



## Challenge-related stress and felt challenge: Predictors of turnover and psychological health in aged care nurses



Fengsong Gao (BEng, MSW, PhD Candidate)<sup>a,\*</sup>,  
 Peter Newcombe (PhD, BA (Hons), BEd, Associate Professor)<sup>b</sup>,  
 Cheryl Tilse (PhD, BSW (Hons), BA, Associate Professor)<sup>a</sup>,  
 Jill Wilson (PhD, MSW, UnitingCare Professor of Social Policy and Research)<sup>a</sup>,  
 Anthony Tuckett (PhD, MA, RN, Program Director, Master of Nursing)<sup>a</sup>

<sup>a</sup> School of Nursing, Midwifery and Social Work, The University of Queensland, St. Lucia, QLD 4072, Australia

<sup>b</sup> School of Psychology, The University of Queensland, St. Lucia, QLD 4072, Australia

### ARTICLE INFO

#### Article history:

Received 17 December 2015

Received in revised form 6 July 2016

Accepted 31 July 2016

#### Keywords:

Nurse turnover  
 Challenge-related stress  
 Psychological health  
 Aged care workforce  
 Quantitative analysis

### ABSTRACT

**Aims:** To examine the differential impacts of challenge-related stress (i.e. stress derived from job demands with potential for personal gains) and “perceptions” of job challenges (i.e. felt challenge) on turnover and psychological health in aged care nurses, and to explore whether coping resources were related to challenge-related stress.

**Background:** In residential aged care, nurses undertake a challenging job and experience poor psychological health and high turnover. Understanding the possible antecedents of turnover and psychological health in aged care nurses will assist in developing appropriate interventions.

**Methods:** This research used existing survey data derived from the Nurses and Midwives e-cohort Study. The sample included 239 Australian residential aged care nurses. Hierarchical logistic and linear regression analyses were used to test five hypotheses.

**Results:** A greater sense of job challenges appeared to reduce turnover. A higher level of challenge-related stress predicted poorer psychological health. Supervisor support was negatively associated with challenge-related stress.

**Implications:** Findings suggest that, to reduce aged care nurse turnover, managers might consider assigning appropriate responsibilities and workload based on the needs of individual nurses. To improve nurses' psychological health, managers might consider increasing work-related coping resources such as supervisor support, co-worker support and opportunities for skill utilization, skill development and decision making. Support from immediate supervisors is the most effective intervention to help nurses cope with challenge-related stress.

**Conclusions:** Although the job design of aged care nursing should promote positive challenging aspects of the job, targeted interventions are required to reduce the stress associated with the job challenges.

© 2016 Australian College of Nursing Ltd. Published by Elsevier Ltd.

## 1. Introduction

With global population ageing and increased longevity, all countries experience increasing needs for residential aged care (RAC, also known as long-term care or nursing home care) services (Scheil-Adlung, 2015). Between 2010 and 2050, the demand for RAC

nurses is projected to more than double in the United States and Canada, and nearly triple in Australia and New Zealand (Colombo, Llana-Nozal, Mercier, & Tjadens, 2011). However, many RAC facilities struggle with staff shortage as a consequence of high turnover and poor psychological health of RAC nurses (Chenoweth, Jeon, Merlyn, & Brodaty, 2010).

Poor psychological health contributes to frequent sick leave and absenteeism among nurses, leading to insufficient staffing levels, increased organizational costs and poor quality of care (Andrews & Wan, 2009; Oyama & Fukahori, 2015). The shortage and high turnover of nurses result in inadequate nurse-to-resident ratios,

\* Corresponding author.

E-mail addresses: [annie.gao@uqconnect.edu.au](mailto:annie.gao@uqconnect.edu.au) (F. Gao), [newcw@psy.uq.edu.au](mailto:newcw@psy.uq.edu.au) (P. Newcombe), [c.tilse@uq.edu.au](mailto:c.tilse@uq.edu.au) (C. Tilse), [wilsonj@uq.edu.au](mailto:wilsonj@uq.edu.au) (J. Wilson), [a.tuckett@uq.edu.au](mailto:a.tuckett@uq.edu.au) (A. Tuckett).

work overload, recurring recruitment and low productivity of nurses (Spilsbury, Hewitt, Stirk, & Bowman, 2011). Consequently, instability in the nurse workforce may negatively impact on health and safety of nurses, compromise quality of care, and increase financial costs (Hayes et al., 2006; Roche, Duffield, Homer, Buchan, & Dimitrelis, 2015). Given these deleterious effects, it is pivotal to examine possible antecedents of turnover and psychological health among RAC nurses.

Over the last three decades, theoretical and empirical work has linked employee turnover and psychological health to challenge-related stress (i.e. stress derived from challenging job demands with potential for personal gains) (Podsakoff, LePine, & LePine, 2007). In addition to the assessment of stressfulness, an emerging trend is toward investigating the potential impact of “perceptions” of job challenges (i.e. felt challenge) on employee turnover and psychological health (Webster, Beehr, & Love, 2011). Exploring the different influences of challenge-related stress and felt challenge among RAC nurses will assist service providers to improve job designs and to develop interventions to reduce nurse turnover and improve their psychological health.

This is one of the first studies to examine the differential impacts of challenge-related stress and felt challenge on actual turnover and psychological health, and to explore causality between actual turnover and its antecedents in RAC nurses. Furthermore, the present study sheds light on the coping resources that may help RAC nurses reduce their level of stress related to job challenges, an under-explored area. Given that RAC nursing in many developed countries share similarities regarding turnover, psychological health and occupational stress (Chenoweth et al., 2010), findings from this Australian quantitative study may inform RAC nursing management in other developed countries.

## 2. Residential aged care nursing job characteristics

In Australia, RAC facilities accommodate older people who are unable to live at home independently. Over three-quarters of permanent RAC residents have been assessed as requiring intensive skilled nursing care (Australian Institute of Health and Welfare, 2013). The RAC facilities are owned and operated by not-for-profit organizations, private organizations and local and state governments (Australian Institute of Health and Welfare, 2014). The care costs, covered by both government funding and means-tested user contributions, are strictly regulated by the Australian Government (Department of Health and Ageing, 2012). Based on a review of aged care coverage deficits in 46 countries, Scheil-Adlung (2015) concluded that RAC facilities are underfunded in most countries, including Australia. Within the highly regulated limited budget, service providers are required to deliver optimal person centre care. This creates excessive stress for RAC nurses.

In RAC facilities, registered nurses assume high levels of responsibility, including skilled nursing care, coordinating health care professionals to meet residents' health care needs, supervising nursing assistants and other workers (e.g. kitchen staff), assessing the care needs of residents, interacting with residents' families, and preparing documentation (Gao, Newcombe, Tilse, Wilson, & Tuckett, 2014). Aged care work requires high levels of competence (e.g. specific knowledge of dementia), commitment and confidence in working with older adults with complex needs in a physically and emotionally demanding environment (Chenoweth et al., 2010; Eley, Buikstra, Plank, Hegney, & Parker, 2007; Elliott, Scott, Stirling, Martin, & Robinson, 2012). Due to inadequate resources and staffing levels, RAC nurses experience constant time pressures and a heavy workload (King et al., 2012). RAC nursing appears to be a challenging job. Working in this challenging environment, RAC nurses are at risk of poor psychological health and frequent turnover

(Chenoweth et al., 2010). It is, therefore, important to understand how job challenge related variables are associated with psychological health and turnover of RAC nurses.

## 3. Theories, empirical evidence and hypotheses proposed

The current study was informed by the Job Demand-Control-Support (JDCS) model (Johnson & Hall, 1988; Karasek, 1979) and the Transactional Model of Stress and Coping (Lazarus & Folkman, 1984). Instead of testing the two models, the current research focused on shedding light on inconsistent findings from previous research related to predictors of turnover and psychological health of employees. This section first introduces the two models, then, briefly reviews empirical evidence and gaps in existing research. Thereafter, five hypotheses were proposed based on the theories and empirical evidence.

### 3.1. Theories

The JDCS model proposes that employees' job demands, along with their coping resources, are associated with a range of psychological health problems and behaviour outcomes (e.g. turnover) (Johnson & Hall, 1988; Karasek, 1979). Coping resources include skill discretion (i.e. the possibility to utilize and develop skill sets), decision authority (i.e. the chance to participate in organizational decision making process) and social and emotional support provided by co-workers and supervisors (Johnson & Hall, 1988; Karasek, 1979). The JDCS model has been empirically tested with nurses from a wide range of health care settings in many countries (e.g. Chen, Brown, Bowers, & Chang, 2015; Peterson, McGillis Hall, O'Brien-Pallas, & Cockerill, 2011), including Australian aged care nurses (e.g. Rodwell & Martin, 2013; Rodwell, Noblet, Demir, & Steane, 2009).

The Transactional Model of Stress and Coping proposes that an individual's responses to stressful events involve their perceptions of the stressors (i.e. demands) and evaluations of available resources to cope with those stressors (Lazarus & Folkman, 1984). If an individual's perceptions of demands exceed their coping resources, adverse effects, such as negative health and work outcomes, may occur (Lazarus & Folkman, 1984). Health problems and work outcomes (e.g. turnover) for an employee are not only a function of the level of stress the employee has experienced, but also a function of how the employee feels about their job demands and coping resources.

### 3.2. Empirical evidence and hypotheses proposed

The connection between job demands (also known as job stressors) and psychological health proposed by the JDCS model has been consistently found in the past empirical research (e.g. Adriaenssens, De Gucht, & Maes, 2015; Adriaenssens, De Gucht, Van Der Doef, & Maes, 2011; Rodwell & Martin, 2013).

However, the relationship between job stressors and turnover remains inconclusive. A meta-analysis conducted by Podsakoff et al. (2007) revealed that two dimensions of job stressors affect turnover in an opposite direction. These two dimensions are challenge-related stress and hindrance-related stress. According to Cavanaugh, Boswell, Roehling, and Boudreau (2000), challenge-related stress derives from challenging job demands such as levels of responsibility, time pressures and heavy workload, and these facilitate personal growth; in contrast, hindrance-related stress stems from job demands such as organizational politics and job insecurity, and these impede employees from accomplishing work tasks and achieving personal goals.

In contrast to hindrance-related stress, challenge-related stress has been shown to be negatively associated with turnover and

Download English Version:

<https://daneshyari.com/en/article/5567688>

Download Persian Version:

<https://daneshyari.com/article/5567688>

[Daneshyari.com](https://daneshyari.com)