

**INDIVIDUAL FACTORS AFFECTING PERSONAL COPING STRATEGIES ON STRESS  
MANAGEMENT AMONG NURSES IN LUWERO HOSPITAL LUWERO DISTRICT.  
A CROSS-SECTIONAL STUDY.**

*Ruth Biyinzika\*, Patrick Ssendugga, Grace Denise Akwang  
Kampala University School of Nursing and Health Sciences*

Page | 1

**Abstract  
Background**

Stress is a state of worry or mental tension caused by a difficult situation that prompts a person to address challenges and threats in his or her life. The aim of the study is to Individual factors affecting personal coping strategies for stress management among nurses in the Luwero Hospital Luwero district.

**Methodology**

A cross-sectional design approach that utilized a quantitative collection method. The study targeted 35 nurses working at Luwero Hospital, a sample of 32 respondents was needed for the study to be a success.

**Results**

24(75%) of the respondents were females 8(25%) were males 32(100.0%) had never heard of coping strategies used in stress management. 17(53.1%) got information from internet, 10(31.2%) from worker mates, 4(12.5%) from counselors, and only 1(3.2%) got the information from television. indicate that 29(91%) of the respondents accepted that high levels of stress can lead to diseases whereas 3(9%) of the respondents said no. 25(86.2%) of the respondents said stress causes hypertension, 2(6.9%) said that it caused either anxiety or depression. 1(53.1%) of the respondents said that they provide nursing care equally to all patients, 10(31.3%) said they would respect patient's decisions and 5(15.6%) said they would value patients. This is because the nurses knew justice as a professional ethic and used 30(94%) of the respondents had ever experienced and reconciled from stress while 2(6%) never experienced and reconciled from stress. 17(53.1%) of the respondents said they visited their counselor, 10(31.3%) said they prayed and 5(15.6%) said they used drugs and alcohol.

**Conclusion**

The majority of the nurses at Luwero Hospital had sufficient knowledge about stress but lacked stress-coping measures.

**Recommendation**

The government should recruit more mental health professionals to help staff and patients in dealing with stress management.

*Keywords: Stress management, Depression, Luwero hospital.*

*Submitted: 2024-05-22 Accepted: 2024-07-29*

*Corresponding Author: Ruth Biyinzika\**

*Email: [biyinzikaruth2@gmail.com](mailto:biyinzikaruth2@gmail.com)*

*Kampala University School of Nursing and Health Sciences*

**Background of the study**

Stress is a state of worry or mental tension caused by a difficult situation that prompts a person to address challenges and threats in his or her life. Coping with stress in the demanding field of nursing requires a tailored approach to address the unique challenges these professionals encounter. Firstly, fostering a supportive work environment, implementing stress management programs that can equip nurses with stress management tools, encouraging regular breaks, and ensuring manageable workloads. Acknowledging the emotional aspects of patient care and promoting a culture that values self-care contributes to a holistic approach, ensuring that nurses are better equipped to cope with the challenges they face in their crucial profession

Coping is the act of dealing with emotions or behaviors to reduce the physical or psychological effects of excess stress as it deals with the perceptual, cognitive, or behavioral responses used to manage, avoid, or control situations that could be regarded as difficult Coping hence individual stabilization through psychosocial adaptation during stressful events(Folkman, 2020). Also, coping strategies can be understood as the behavioral component of the process and can be defined as the actual effort made in the attempt to render a perceived stressor or conflict more tolerable and to minimize the distress induced by the situation (Claude-Helene & Mayer 2020). Notably, the European countries it is indicated that 84% of the nurses were chronically stressed and 49% exhibited unhealthy behavioral tendencies at the workplace which was

responsible for increased nurse turnovers in the hospitals as well as increased patient mishandling behaviors, especially among the elderly (Heuel et al., 2022). Furthermore, the prevalence of stress among nurses in Poland and Belarus was 73.6% and 95.6% respectively with the highest cause of stress being infections contracted within health facilities, however, nurses' stress coping mechanism was very poor at 4.8% which was responsible for a sedentary lifestyle and bizarre behaviors among them hence poor service provision (Kowalczyk et al., 2022).

## Methodology

### Study Design

The study employed a descriptive cross-sectional design approach which utilized the quantitative collection method. The quantitative data collection method was used to enable the researcher to collect numerical data and perform quantitative analysis using statistical procedures. Data for the study was collected once in time without any intervention or follow-up.

### Study setting

The research study was conducted at Luwero Hospital. The hospital is located in the north-central region, Luwero district in Bamunanika village, it is a government hospital it is also commonly known as Luwero hub. It is the main health facility in the district with a 150-bed capacity with an inpatient department, outpatient department, maternity, operating theatre, dental, and other private clinics. The hospital serves areas like Bamunanika, Bbuto, Nampunge, and Kiteme villages and districts like Nakasongora, Kiboga, and Kapeeka. The economic activities in the area include agriculture, business transport services plus hospitality services. The facility was chosen because the hospital had a good number of nurses who were prone to stress hence the researcher got an adequate number of respondents to fulfill the objectives of the study hence quality data.

### Study Population

The study targeted 35 nurses working at Luwero Hospital.

### Sample size determination.

The sample size was calculated using the formula developed by Kish and Leslie (1965) given by;  $n = \frac{Z^2 p q}{d^2}$ , or  $n = \frac{Z^2 p q}{d^2}$   
Where;

$n$  was the sample size required

$p$  was the estimated lifestyle modifications

$p = 2.1\%$  which was equivalent to 0.021 (As deemed successful by Komuhangi, 2020)

$d = 0.05$  was the acceptable error of estimation at a 95% confidence interval

$Z$  was the confidence interval at 95% = 1.96

$q = 1 - p$

Therefore

$n = \frac{(1.96^2 \times 0.021 \times 0.979)}{0.05^2} = 32$  respondents

Therefore, a sample of 32 respondents was needed for the study to be a success.

### Sampling procedure

A simple random sampling procedure was used. This can be defined as a sampling procedure that gives each person in the study population a chance to be selected. On each day of data collection, papers labeled "YES" or "NO" were put in a box and shaken. The eligible respondent was a nurse at Luwero Hospital who picked the paper with the Label "YES" and he or she was enrolled in the study. This procedure was considered because of its ease and accuracy of representation; selecting subjects completely at random from the larger population produces a sample that is representative of the group being studied. This was repeated until the desired sample size of 30 nurses was achieved during the three days of data collection.

### Inclusion criteria

The study included all nurses who were present at Luwero Hospital who were available and willing to consent to participate in the study.

### Exclusion criteria

The study excluded midwives, nurses who were on leave, and other nurses who were available but critically sick or were not willing to take part in the study.

### Definition of variables

Variables are challenges or characteristics of interest that a researcher would like to handle in the research.

### Independent variables.

The independent variables of the study were; individual factors and health facility-related factors affecting personal coping strategies on stress management among nurses.

### Dependent variables

The dependent variable of the study was stress management among nurses.

### Research Instruments

The data was collected from respondents using a questionnaire with both open and closed-ended questions written in simple English language designed to assess factors affecting personal coping strategies on stress management among nurses at Luwero hospital which were set in sections according to the specific objectives. The questions had sections on Individual factors and Socioeconomic factors affecting personal coping strategies on stress management among nurses, to exhaust the information from respondents. The instrument was chosen because it was time-saving and respondents were able to read and write.

### Data collection procedures

The questionnaires were self-administered by the researcher to each respondent after they had consented and were filled immediately. The questionnaires were then collected and checked there and then for

completeness to avoid unanswered questions that would spoil the collected data.

**Data management**

In the process of data collection, each questionnaire after being filled, was checked for completeness and accuracy before leaving the area of study. Filled questionnaires were kept properly in a locker for confidentiality and safety.

**Data analysis**

The data collected was analyzed by entering it into the computer using Microsoft Office Word and Microsoft Excel where data was presented in the form of tables, graphs, pie charts, and figures.

**Ethical considerations**

The researcher obtained a formal letter from the school administration which was used to obtain permission and

consent from the administrator of Luwero Hospital who was told the reason for the study and in turn permitted the study to be carried out. Verbal permission and consent were sought from respondents where the main purpose of the study was clearly explained to them and they were assured of confidentiality as they used serial numbers instead of names to have their cooperation and trust. They were also told that they were willing to withdraw from a study at any moment.

**Results**

**Demographic characteristics of patients**

This study involved a total of 32 nurses working at Luwero Hospital in Luwero district and a response rate of 100% was achieved. The study findings were presented in tables, bar graphs, and pie charts with appropriate explanations given below.

**Table 1: shows the age of the respondents and their working experience (n = 32)**

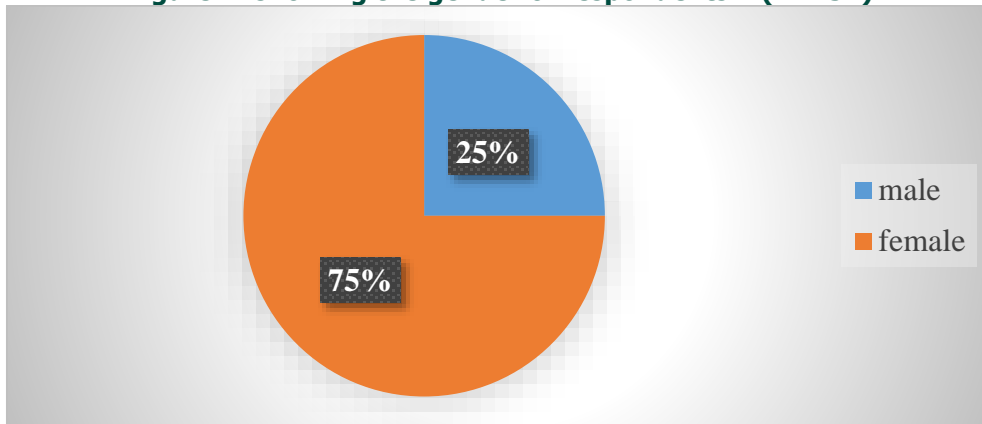
Category	Variable	Frequency (f)	Percentage (%)
Age (years)	18-23	01	3.1
	24-29	16	50.0
	30-35	10	31.3
	36 years and above	05	15.6
Working experience (years)	1-2	1.0	100.0
	2-4	4.0	12.5
	5-7	8.0	25.0
	More than 7	19.0	59.4
	<b>Total</b>	<b>32.0</b>	<b>100.0</b>

*(Source: Primary Data, 2024.)*

Table 1, show that half of respondents 16(50.0%) were aged between 24-29 years, 10(31.3%) had 30-35 years, 5(15.6%) had 36 years and above while only 1(3.1%) of were aged between 18-23 years. This could be attributed to the need for workers who are energetic and able to cope with the stress thus opting for those above 24 years. Majority of respondents 19(59.4%) had a working experience of more than 7 years, 8(25.0%) 5-7 years,

4(12.5%) 2-4 years and 1(3.1%) worked for only 1-2 years. This might be because the facility employed nurses with a reasonable level of experience such could explain the stress they encountered and managed during their course of work.

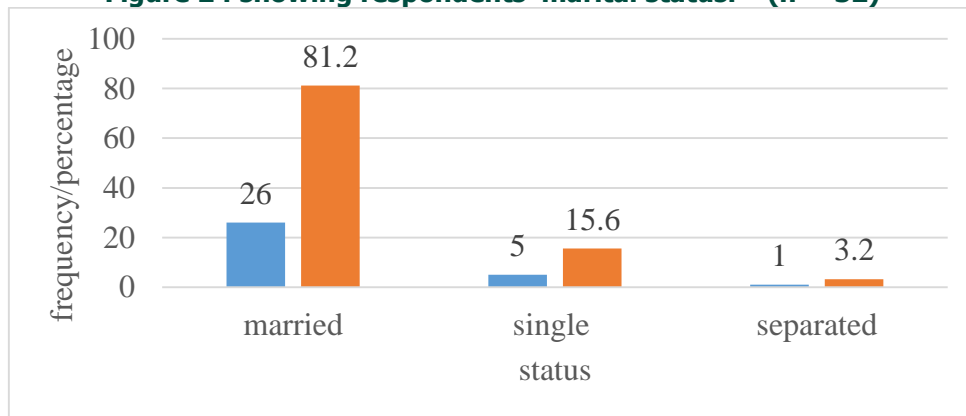
**Figure 1: showing the gender of respondents. (n = 32)**



(Source: Primary Data, 2024.)

Figure 1 shows 24(75%) of the respondents were females and 8(25%) were males. This is because females dominate the nursing profession and could have more stress coping abilities than their counterparts

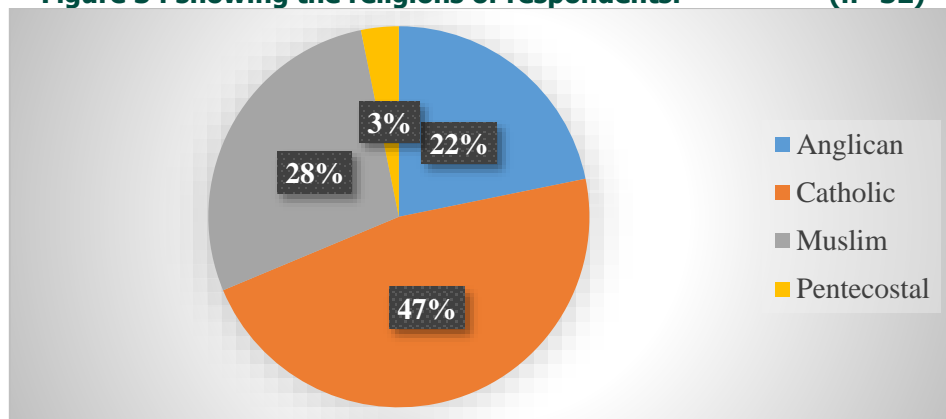
**Figure 2 : showing respondents' marital status. (n = 32)**



(Source: Primary Data, 2024.)

Figure 2 indicates that 26(81.2%) of the respondents were married, 5(15.6%) of the respondents were single and only 1(3.2%) was separated. This is because the majority of the respondents were in the required and lawful age for marriage, also they had better stress management strategies

**Figure 3 : showing the religions of respondents. (n=32)**



(Source: Primary Data, 2024.)

Figure 3 show that 15(47%) of the respondents were Catholics, 9(28.0%) were Muslims, 7(22.0%) were Anglicans and 1(3.2%) was a Pentecostal. This could be related to the area being Catholic dominated

**Table 1 shows the departments from which the respondents worked (n = 32)**

Department	Frequency (f)	Percentage (%)
Outpatient	09	28.1
Inpatient	23	71.9
<b>Total</b>	<b>32</b>	<b>100.0</b>

*(Source: Primary Data, 2024.)*

Table 2, shows that 23(71.9%) of the respondents worked in the inpatient department while 9(28.1%) worked in the outpatient department. This could be because the inpatient department has many patients who are very ill hence a higher ratio of nurses.

### Individual factors affecting personal coping strategies on stress management among nurses.

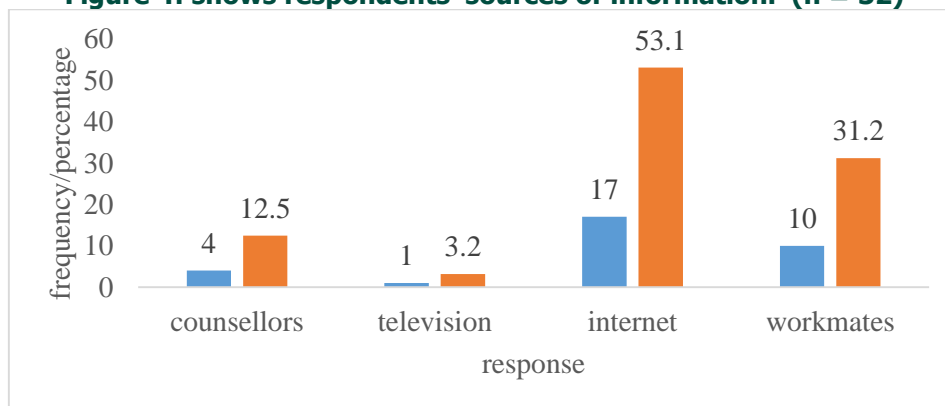
**Table 2 shows responses to whether the respondents had ever had coping strategies used in stress management. (n = 32)**

Response	Frequency (f)	Percentage (%)
Yes	32	100.0
No	00	0.0
<b>Total</b>	<b>32</b>	<b>100.0</b>

*(Source: Primary Data, 2024.)*

From Table 3, all of the respondents 32(100.0%) had ever heard of coping strategies used in stress management.

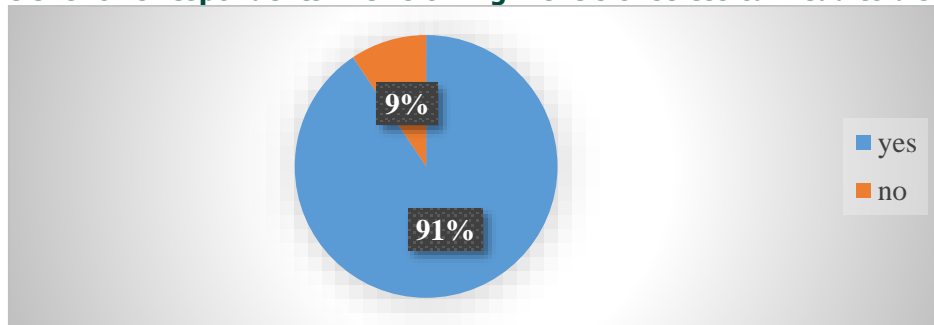
**Figure 4: shows respondents' sources of information. (n = 32)**



*(Source: Primary Data, 2024.)*

Figure 4, show that 17(53.1%) got information from internet, 10(31.2%) from worker mates, 4(12.5%) from counselors, and only 1(3.2%) got the information from television.

**Figure 5: shows respondents' views on high levels of stress can lead to diseases.**



(Source: Primary Data, 2024.)

Figure 5, indicates that 29(91%) of the respondents accepted that high levels of stress can lead to diseases whereas 3(9%) of the respondents said no.

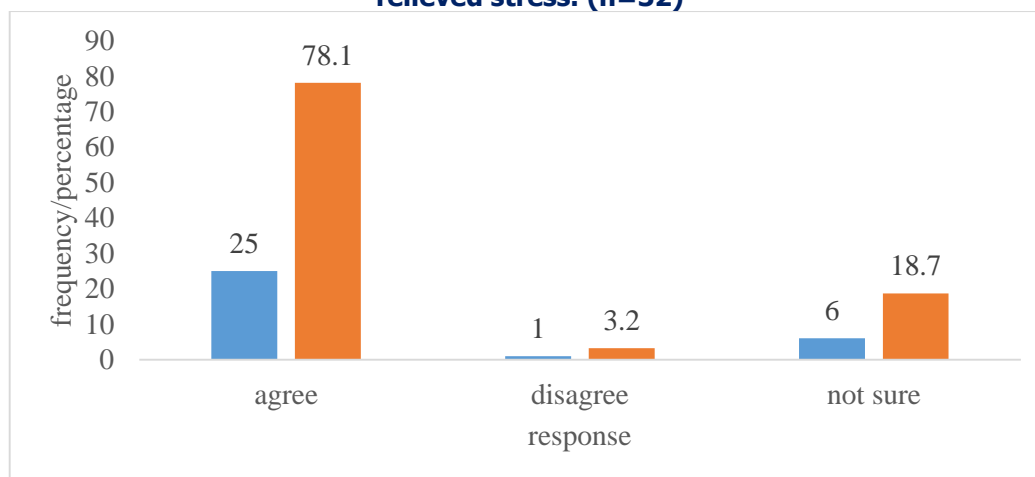
**Table 3 shows the types of diseases caused by stress according to the respondents (n=32)**

Disease	Frequency (f)	Percentage (%)
Depression	02	6.9
Anxiety	02	6.9
Hypertension	25	86.2
<b>Total</b>	<b>29</b>	<b>100.2</b>

(Source: Primary Data, 2024.)

Table 4, shows that 25(86.2%) of the respondents said stress causes hypertension, and 2(6.9%) said that it caused either anxiety or depression. This is because nurses knew that high stress levels could lead to cardiovascular diseases mainly hypertension.

**Figure 6: shows whether the respondents agreed that a problem-focused coping strategy relieved stress. (n=32)**



(Source: Primary Data, 2024.)

From Figure 6, 25(78.1%) agreed that problem-focused coping strategy helped to relieve stress while 6(18.7%) were not sure, and only 1(3.2%) disagreed with it. This is because the respondents' knowledge about the method and finding it easy to apply and effective

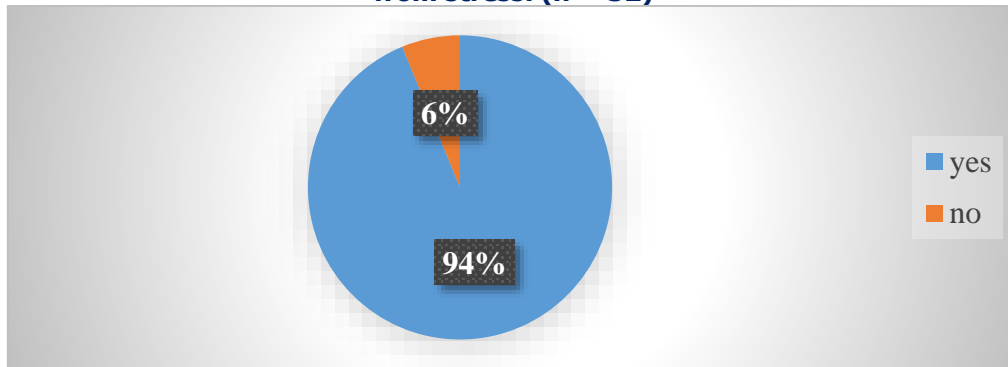
**Table 4 shows the professional ethics that the respondents followed when providing nursing care (n= 32)**

Response	Frequency (f)	Percentage (%)
Valuing patients	5	15.6
Providing nursing care to all patients equally	17	53.1
Respecting patient’s decisions	10	31.3
<b>Total</b>	<b>32</b>	<b>100.0</b>

*(Source: Primary Data, 2024.)*

Table 5, show that 1(53.1%) of the respondents said that they provide nursing care equally to all patients, 10(31.3%) said they would respect patient’s decisions and 5(15.6%) said they would value patients. This is because the nurses knew justice as a professional ethic and used it when offering services to patients in the hospital

**Figure 7: shows responses to whether respondents had ever experienced and reconciled from stress. (n = 32)**



*(Source: Primary Data, 2024.)*

Figure 7, indicates that 30(94%) of the respondents had ever experienced and reconciled from stress while 2(6%) never experienced and reconciled from stress. This is because nursing work has many challenges predisposing them to stress but measures to help workers reconcile are available in the facility,

**Table 5 shows the strategies used by the respondents to reconcile stress (n=32)**

Strategy	Frequency (f)	Percentage (%)
Visited the counselor	17.0	53.1
Prayed	10.0	31.3
Used drugs and alcohol	5.0	15.6
<b>Total</b>	<b>32.0</b>	<b>100.0</b>

*(Source: Primary Data, 2024.)*

Table 6, shows 17(53.1%) of the respondents said they visited their counselor, 10(31.3%) said they prayed and 5(15.6%) said they used drugs and alcohol. This is because the counselor was always available at the facility and nurses prioritize counseling over all other stress management ways.

## Discussion

### Individual factors affecting personal coping strategies on stress management among nurses in Luwero Hospital.

The study findings showed that all of the respondents 32(100.0%) had ever heard of coping strategies used in stress management 17(53.1%) got information from the internet, and only 1(3.2%) got the information from

television. This might be due to advancements in technology and nurses finding it easier to use the internet as their major information and problem solver. The study agrees with the study by Hwang & Jo, (2019) which reported that mobile applications and social media platforms like Google, and YouTube, greatly equipped nurses with stress-coping strategies as a result of the important information obtained from such sources improving their knowledge and practices towards stress management. The majority of respondents, 29(91%) accepted that high levels of stress could lead to diseases and 25(86.2%) reported that it can cause hypertension. This can be attributed to the knowledge attained in their working experiences in the hospital. This is in agreement with the study by Wollesen et al., (2019) which revealed

that 60% of the nurses greatly believed that stress can lead to diseases and mental health issues such as depression. 25(78.1%) agreed that problem-focused coping strategy helped to relieve stress, and only 1(3.2%) disagreed with it. This is because of the respondents' knowledge about the method and finding it easy to apply and effective, The study is in line with a study by Khoshkesht, (2021) which showed that problem-focused coping strategies helped them to manage stress at the workplace.

In regards to the professional ethics followed when providing nursing care as a way of managing stress, 17(53.1%) of the respondents said that they provided nursing care equally to all patients, and 5(15.6%) said they would value patients. This is because the nurses knew justice as a professional ethic and used it when offering services to patients in the hospital. The study is in agreement with the study by Combrinck et al., (2020), which indicated that personal professional dignity affected strategies of stress management as nurses who were proud of their profession portrayed professional ethics during their work and used it as their strength to provide care in complex situations. Concerning the experience of stress, the majority, 30(94%) of the respondents had ever experienced and reconciled from stress while 2(6%) had never experienced and reconciled from stress. This is because nursing work has many challenges predisposing them to stress but measures to help workers reconcile are available in the facility, probably emanating from the high number of patients. This study agrees with a study by Hsieh et al., (2020) which showed that past stress experiences greatly affected coping strategies, nurses who have experienced stress and overcome stress before had great coping strategies as they used the options, they utilized it achieve resilience, this was higher in in aged nurses as well as experienced nurses. The majority of 17(53.1%) of the respondents said they visited their counselor, and 5(15.6%) said they used drugs and alcohol strategies to escape from stress. This is because the counselor was always available at the facility and nurses prioritize counseling over all other stress management ways. The study is in agreement with the study by (Kersting et al., 2019) in which 30% of the respondents went for counseling when stressed hence its good management.

### Conclusion

The majority of the nurses at Luwero Hospital had sufficient knowledge about stress but lacked stress-coping measures.

### Recommendation

The government should recruit more mental health professionals to help staff and patients in dealing with stress management.

### Acknowledgment

I express my deepest gratitude to the Almighty God for enabling me to accomplish this work. My sincere appreciation goes to my supervisor, Mr. Ssendugga

Patrick for the time he has given to my research, through his technical support, guidance, and direction during the development of this research report.

I also want to thank the management of Kampala University School of Nursing headed by the principal Mrs Grace Denise Akwang, tutors, and non-teaching staff. I extend my thanks, also to the administration of Luwero Hospital for allowing me to conduct this research study from there.

Especially, I thank my classmates, my friends Nagadya Betty, Twizere Millia, and Nandawula Deborah for their academic support and advice rendered to me in preparation for this research report. May God bless them all.

### List of Abbreviations

**KSA:** Kingdom of Saudi Arabia.  
**APP:** Application.

### Source of funding

There's no source of funding declared.

### Conflict of interest

No conflict of interest was declared.

### Author Biography

Ruth Biyinzika is a student of diploma in Nursing Extension at Kampala University School of Nursing and Health Sciences.

Patrick Ssendugga, a lecturer at Kampala University School of Nursing and Health Sciences.

Grace Denise Akwang is a principal tutor at Kampala University School of Nursing and Health Sciences.

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