The Impact of Work Place Stressors on Work Quality of Nurses: Case Study of Private Medical Institutions in the (TRNC)

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Abstract
Various studies have been discussed in the past time to predispose the contact of work place stressors on work quality of nurse. Most of the studies focused on the work place stressors and their relationship between work related quality of life of nurses that how stressors can affect the work quality of nurses and what are the reasons or is there any negative or positive relation between stressors and work quality. This study seeks to analyze the impact of work place stressors among nurses in their work quality by acquiring a quantitative testing method of administering questionnaires to the nurses in the health work place in Northern Cyprus. If the stressors that alter the task quality of nurses are low in the work place, there can be a positive relation between them and can make nurses work more comfortable and relaxed. The main findings suggests that there is a symbolic negative relationship of job place stressors with work nature and aspect of nurses. The results discloses that the frequency of job place stressors have a eloquent contact on work quality of nurses and there is a statistically expressive negative linear contingency within job related element of life and Nurses stress. In health care organization, designing and creating work to be more important and meaningful in their performance and in the manner at which their contributions are acknowledged.

Introduction
Background of the Study
In the nursing work place of present world, stress is leading to be a one of the major and serious threat in health unit sector. Among the people related to the health care professional, nurses stress has a negative effect on their work quality, work health and ability to do. Nursing is a wide profession and due to this they have a direct connection with patients related to their health, proper medication and proper check-up. During this period of care of patient stressors can affect the nurses during their quality of work and can lead them into stressful situation because working environment is very necessary for work where a person can learn and experience problems and difficulties. For a better understanding, we have to address this problem that how job place stressor have an indicative blow on the work nature of nurses. According to previous literatures, several studies have been conducted about stressors and verified that nursing is highly stressful profession. Working in pressure condition is challenging. Most of the nurses need encouragement during work from upper management in their area of work and shortage of adequate staff is one of the most important stressor in the working area. In the work quality of nurse, the interaction of nurse with patient has been clearly identified in the previous studies. Dealing with patient behavior is one of the important aspect in the health sector. At different places of work nurses have different working conditions, different task and the stress source can be different. Previously many researchers have been discussed the communication or connection between work place stressors and the work quality. This study will highlight the factors associated with stressors and how these factor affect the work quality of nurses in the health environment. According to the extant literature the frequency of work place stressors for nurses have a significant impact on their work quality.

Further, we will discuss review of literatures and will organize our research model for the study and in our research methodology we will introduce the total population and sample techniques and will gather data from in different health places and will analyze the data by using different statistical techniques and will present our results, and will talk about the conclusion, recommendations and modification of the study.

Purpose of the Study
In the recent years, place related to medical health services has been struggling and facing serious transformation appearing in a passage from medical care services as a budgetary choice to medical care as a general ace. In this modern world peoples majority are using the word stress in their daily life but they don’t know the meaning of stress very well that how stress can affect the person in a health work place and what is the relationship of work place stressors with the work quality of nurses. Work stress in health environment is the major concern in the nature of work within nurses and it can easily cause productivity reduction, lack...
of confidence, health problems and some other serious mentally issues. So, the main purpose of this study is to increase a good forgiving of the relationship of job stressors and their contact with work nature of nurses in the private health places of TRNC (Turkish Republic of Northern Cyprus).

**Importance of the Study**
This study report on a relationship between work place stressors and work related quality of life that how stressors have significant impact on work related quality of life. Healthy work environment is very important and vital to the enrollment and confinement of medical care specialists and also the sustainability of health system. If we talk about major resources of stress we have incomplete payment, job unfairness, shortage of staff, task load, time pressure, loss of perception and awareness, insufficient management skills and lack of support from other workers, issues of security, confirmation of job security and also work related stress affects the quality of work among nurses. When we discuss about the work quality the most important indicator is, work security and work stress, displaced by job proud. Work force or urgency has a strong connection or interrelationship with turnover intention and employee work related quality of life. For the better development, it is necessary to put the suitable and proper personal collateral strategies among nurse to inflate or merge their work quality and also decline consecutive mass exodus. This consideration encourage analysis and exploration on work place stressors among nurses and how their relationship with their work quality.

**Limitations of the study**
Most of the previous surveys on association among job place Stressors and job related element of Life have been discussed. Evaluating and understanding work place interventions that target the stress management in the workplace is of importance to nurses job affiliated element of life. For the improvement and development, guideline and system variation, like the approach that inflate the service and also detainment of nurses and initiative of organization to reduce and decrease stress due to work load and staffing issues that are essential to recover the nature of assistance that nurses handover. It has been pointed out in the previous studies that the rapid rise in sick leave and early retirement from work due to some disorders and stressful conditions. Higher level of work related low back problems are found among nurses. The managers of the facilities should even provide proper available needs and resources for nursing staff for their accomplishment of work and also involved nurses in the developmental goals and of the facilities to enhance their influence in the making of necessary changes within the organization and society to decrease the work load and stress.

**Research Hypothesis**
The main hypothesis is shown below:

**H0:** The frequency of Work Place Stressors for Nurses do not have a significant contact on Work Related element of Life.

**H1:** The frequency of Work Place Stressors for Nurses have a significant contact on Work Related element of Life.

The main aim of the study is to highlight the stressors at work and their relationship between Job Related Nature of life among Nurses.

For this reason, Research model will be developed to discuss and to analyze the relationship between work place stressors and Work Related Quality of life and will see different studies and researches that have been discussed previously by other authors and research questions will be created to get data from different health work places, methodology and analysis and finally results will show the relationship between them.

**Literature Review**
This chapter of the study involved the general discussion about relationship between Workplace Stressors and Work-Related Quality of Life and to discuss and examined these relationship as it among nurses in the Private Medical Institutions in the TRNC.

**Stress and Stressors in a Health care Organization**
Stress is one of the leading threat in the health care organization. Among nurses, stress is increasingly gaining attention. In the previous studies nursing has been reported as a job full of stress [1]. Further studies show that stress correlation during work can start to upturn the breakdown and disability as well [2]. Stress during work among nurses can make them demoralize and because of over work load they can be mentally disturbed and can gain diseases and become ill. Moreover, in the early 1990's [3] organized a review to explore the possession of stress during job and satisfaction on retention of nursing staff and their quality care. Stressor is a stimulus that causes stress to an individual externally, it can be severe in most of the time especially too much work load, shortage of staff and no motivation from upper management can make nurse stressed and can create lack of confidence among them. Nurses who experienced stress have more severe conflict with their colleagues [4]. During work period communication with other staff members under stressful conditions can make conflict between the nurses and it can lead to impact on other workers. In the learning period among nurses stressors can directly or indirectly affect their performance and learning skills.

**Types of Stressors**
In nursing education, stress is considered as one of the most important issue in this world. We have different types of stressors in the health care unit and they can be differentiate among health care personnel and depend on the task being performed by individual in the work place. In nursing occupation we have different types of stressors that nurses facing in their work quality.

**Tasks at Hand**
In the nursing work place stress connected with bad working conditions and environment. (Leiter and Maslach, 1999) stated that discrepancy within community and their job location, ambience in work load area of life promotes to burnout [5]. Over work load happens because of understaffing and can lead to physiological and as well as psychological disorders among nurses. Nursing is a wide occupation and over work load is one of the very decisive and critical stressor within nurses and it can create adverse impact on their work quality and their social life. Most of the previous researches discussed about over work load as a growing stressors in the health care institutions and worker are facing too many problems and difficulty as a result of over work load. In another study over work load and increase work time hours have had a negative impact on the nurses health and their work quality and it can increase their work full of stress. In the health care organization majority of peoples are experiencing stress and it can impact on their daily life experiences.
Time Pressure and Sleep Deficiency
Nurses affected by stress across the globe has been highlighted in the previous literatures for about more than 40 years [6]. Nursing working conditions include an enclosed atmosphere, sleep deficiency and time pressure, too much noise, no availability of second chance, and long working hours can affect their health [7]. Sleep deficiency cause by working under high stressful condition. Sometime it happens when you are doing work for someone else and it can create sleeping disorders and a person thinking power can be easily affected. Working under these kind of situation can increase the risk factor among nurses and later on they can experience some brain disorders that can affect their body structure. Time is very important in working in health care organization when nurses have direct contact with patient's recovery and health after surgical procedures.

Inadequacy of Encouragement and Communal Support
Inadequacy of Encouragement and communal support is one of the important stressor among nurses during their work time. According to Rousseau (1999), the motivation of staff positively influenced by the psychological contract in nursing work area. Nurses need motivational support from their upper management especially from their supervisors, registered head nurse, and higher leadership. Working under these conditions can influence their work performance and can increase low motivation. Most of the other researchers have been carried out to explain that how motivational and social support influence work quality of nurses and what are the impacts.

Subjection of viral and infectious microbial disease
All health care workers working in health work place experiencing and facing wide range of health hazards body and bloody fluid exposure [8]. Nursing is basically a female profession where working conditions and environment are poor where they are working. Bad or poor organizational atmosphere and over work load associated with increase in the possibility of needle stick injury can lead to infection transmit from the patient to the worker. The work of nurses in the critical care unit where the caring of patient is very important and in that kind of environment. Firstly, nurses should be vaccinated before having a communication with patients to prevent them from microorganism. Researchers previously discussed their studies about exposure of infectious disease among nurses. In a previous survey of literature, the writers clearly stated that the documentation of nurses working atmosphere and safety outcomes of patients [9]. Exposure of viral and microbial disease is very important stressors in the health work place of nurses and it can be life threatening if you are not vaccinated properly and diseases can be transmitted easily and can disturb your body mechanism internally and externally. Although, the services of nursing are positively correlated with the outcomes of the patients. Healthy work environment is very important for the nurses to get better and well natured experience by applying high class technical skills. The better development needs low level of stress in an organization where employee can work positively without any fear and threat.

Exposure to Violence Related to Work
Violence related to work place can be defined as “Event or occurrence where members of the staff are mistreat, threatened, terrorize, pressurize or assaulted in circumstances belong to their work, including commuting to and from work, involving an explicit or implicit challenge to their safety, good well-being or health”(Martino et al., 2002). Work place violence is divided into two ways including psychological violence, physical and mental violence like verbal threat, persecuting and tyrannizing and as well as ethnic and erotic threat that may overlap both group [10]. Violence in the work place environment has an adverse contact on the work nature of nurses and their desire to stay in the job, satisfaction level of job may appeared in increase level of stress and absenteeism as well. Previously literatures have been identified the violence related to work among nurses in their work place sexual harassment is one of the another important violence related factor in nurses. Upper management in health organization should provide proper safety and security to nurses for the protection of their rights.

Conflict with other Colleagues
Conflict with work mates is an influential stressor in medical care organization especially hospital. Where human connections and communications are very important especially in that situation when the clash between two people about the achievement of goal occur [11]. The role of nurses is very important in the development of hospitals because they should maintain good relationship with patients and their relatives as well as employee working with them in the same place same environment. Nurses playing a vital role in the achievement of hospital goal and client satisfaction with proper care. Conflict can be increase between physicians, supervisors, registered nurses, stakeholders, subordinates, co-workers and other staff members. It has been documented previously that conflict can arise including perceptions and opinion differences at all level of interaction like supervision, sharing of work, learning and teaching as well (University of Iowa, 2010). This is clearly in the fact that conflict in the health work place related to poor interaction resulting from misunderstanding, no cooperation, work delay, gossips, increase stress level during work, decreased patient satisfaction [12].

Over work due to understaffed
Nursing is a wide occupation and it needs professional skills and nurses should be able to work in all conditions. According to Wheeler (1998), he described that over work due to understaffed in nursing is one of the primary stressor in the medical care environment [13]. Understaffing is one of the most important factor among nurses work place because of this too much work load will be created. In nursing occupation there should be well trained staff is necessary.

Interaction with harder or critical patients
Communication with critical patients on work place is another stress factor for nurses. The handling of critical care patients in intensive care unit is challenging [14]. After surgical procedure the post-operative care of patient is a big challenge for nurses in the health work place because post-surgical symptoms among patients are very high. Working under these conditions is very difficult for a nurse to control and maintain everything in a positive way. Proper checkup, regular medications and injections on time is very necessary in work area.

Future progression issues
Investigations described that new patterns or new ideas among nurses are essential to cope nurses improve development with sentimental needs related to their task [15]. Nursing programs should organized where nurses can get better ideas or can improve learning skills in a good way and can face any kind of challenge.
in the entire life of working in health care organization. Nursing developmental policies can make better understanding among nurses related to their work in hospitals.

**Work Place Stressors in a Health care Organization**

Work stressors in a health work place among nurses is a great concern in the present world. Work place stressor occurs when the demands of the work became excessive and work place pressure exceed among workers working in the health care environment and job satisfaction move to exhaustion. Stressors during work place environment can affect nursing performance during work and can decrease the moral values among them. In the previous reviews it has been clearly observed that a limited number of surveys discussed on nurses. Less job control, increase number of demands, no motivational and social support during work from upper management, work over load, death and dying situation between nurses. (Edward and Burnard, 2003) discussed that stress in work place is as stress in occupation “occupational stress” [16]. This is like a pressure or stress nurses facing or experiencing during their work place environment. In the health care organizations stressors playing a key role because they can affect easily personnel behaviors and performance as well. Nurses facing too many stressors in the health care organization because of too much over work, over work due to understaffing, lack of social and motivational support from upper management, death and dying factor, conflict with other colleagues during the work, problems dealing with critical conditions patients during work, uncertainty concerning treatment, subjection to infectious diseases, time pressure and sleep deficiency is one of the leading stressors in the health care organization among nurses in their work place. In this study There are different factors will be discuss for nurses in the achievement during their duties and we will discussed these factors how they have a symbolic contact on work related nature of life among nurses in their health work place. About 19 studies of stressors have been discussed that nurses experienced because of stress in an organization [17]. Stressors can lead to less participation to decision making among nurses. In 2005, (Dittus et al.,2005) identified that 75% of nurses accept that shortage of nurses during work can affect their quality of work and patient care as well. No motivational support from managers or supervisors, less feedback, less understanding in response to mistake are the factors that are related to create stress among nurses in their working environment. Definitely nurses will behave differently to each stressors but it is possible that emotional work coupled with organizational problem and each stressors can affect in a different way and persons reaction can be different as result of it [18].

**Components diagnosed to explain force for nurses during their conduction of work**

There are different Components diagnosed to explain force for nurses during their conduction of work are as Fatality and fading, Collision with doctor or specialist, Incomplete training, Shortage of backing, Competition with other registered nurse or assistant, Job pay load, Concern regarding hospitalization.

When we discourse about stressor Fatality and fading among nurses determined in association to intensive care unit, also stay with tumor or carcinoma patients, and researcher during their research on fatality or fading. Around 19 different surveys in contact by nurses in critical care work discussed [17]. Fatality because of congestive heart failure expressed as an annoying uncertainty as expressed in dissatisfaction over the management of work (Price et al., 1977).

Collision with doctor and specialist can lead to stress, anxiety, fear, and interruption in efficient communication. These kind of things can, in turns also inflate the likely for contention. Physicians are trained to be in authority over nurses. To have professional accountability and responsibility for care of patient, nurses want to be more independent today. Physicians sometimes ignore their suggestions, indicating they do not need feedback, they spend more time with patients than physician do [19].

Incomplete training during the conduction of work among nurses can lead to stress and to make them confuse during their training session and can reduce their incentive to work. In 2001, nurses experienced that their working situation are bad; staffing issues, too much work load, overtime during work and shortage of staff personal. In 2005, (Dittus et al, 2005) disclosed that above 75% of registered nurses admit the deficit of nurses diminishes the nature of their work life and patient care.

Shortage of backing, competition with other registered nurse or assistant and job pay load are the components diagnosed to explain force for nurses during their conduction of work Labored affair and susceptible competition can enhance stress to any working situation, but it is a lack of backing, exclusively from nursing head [20], rather than the existence of competition, Shortage of backing from supervisors, shortage of assessment, withheld information are all the components that are emphatically interact with stress in nursing [21].

Nursing model, management styles, staff communication and physical work place affect both work culture and work load, and therefore can accentuate or moderate staffing problems by reducing or increasing work load for any given numbers of patients, for example, a study of nursing shortages indicated that hospitals using a primary nursing model were less likely to report a shortage than those using a team model [22].

Concern regarding hospitalization is the dominant stressor among nurses in the medical care section, dealing with patients and their families and feelings discriminated against (on the basis of age, gender and ethnicity. Off course individuals will respond differently to each stressor, but it is possible that emotional work coupled with organizational problems is especially likely to lead to high levels of burnout [18].

**Stress Outcomes**

There is a stigma associated with depression [23]. Most of the previous researchers clearly reported that affect and impact of stress in nurses is large and it can affect the chemistry of the body, functioning of system of organs, chances of mortality because of affecting physical and mental health.

**Stress Prevention and Management**

Health care organization required and need to be sure that the workers working in the health work place should be aware to take it serious and how to manage and prevent stress in the work place. Enforcement of work place stress policies are very important. Even manager should provide some necessary tools to understand the cause of stress in the work place.
Personal access to weight avoidance and administration
The members of an Organization should organize some programs to weight avoidance and administration should assist in management and prevention of stress among workers in the work place or environment, should implement proper techniques and procedures for development of an organization. What if one individual finds useful, another individual may not. There is still a great deal we do not know regarding the differences of personal and their effects on managing stress outcomes [24].

Work Related Quality of Life in a Health care organization
Work related element of life in a medical care environment has become an important aspect in the modern world. In the health care organization nurses are playing an essential role in the progress and advancement of an organization. The work related quality of life where nurses can perform their duties in a good positive and are experiencing too may challenges. Most of the researches has been conducted previously to describe the relationship of work related nature of life with the workers working there in health care environment [25].

The main idea or concept of work related quality of life is like an area or atmosphere that increase person motivation and their dignity, introduction of organizational cultural changes, improvement of personnel emotional and physical well-being and promotion of job, giving a chance for better development and growth (Richard et al.,1985:239). Further studies discussed about work related quality of life among nurses indicates suggests that work nature, change of organizational structure and working under pressure leading to increase the level of health illness [7].

The quality of life related to work among nurses has a significant importance in the health care organization. Nurses require good atmosphere and environment where they can perform their duties in a good way and can pay attention to their work. In a daily basis of life nurses working under stress facing a lots of challenges and problems at work place like low satisfaction level, shortage of staff members, direct interaction with the patients regarding their health issues, low salary issues, insufficient facilities, conflict issues are the basic issues in the work health place. Bad psychological health and level of absence of sickness among health workers can lead to terrible and unsatisfactory nature of patient affliction [26].

According to Knox and Irving (1997), have proposed that performance of the health personnel can be influenced by factors that are involved in the job related nature of life [27]. It has been clearly identified in the previous studies. In the hospital place where nurses are trying to stay far from stress. The role work quality of life in nursing is very clear because better development can make them loyal to their work and can be easily performed.

Researchers discovered that factors belong to environment, personal factor and management climate all related to perceived work related quality of life of nurses (Lock et al., 1991) So environmental factors among nurses, individual factor and administration climate these are the factors are related to nurses work nature of their life in health care organization.

Work related quality of life WRQLS alters not only task achievement, but also fulfillment in other life territory like: freedom, household, economic well-being, fitness, accommodation, relationships, knowledge attainment, company engagement, area or locality, communications, psychological well-being, the atmosphere, cultural and social status [28]. Institutions are practicing extraordinary modification as a result of shifts in work force enumeration, scientific and professional modernization, and world-wide trial [29]. In an era of layoffs, reducing, expanding, reengineering, and restructuring, there is testimony that workers are losing guarantee to their organizations [30].

Component Identified to Describe Work Related Quality of Life for Nurses in the conduction of their Duties
There are different component identified to describe Work Related Quality of Life WRQLS for Nurses in the conduction of their duties are as work and career achievement, Natural comfort, Working under stress, authority and discipline at work, Integration of home-work and Working situation.

Work and career achievement means the success you are gaining in your task and it can lead you a better future. In nursing profession it is very essential component related to the task of nurses during work time like opportunities during career, conditions at work guidance under good supervisor, reimbursement, perception, interest. (Locke et al., 1976). In the studies of Moorhead (1993) [31] and Pagliara (2003) both found that work achievement was the most significant prognosticator of intent to stay.

Natural comfort and working under Stress is the biggest challenge in the world in each and every organization. When we talk about stress at work it can lead to demoralize the workers and employees in an organization like task decrease achievement, collapse, inflate detention, immune mass exodus [32]. We have two common fundamentals to natural comfort the physical, mental and social situation of employee, intellectual and hysterical forms of workers [33].

From a nurse setting perspective, there are many considerations to be aware of those nurses who works in highly acute nursing settings also endure some of the greatest stress in the work place, or nurse shortages all represent key sources of stress for nurses [34]. When we talk about stress at work so regular action while contributing, performing and reacting soul preserving actions, and trying to make a good relationships with the patients and their next of kin, is extremely very stressful for nurses (Almqvist et al., 2012).

Studies found that the concept of control at work refers to the extent to which a person consideration that their issues are resolved primarily by their own efforts and ability rather than by foreign elements like destiny, chance, the circumstances, or powerful other found that heart attacks occurs relatively often after an escalation in job related stress (Schnallet al.,1994).

Authority and discipline at work is important because sometime there is no planning how to resolve an issue or how to create a plan. These things at work can also create a problems and can also contribute a stress at high level. Stress can arise because of family and task integrate [35]. Those factors or components that are associated with stress for long term may easily can create serious sickness [36].

Exposure of Nurses can be happened on everyday basis of huge
amount of influential stressor, including contact with medical practitioner, inequity, favoritism, work load, and interaction with patients. McVicar (2003) discussed that many such conditions experienced high fetch among nurses in spiritual labor [37]. One of the other theory commonly that can be used to understand job related stress clearly is the Demand Control Support Model [38].

Relationship between Work Place Stressors and Work Related Quality of Life
This survey also drawn our attention to the importance of the frequency of work place stressors for nurses have a symbolic contact on Work Related nature of life. Stress in occupation is a result of joined risk to different component in employment conditions and working environment as well. Stress in occupation has attracted increasingly people thought in the last 3 decades, due to its serious contact on commercial cost and health disturbance on Work Related nature of life among nurses [39]. It is very essential now to decrease the employment stress among nurses in the medical care sectors, so that they can work comfortably and can improve Work Related Quality of life. This can be possible only by Job fix up, adjustment of Work System.

Evaluating and understanding work place interventions that target the stress management in the workplace is of importance to nurses Work Related nature of life. It has been pointed out in the previous studies that the rapid rise in sick leave and early retirement from work due to some disorders and stressful conditions. Higher level of work related low back problems are found among nurses. The managers of the facilities should even provide proper available needs and resources for nursing staff for their accomplishment of work and also involved nurses in the developmental goals and of the facilities to enhance their influence in the making of necessary changes within the organization and society to decrease the work load and stress. As a result of Literature Review, this study acquire two hypothesis to investigate the relationship.

H0: The frequency of work place stressors for nurses do not have a significant contact on their work related element of life.

H1: The frequency of work place stressors for nurses have a significant contact on their work related element of life.

In the literature part of the study we discussed the stressors at work place and their significance and how they can influence the nature of work life among nurses in the health work place. Further, we will have a discussion in the methodology section about the research model, design, sample techniques, area of the study to measure the effects of stressors and they have a serious contact on work related element of life among nurses in health work place.

Methodology
The objective of this survey is to investigate the communication among work place stressors and work related quality of life among nurses in the private medical institutions in the TRNC. This chapter presents the steps followed to generate data, up to the method used to analyze the data in the following order: Study design, Study population, Sample size and inspecting technique, Data selection equipment’s, Data selection plan, Data investigations method.

Study Design
A detailed survey research design was employed for this study. The reason for using this method is to describe the current situation and examine the relationship between work place stressors and work related nature of life among nurses in private health institutions in the Northern Cyprus. This design was found to be appropriate for the study.

Study Population
The community of this study was made up of all nurses in the private medical institutions in the TRNC. Health workers were confirmed as nursing staff only among some Private hospitals including Kolan British Hospital, Başkent Hospital, Etik Hospital, Cyprus Life Hospital, Kyrenia Medical Centre at Kamilioğlu Hospital, Mağusa Tip Merkezi Hospital, Yaşam Hospital Mağusa.

Table shows Population and the Sample of the Study:

| Names of Hospitals                  | Population | Population Percentage | Sample Collected | Sample Percentage |
|------------------------------------|------------|------------------------|------------------|------------------|
| Kolan British Hospital             | 45         | 29.2%                  | 38               | 29.6%            |
| Mağusa Tip Merkezi Hospital        | 29         | 18.8%                  | 26               | 20.3%            |
| Yaşam Hospital Mağusa              | 25         | 16.2%                  | 19               | 14.8%            |
| Kyrenia Medical Centre at Kamilioğlu Hospital | 17    | 11.0%                  | 10               | 7.8%             |
| Etik Hospital                      | 15         | 9.7%                   | 14               | 10.9%            |
| Cyprus Life Hospital               | 13         | 8.4%                   | 13               | 10.1%            |
| Başkent Hospital                   | 10         | 6.4%                   | 08               | 6.2%             |
| **TOTAL**                          | **154**    | **100%**               | **128**          | **100%**         |

The total number of nurses were 154 among these hospitals and 128 of them filled questionnaires. The selection of these hospitals for data collection is very important because the majority of nurses can speak English fluently and answer your questions adequately. The main advantage for this knowledge was good communication and better understanding. As a result we were able to gather necessary data easily.

Sample size and Inspecting Techniques
The sample size is defined as a selection of respondents chosen in such a way that they represent the total population. To calculate the sample size we the formula used by (Krejcie and Morgan, 1970) [40], the table of sample size is in appendix 1. For the margin of error of 3.5% at 95% confidence level. The formula below is the one use for the calculation of the table:

\[
n = \frac{X^2 \times N \times P \times (1-P)}{(ME^2 \times (N-1)) + (X^2 \times P \times (1-P))}
\]

Where:
- \( n \) = sample size
- \( X^2 \) = Chi - square for the specified confidence level at 1 degree of freedom
- \( N \) = Population Size
- \( P \) = population proportion (50 in this table)
- \( ME \) = desired Margin of Error (expressed as a proportion)

According to the table the good sample size is 126 nurses in total.

Data Selection Equipment
Two different standardized questionnaires were adopted which was used for data collection.
**Work Related Quality of Life (WRQLS)** is a 17-item psychometric scale used to gauge the perceived nature and quality of work by an employee based on five psychosocial sub-factors: general wellbeing, homework interface, work stress, work control, and conditions for work [41]. The WRQLS has five response options ranging from “(1) Strongly agree S.A, (2) Agree A, (3) Disagree D.A, (4) Neutral N, (5) Strongly disagree S.DA”.

**Nursing Stress Scale (NSS)** The Nursing Stress Scale (NSS) (Gray-Toft and Anderson, 1981) was also selected. The scale was designed around situations identified to cause stress for nurses in the performance of their duties. The NSS (Gray-Toft and Anderson, 1981) is 34 item scale [42]. It has four response options ranging from “(1) Never N, (2) Occasionally O, (3) Frequently F, (4) Very frequently VF”.

**Research Model**

Research model showing relationship between frequency of work place stressors and work related quality of life.

**Data Selection Plan**
The questionnaires were prepared with the help of supervisor and for that Letter from the Department of Health Care Organizations Management, Cyprus International University, was collected to visit different health sectors and places for questionnaires to conduct the study of Private medical institutions in the TRNC. The questionnaire were distributed and filled among nurses in the different private hospitals. It took one month to administer and retrieve the completed questionnaires.

**Data Investigations Method**
The Pearson’s Correlation and Regression test was used to ascertain whether a communication exist among job place stressors and Work related quality of life. More so, Frequency and simple percentage as well as statistical package for social sciences (SPSS) were used to analyze the data. All tests were performed at alpha equals 0.05 (level of significance).

In this part of the study, a survey research design was employed. We created research model, discussed study population and gathered information about nurses in the health organization and for that we will use data analysis procedures to analyze our data, discuss findings and will talk about conclusion, limitations and lastly our recommendations.

**Analysis and Findings**
The study employed closed ended questionnaire, for which 154 questionnaires were distributed and 128 were completed and returned. The target sample size was reached. Various statistical tests which included descriptive statistics, Pearson correlation, and chi-square tests were carried out to estimate the communication within the independent and dependent variables which included Stress scale of nursing and Work related element of life. This chapter is responsible for the presentation and analysis of data retrieved from respondents in the course of the research.

**Demographic Statistics**
The analytical specifics approached by the investigator via the questionnaires contained age group, gender distribution, marital status, working experience statistics was descriptively computed in the form of arithmetic means and standard deviations for the data. The data were collected from different private hospitals were investigate for uniformity and reliability and were inspect using the Statistical Package for Social Sciences (SPSS).The results have been presented below;

**Gender**

|          | Frequency | Percent |
|----------|-----------|---------|
| Men      | 27        | 21.1%   |
| Women    | 101       | 78.9%   |
| Total    | 128       | 100%    |

From table 1 above, it can be noticed that the prevalent gender of respondents in the study are those of women which assumed for 78.9 % of the total sample. Men assumed for the remaining 21.1 % of the sample size. The total numbers of men nurses were 27 and 101 were all women nurses.

**Age**

|          | Frequency | Percent |
|----------|-----------|---------|
| 20-25    | 77        | 60.2%   |
| 25-35    | 42        | 32.8%   |
| 35-50    | 8         | 6.3%    |
| 50-60    | 1         | 0.8%    |
| Total    | 128       | 100%    |

The table 2 above, showed that the prevalent age group of respondents in the study is those between 20 - 25 years of age which assumed for 60.2% of the total sample, those between 25 - 35 years of age assumed for 32.8%. Respondents who were 35-50 years and above assumed for 6.3% and 0.8% for 50-60.

**Marital status**

|          | Density | Proportion |
|----------|---------|------------|
| Single   | 104     | 81.3 %     |
| Married  | 24      | 18.8 %     |
| Total    | 128     | 100 %      |

The respondents in the sample population are single, for 81.3 % of sample population; 18.8 % of the respondents are married.

**Working experience**

|          | Frequency | Percent |
|----------|-----------|---------|
| Less than 1 year | 41        | 32%     |


In this table 4; 55.5 % of the respondents in the sample population has 1-5 years of experience, 10.8 % has between 6-10 years of experience, 3.9 % has between 11-20 years of experience out of them 32 % has less than 1 year experience. Finally 0.8 % has more than 20 years.

| Duration       | Number | Percentage |
|----------------|--------|------------|
| 1- 5 year      | 71     | 55.5%      |
| 6 - 10 year    | 10     | 10.8%      |
| 11 - 20 year   | 5      | 3.90%      |
| More than 20 years | 1  | 0.8%       |
| Total          | 128    | 100%       |

Reliability Analysis

| Cronbach’s alpha | Cronbach’s alpha based on standardized item | Elements |
|------------------|--------------------------------------------|----------|
| 0.74             | 0.68                                       | 51       |

Hypotheses Testing

Reliability analysis is determined by obtaining the proportion of systematic variation in a scale, which can be done by determining the association between the scores obtained from different administrations of the scale. We first test the reliability of the questionnaires. Bartlett’s test was checked to give us the confidence that our results are good. The Kaiser- Meyer- Oikin (KMO) for this survey was 0.509 (appendix 2). Values close to 1 will indicate that analysis should yield distinct and reliable results.

The relationship between our variables is measured by our significant test and for appropriate results it should be (p<0.001). The hypothesis we will test are :

H0: The frequency of Work Place Stressors for Nurses do not have a significant contact on Work Related element of Life.

H1: The frequency of Work Place Stressors for Nurses have a significant contact on Work related element of Life.

The independent variable is work place stressor for nurse measure by the Nurse Stress Scale (NSS) and the dependent variables Work Related Quality of Life (workqualife).

Model Summary of Variables

| Model | R   | R square | Adjusted R Square | Std. Error of the Estimate | Durbin-Watson |
|-------|-----|----------|-------------------|---------------------------|---------------|
|       | 1.02 | 0.08     | 0.08              | 0.39                      | 1.61          |

a. Predictors : (constants), NSS
b. Dependent variable : workqualife

• Model summary shows the good of fit statistic indicating whether the model is a good fit. R is the correlation coefficient measuring the strength of the relationship. The relationship is moderate because R square is 0.08 that means work related to stress can be explained by 8.3 % of Nurse Stress.
• The value of Durbin - Watson is between the critical value 1.5< 1.60 < 2.5; this result shows that there is no first order linear autocorrelation in the data.

ANOVA

Table 6 : Anova

| Model         | Sum of square | df | Mean square | F     | Sig     |
|---------------|---------------|----|-------------|-------|---------|
| Regression    | 1.77          | 1  | 1.77        | 11.41 | .001    |
| Residu        | 19.59         | 126| 0.15        |       |         |
| Total         | 21.37         | 127|             |       |         |

a. Dependent variable : workqualife
b. Predictors : (constants’), NSS

Anova shows that the model has predictive value, it is significant therefore the null hypothesis H0 is rejected

Coefficients

Table 7 : Coefficients

| Model | Unstandardized Coefficients | Standardized Coefficients | t | Sig |
|-------|-----------------------------|---------------------------|---|-----|
| A     | -2.49 E-017                 | .03                       | -3.37 | .001 |
| NSS   | -.32                        | -.28                      | -3.37 | .001 |

a. Dependent variable : WRQL

According to the results:

• We see that the relation between work related quality of life and Nurses stress is negative (-0.32) and based on the t-value (-3.37) and p-value (0.001), we can conclude this relationship is statistically significant.

Therefore, there is a statistically significant negative linear relation between work related quality of life and Nurses stress. The hypothesis H1 is accepted.

This chapter describes the results of the study from the instruments used to analysis the data. Study shows that there is a statistically significant negative linear relationship between work related quality of life and Nurses stress. The next part of this work will discuss this result, give some recommendation and future research.

Conclusion

The current research highlights the relationship between the work place stressors and work related nature of life between nurses in private health institutions in Northern Cyprus. This study focuses on the stressors related to work in nursing profession and how these stressors influence the working quality of nurses. We have two hypothesis here the first hypothesis is not accepted but the second hypothesis is accepted because what we found in the research that a negative and significant relation between work place stressors and work quality of life. If the incidence or regularity of work place stressors are high then the work related quality of life will be low it means that the frequency of work place stressors have a momentous contact on the work related quality of life among nurses.

This outcome of this study indicates that a relationship between stressors and work quality of life among nurses as high quality of work life in nurses is very significant for their better work
Lastly, as the main target of this research as to estimate the link of work place stressor with work related quality of life among nurses. We will recommend that the management in the private institutions should emphasize on the belief of nurses towards head nurses and other supervisors and management, designing and creating work to be more important and meaningful in their performance and in the manner at which their contributions are acknowledged.

**Limitations of the study**
The prime or considerable drawback for this debate is seen from the fact that, as we have different private medical institutions in the TRNC at different places, only a key leading private hospitals were selected for the collection of data. Only the major private hospitals were found in the area of Lefkoşa, Kyrenia and Famagusta Northern Cyprus were assessed for the study.

Also, these areas of Northern Cyprus is the centre and crowded area and some of the major hospitals were considered for this investigation. The questionnaires were assigned to the nurses and majority of women group working in this occupation as well as men group. The ratio of women is higher than men in nursing.

The data collection process was also a challenging among nurses because most of the staff nurses were young and was gaining experience and few of them were old and well trained and well experienced nurses and they had different duty timings like morning, evening and night rotations and some of them had some language issue but they filled the questionnaires. Some of the nurses they were not present there but majority of them they filled the questionnaires.

**Acknowledgement**
First and foremost, I would like to say thanks to Almighty God for the strengths and his unlimited blessings in completing this thesis. He is the most gracious and the most merciful.

I will like to frame this occasion and convey my deepest regard to my supervisor, Dr. Ayşen Berberoğlu for her supervision and constant support. Her critical and indispensable help of constructive comments and suggestions throughout the experimental and research work have contributed to the success of this research. She is an ideal supervisor. Her guidance, counseling, academic experience, kindness and encouragement aided in the completion of my research work. I am really very thankful to Dr. Ayşen Berberoğlu for giving me this impressive and extraordinary experience for the accomplishment of my research work.

I also want to appreciate and say thanks to the director of Institute of Graduate Studies and Research and Head of the Department of Health Care Organization and Management Prof. Dr. Hikmet Seçim for giving me an opportunity to write a thesis.

My parents have been a constant source of support-emotional, moral and of course financial during my whole life, and this thesis would certainly not have existed without them. Special thanks to my workmates and friends for their continued moral support thereafter. It was greatly needed and deeply appreciated.

Lastly, I offer my regards and blessings to all of those who encouraged me in hard time in any respected during the completion of my research work. To each of the above, I extend my deepest appreciation.

Firstly, every organization has some goals for the future. This study underlined the association of work stressors with work quality of nurses. We will recommend that further investigations can be carried out in the liaison among stressors at work place and nurses work quality of life.

Secondly, further research can be performed to judge that how the stressors for nurses have a serious contact on their work related aspect of life and for this reason criteria and recommendations are very important for the progress of organizational culture and hospital environment.

Thirdly, the effect of stressors on nurses can be further explore to verify of whether or not that work place stressors have a negative relationship with work related quality of life of nurse.

Fourthly, in the health care organization lack of medical equipment among nurse during their work time can reduce their work and chance to provide the better necessary examination for diagnosis and treatment of a patient. This study will recommend that proper funding’s and provision of health checkup tools are the basic needs in health environment.

Fifthly, this interpretation evaluates execution of determined organizational involvement in the health care setting can lead to prevention of stress related to work and enhancement in the quality of care of nurses.

Sixthly, further review can also be conducted to find out and also compare the effects of work place stressors with the work related nature of life between nurses in some other major national and private sectors and clinics in the Northern Cyprus.

Lastly, this investigation accentuate that the job stressors and the work related nature of life are negatively related to each other. Since, stressors are big concern in the health care organizations and it can affect the nursing health care settings. Supervisors or head managers in health care organizations should implement better infrastructure and environment for nurses in their career.

Execution of determined organizational involvement in the health care setting can lead to prevention of stress related to work and enhancement in the quality of care of nurses [43-51].

**Recommendation**
There are quantity of essence that this study has provoked which should be evaluated for fortune investigations.

Lastly, as the main target of this research as to estimate the link of work place stressor with work related quality of life among nurses. We will recommend that the management in the private institutions should emphasize on the belief of nurses towards head nurses and other supervisors and management, designing and creating work to be more important and meaningful in their performance and in the manner at which their contributions are acknowledged.

**Limitations of the study**
The prime or considerable drawback for this debate is seen from the fact that, as we have different private medical institutions in the TRNC at different places, only a key leading private hospitals were selected for the collection of data. Only the major private hospitals were found in the area of Lefkoşa, Kyrenia and Famagusta Northern Cyprus were assessed for the study.

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