.4
5. Setting limit of work	89	86.4	14	13.6
Total coping patterns	76	73.8	27	26.2

Figure (4): Distributions of coping patterns among studied sample

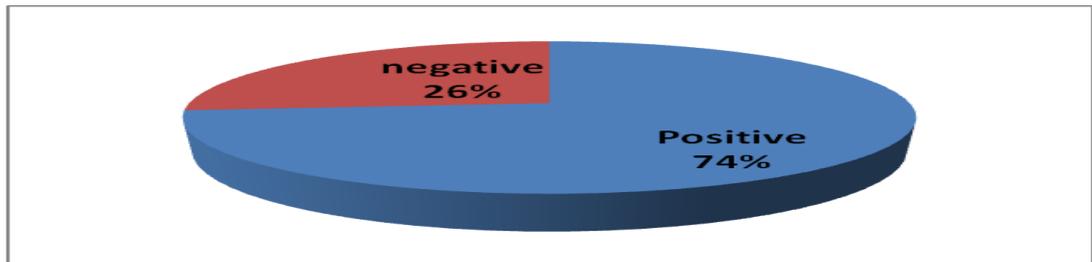
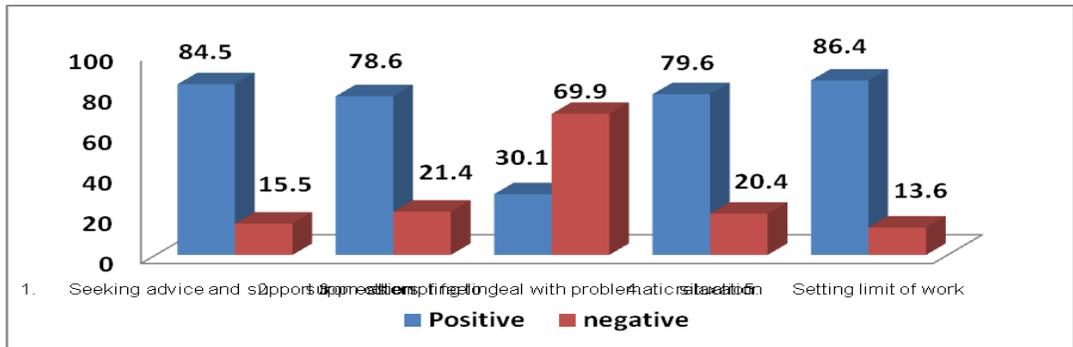


Figure (5): Total score of coping patterns among studied sample (n=103).

Table (4): Relationship between socio-demographic characteristic of studied sample and their total level of stress manifestation (n=103).

socio-demographic characteristic	Total level of stress manifestation.						Chi ²	P Value	significant
	Low		Moderate		Severe				
	No	%	No	%	No	%			
Age • ≤40 • >40	32 7	31.04 6.79	42 17	40.74 16.49	5 0	4.85 0	3.147	≥0.05	Non significant
Sex • male • female	2 37	1.94 35.89	2 57	1.94 55.29	0 5	0 4.85	0.402	≥0.05	Non significant
Marital status • single • married • divorced	16 21 2	15.52 20.37 1.94	28 29 2	27.16 18.13 1.94	2 3 0	1.94 2.91 0	0.805	≥0.05	Non significant
Educational level • bachelor degree • master degree • doctorate degree	14 6 19	13.58 5.82 18.43	11 24 24	10.67 23.28 23.28	2 3 0	1.94 2.91 0	11.570	≤0.05	Significant
Position • Demonstrator & assist. Lecture • Lecture • Assist. Professor & professor.	20 12 7	19.4 11.64 6.79	35 8 16	33.95 7.79 15.52	5 0 0	4.85 0 0	8.492	≥0.05	Non significant
Department • Medical surgical • Pediatric • Maternal& gynecological • Psychiatric • Community • administration	10 5 8 4 5 7	9.7 4.85 7.79 3.88 4.85 6.79	20 10 12 5 4 8	19.4 9.7 11.62 4.85 3.88 7.79	1 1 1 0 1 1	0.97 0.97 0.97 0 0.97 0.97	3.395	≥0.05	Non significant
Years of experience • <10 • 11-20 • >20	26 11 2	25.22 10.67 1.94	37 15 7	35.89 14.55 6.79	5 0 0	4.85 0 0	4.052	≥0.05	Non significant
No of work hours • <6 • >6	16 23	15.52 22.31	23 36	22.31 34.92	1 4	0.97 3.88	0.826	≥0.05	Non significant
Monthly income • unsatisfactory • satisfactory	28 11	27.16 10.67	33 26	32.01 25.22	2 3	1.94 2.91	3.478	≥0.05	Non significant

Table (5): Relationship between sources of stress among studied sample and total level of stress manifestation (n=103).

Sources of stress	Total level of stress manifestation.						Chi ²	P Value	significant
	Low		Moderate		Severe				
	No	%	No	%	No	%			
Work environment									
• Low	1	0.97	0	0	0	0	7.437	≥0.05	Non significant
• Moderate	28	27.16	38	36.86	1	0.97			
• severe	10	9.7	21	20.37	4	3.88			
Workload									
• Low	8	7.76	2	1.94	0	0	9.928	≤0.05	Significant
• Moderate	15	14.55	25	24.25	1	0.97			
• Severe	16	15.52	32	31.04	4	3.88			
Colleagues & supervisor									
• Low	12	11.64	26	25.22	0	0	20.38	≤0.001	Significant
• Moderate	6	5.82	23	22.31	1	0.97			
• severe	21	20.37	10	9.7	4	3.88			
Student									
• Low	33	32.01	29	28.13	0	0	25.31	≤0.001	Significant
• Moderate	5	4.85	26	25.22	3	2.91			
• severe	1	0.97	4	3.88	2	1.94			
Family and society									
• Low	21	20.37	14	13.58	0	0	15.74	≤0.05	Significant
• Moderate	10	9.7	14	13.58	1	0.97			
• severe	8	7.79	31	30.07	4	3.88			

Table (6): Relationship between level of stress manifestation and total coping patterns among studied sample (n=103).

level of stress manifestation	Total coping patterns.				Chi ²	P Value	Significant
	Positive		Negative				
	No	%	No	%			
Intellectual symptoms							
• Low							
• Moderate	52	50.44	7	6.79	6.040	≤0.05	Significant
• Severe	32	31.04	6	5.82			
	3	2.91	3	2.91			
physical symptoms							
• Low	47	45.59	6	5.82	6.454	≤0.05	Significant
• Moderate	40	38.8	9	8.73			
• Severe	0	0	1	0.97			
Emotional symptoms							
• Low	30	29.1	2	1.94	5.798	≤0.05	Significant
• Moderate	50	48.5	10	9.7			
• Severe	7	6.79	4	3.88			
Behavioral symptoms							
• Low	31	30.07	2	1.94	13.232	≤0.001	Significant
• Moderate	53	51.41	2	1.94			
• severe	3	2.91	12	11.6			
Total level of stress manifestation							
• Low	33	32.01	6	6.79	8.141	≤0.05	Significant
• Moderate	52	50.44	7	5.82			
• Severe	2	1.94	3	2.91			

Discussion

An exploratory Descriptive research design was adopted to fulfill the aim of the study and answer the research questions. Regarding **age**, the finding of the present study revealed that approximately three quarter of academic nursing staff were younger than 40 years old with mean age (33.89 + 9.063). This may be due to that three quarters of participants were demonstrators, assistant lectures and lectures who usually can obtain their master and doctorate degree before the age of 40 years. While only one quarter of participants was older than 40 years and they were assistant professors and professors. This result was in

agreement with **Mkumbo (2014)** who reported that the Tanzania academic staff age ranged between 23 and 69 years, with a mean age of 40.1 years (STD=9.1). The majority of the respondents aged (74.8%) years.

In relation to gender, it was found that most of the studied subjects were females and this may convey that nursing is a female profession till the year 2006 at Faculty of Nursing of Ain Shams University, after that the system was changed and the faculty started to accept male nursing students who graduated in the academic year 2010/2011 and started to be hire at the faculty of nursing since the year 2012. This result was in contrast with **Mkumbo (2014)** who reported

that more than two thirds of the respondents were males in a study that examine the prevalence of and factors associated with work stress in academia in Tanzania, and also in contrast with **Iqbal & Kokash (2011)** who stated that all respondents were males in a study that explore faculty perception of stress and coping strategies in a Saudi private university. But in agreement with **Safaria (2010)** who stated that more than half of participants were females in a study that examine job stress among Japanese academic staff.

According to marital status, it was found that half of studied subjects at Faculty of Nursing of Ain Shams University were married and this in agreement with **Iqbal & Kokash (2011)** who emphasized that majority of the respondents were married; and with **Nayak (2008)** who reported that most of males and about three quarter of females were married in a study that examine factors influencing stress and coping strategies among the degree college academic staff of Dharwad city.

In relation to work environment, the findings of this study show that more than two thirds of studied subjects suffered from moderate stress related to lack of equipments and teaching-learning materials. This may be due to lack of some equipment and advanced mannequins in the laboratory, insufficient number of books, small classroom size in relation to number of students especially classrooms that present in the extension building of the faculty, shortage of teaching rooms, unstable internet facilities in the faculty, lack of competent IT support staff, no photocopier available at the library of the faculty either for academic staffs or for students.

Regarding lack of facilities in the faculty, more than one third of studied subjects had moderate stress from lack of university facilities such as cafeteria and recreation activities. This may be because

there is no cafeteria available at the faculty or near the faculty for either academic staff or students in spite that they stay at the faculty for more than 7 hours. Also, lack of recreational activities such as trips, parties or social day seem to cause stress for one third of the studied subjects, this can be result from lack of fund from university or faculty to support these activities.

The finding of this study revealed that more than half of studied subjects were suffered from severe stress regarding absence of silent room for working such as room crowding. This may be due to that most of faculty rooms are crowded with staff, for example, at medical surgical nursing department there were fifteen members in one room that measure 3 meter in 4 meters and there are a limited space between offices, in addition to that every two or three members are shared in one office and no space to meet any student at the room for any problem, inquire, or guidance and consultation, in addition that all students' files are kept in cupboard in the same room. So it was considered stressful for all academic nursing staff to do their administrative work in such crowded environment.

As regard to stress from colleagues and supervisors, The present study revealed that approximately half of academic staff had severe stress from un realistic duties deadline uncooperative colleagues. This may be due to the presence of tasks and duties that require teamwork. Lack of cooperation between members usually creates strain situation and increase interpersonal conflict between them, and lead to delays in work completion or even neglect it. Sometimes these situations have the other committed members to complete the work without assistant of those who are uncooperative, which create severe stress on them.

Concerning stress from family and society, the study indicated that more than

one third of studied subjects had moderate stress from limited social life and family problems, and dealing with others nervously as result of workload. This may be due to the dual roles of female academic staffs as wives and mothers as well as lecturers. According to culture in Egypt, the female academic staff goes home to work and attend domestic chores and care for the sons, in addition to stress from duties and tasks that are brought from work to be completed at home. All these stressors limit the social life and create family problems for female academic staff who pays less attention to home, husband and sons and making them more nervous, anxious, and highly intolerant to everyone.

In relation to intellectual symptoms, the present study showed that more than two thirds of studied subjects suffered from inability to concentrate, had problems with memory and difficulty making decision. In addition to, more than one third of studied subjects sometimes suffered from thoughts escaping, loss of objectivity, confusion and inability to slowdown thought process, poor judgment, and repetitive thoughts. This may be due to heavy workload and the multiple roles that academic staff occupied in the faculty.

Concerning physical symptoms, the present study showed that about two thirds of studied subjects suffered from fatigue. However, sleep disturbances was the most prevailed physical symptoms among studied subjects. Most of them their symptoms were ranged from occasionally and often from headache. In addition to, nearly half of them sometimes suffered from high blood pressure and weight gain or loss. About one third of them often had suffered from muscle tension. Most of them had symptoms from digestive disorder. Furthermore, more than one third of them had symptoms of immune system suppression, hair loss and skin problems.

As regard to coping patterns used by academic staff, the present study revealed that, more than one half of studied subjects

had positive coping about seeking advice and seeking emotional support from other. In addition, more than one third of them had positive coping about discuss the problem to a professional association, seeking psychological help, attending courses to learn new skills and talking about the problem with family members and friends.

In relation to suppression of feeling, the findings of the study showed that, the majority of subjects studied can control anger and suppress emotions. The most of them were sometime pulling self from situation. However, about one half of them had positive coping by keep feeling and don't express and using negative self talk. More than one third of them were sometime avoiding people and sitting alone.

As regard to attempting to deal with problematic situation, the study showed that, more than two thirds of studied subjects had positive coping about recalling experience and trying to find appropriate solutions. About one half of them are often looking on bright side of things and trying to anticipate worst outcome. More than one half of subject under study had positive coping about trying to look of situation and accepting the situation. Furthermore, most of them have positive coping ranged from sometime and often about interacting with the problem realistically.

Concerning relationship between socio-demographic data and level of stress manifestation among studied nursing academic staff, this study showed that, there is no significant relation between total level of stress and age, sex, marital status, position, department, years of experience, number of working hours and monthly income among studied subjects. This may be explained by that total level of stress manifestation don't affected by socio-demographic data of academic staff members, and all of them experienced the same total level of stress manifestation regardless of their socio-demographic data.

Conclusion

The present study clarified that, half of studied subjects of academic staff at faculty of nursing suffer from high stress from workload followed by family and society stressors. Also, more than two thirds of the studied subjects suffer from moderate stress from work environment followed by workload and from students.

Two thirds of studied subjects of academic staff had symptoms of stress which may be intellectual, physical, behavioral and emotional. But the most prevalent one among them was the emotional symptoms.

Two thirds of studied subjects had moderate level of stress manifestation.

The majority of studied subjects had positive coping patterns as setting limits of work, seeking advice and support from others, relaxation & suppression of feeling regarding different sources of stress.

Recommendations

For academic staff

Develop stress management programs and coping strategies that can be made within the faculty of nursing that will reduce work-related stress and increase effectively job satisfaction.

The Faculty may strengthen its psychological counseling unit to manage some of the effects stress brings on academic staff members.

For research

This research has been limited to only identifying sources and coping patterns of stress for academic staff. There is a need to further qualitative research to understand why these sources of stress affect teachers

and why they choose particular coping patterns as a way of handling stress in order to allow for adaptive strategies to be used to help academic staff address and cope with stress.

Future researches are needed to gain further insights into the effect of frequently occurring job related stressors over an extended period of time on academic staff.

The study relied on subjective assessment. Future research should include more objective measures of workload and stress at work such as the number of teaching hours, mentorship, students, or subjects taught.

Further researches may be beneficial to examine the amount of time academic staff are actually performing non-teaching duties throughout the faculty day in order to see why these duties are considered so stressful.

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