OCCUPATIONAL STRESS AND PSYCHOLOGICAL WELL-BEING AMONG NURSES: MEDIATING ROLE OF MINDFULNSS

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OCCUPATIONAL STRESS AND PSYCHOLOGICAL WELL-BEING AMONG NURSES ; MEDIATING ROLE OF MINDFULNSS

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DEDICATION

First of all I thank to **ALLAH** who enabled me to complete my present manuscript successfully on time. I am very thankful to my Supervisor **Madam Ambreen Fatima** whose guidance at every step of writing this thesis made my learning process remarkable. Her many virtues such asher seniority in work have seared an indelible impression on my mind and have left a positive impact on me both in professional and personal life as well.

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ABSTARCT

The purpose of the study to investigate the relationship between occupational stress and mindfulness on psychological wellbeing among nurses. Correlational research design was used to conduct the study. A sample of 250 nurses both male (n=106) and females (n=144) aged between 25-45 years (M=34.46,SD=7.27), were selected from different public and private hospitals of twin cities, by using non-probability purposive sampling. Self-report measures of occupational stress scale (Malik et al., 2017), mindfulness attention awareness scale (Brown & Ryan, 2003) and Psychological wellbeing (Ryff in 1989) were used to assess the research variables. The result of Pearson product moment correlation revealed a significant positive association between mindfulness and psychological wellbeing among nurses, while negative association between occupational stress and psychological wellbeing among nurses. The result ofmediation analysis showed mindfulness to partially mediate the relationship between occupational stress and psychological wellbeing. Furthermore there were significant gender and department differences between mindfulness and psychological wellbeing. However no gender and departments differences were found across occupational stress.

Keywords: Occupational stress, Mindfulness, Psychological wellbeing.

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LIST OF ABBREVATION

OC= Occupational Stress

OCS= Occupational Stress Scale

MAAS= Mindfulness Attention Awareness Scale

PWB= Psychological well being

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Chapter 1

INTRODUCTION

Life is a broad spectrum in which people react to good and sad times in life in different way. These life experiences help people become conscious of who they are and teach them how to handle sudden condition. People's way of attending an unfavorable stimuli is determined by theirbroad coping skills, and some people may react anxiously to a problem. Consequently, it leads toissues in various areas of an individual's functioning, including social dysfunction, employment, and education.

The word "stress" is derived from the Latin verb "Stringi," which implies "to be tired binding." According to Baye et al. (2020), stress is characterized as "a psychological or physicalstimulation that can cause anxiety or physiological reactions that could result in disease." according to the WHO tension (stress) is a worldwide problem that has been 90% linked to doctor visits, Furthermore, the worldwide health conditions during the epidemic caused a sharp rise in stress levels. Studies reveal that chronic stress and perceived life stress are linked to alterations in cellular and neural structure, which affects quality of life (McEwen, 2006).

Stress is frequently linked to unpleasant or negative stressors, or "distress"; on the other hand, "eustress," or "good stress," is linked to pleasurable feelings (Selye, 1974). Eustress and distress are on a spectrum, and a person's assessment of what happened determines how much stress they are under and, if they possess the tools necessary to overcome it (Lazarus & Folkman,1984). More recent research indicates that chronic stress and

perceived life stress are linked to cellular and neural alterations that lower

quality of life (McEwen, 2006). Workload andworkplace stress are related

(Madadzadeh et al., 2018).

1.1 Occupational Stress

Stress is the response of the body and mind to something that could be upsetting or difficult for them. When stress levels rise, this perception could cause the body's reserves of energy and defense to be exhausted (Coligan & Higgns, 2005). According to Gryphon and Moohead (2004), stress is characterized as an individual's consequence to a stressor or stimulus that causes an abnormally high degree of both physical and mental strain. "The extent to which aperson feels overwhelmed by a situation or is unable to control or cope with its demands" is howthe Mental Health Foundation defines stress. The individual's cognitive appraisal of the circumstances dictates the ideas, feelings, and actions that follow (Michel & Ben-Zur, 2007).

Baum (1990) and Derogatis (1987) defined stress as an unpleasant emotional experience in which one feels as though one's surroundings are putting pressure on one's personality and causing unpleasant emotional reactions. Stress is generally experienced as a pressured, uncomfortable feeling, yet it can be highly subjective and inconsistent (Folkman & Lazarus, 1984). Stress, according to the Health and Safety Executive (2007), is an unfavorable response people experience when they are put under a lot of pressure or other kinds of expectations. Stressis described by Lazarus and Folkman (1984) as an actual or perceived mismatch between an individual's capacity to meet the needs of their environment for existence and the demands that their environment places on them.

There is growing public health concern about mental health issues (Jacob et al., 2020), stress is a common occurrence in the healthcare industry, and data

suggests that Perhaps more frequently among medical professions (Weibelzahl et al., 2021). Health care workers, and nurses in particular, encounter a range of stressful circumstances every day. These circumstances include dealing with patients who need assistance, their profession, which requires them to standfor extended periods of time and concentrate, and personal challenges (Arimon-Pagès et al., 2019).

Working in the medical field means that role-crossing and juggling a work-life balance.Stress at work has a negative influence on behavior and stress levels, which can cause problemsin the home. Given that work-family conflict is predicted to be a predictor of low family engagement, which in turn reduces work-engagement (Greenhus & Beutell, 2020).

Because healthcare professionals deal with stress on a daily basis, nursing is particularlywell known for being a stressful job. Liu et al, (2023) have identified certain stressors that may be associated with patient care, work, interpersonal relationships, and organizational problems. High levels of stress can lead to burnout, a condition characterized by mental, emotional, and physical depletion in healthcare workers. Additionally, interpersonal relationships both in one'spersonal and professional life can suffer from stress. Stress may make workers more likely to argue and have communication breakdowns with coworkers, which hinders cooperation and teamwork (Karim, 2022).

Given that teamwork and collaboration are frequently necessary to complete complex tasks, this may have an even greater impact on worker productivity. Worker performance has been demonstrated to be negatively impacted by stress, with related repercussions. Numerous challenges negatively affect nurses' well-being and degrade

the quality of their professional lives.According to research, assessing and attempting to improve one's professional quality of life is crucial for advancing one's personal, social, and health (ArimonPagès et al., 2019). Examining the variables associated with nurses' work-related quality of life reveals their potential to serve the community and has an impact on nursing care quality across the board. Thus, in order to givestaff members a higher quality of work life and create favorable settings, hospital management must be informed of the current circumstances (Morris et al., 2021).

In the healthcare industry, occupational stress is becoming a bigger issue and usually hasdetrimental effects on staff, social group, and persevering (Sutherland & Cooper, 1990). In addition to potential risks from patient interaction, such as the possibility of assault, Psychiatric hospital employees who work as nurses, clinical therapists, or mental health professionals also experience psychological and emotional suffering because of administrative and logistical problems (Murtagh & Jones, 1988). Unchecked professional stress can cause burnout and exacerbate existing health issues like diabetes, gastrointestinal issues, and cardiovascular issues (Gonzalez & Andrade, 2017).

The goals of health care systems, according to Bodenheimer and Sinsk (2014), are to lower costs, better enduring wellbeing, and improve patient experience. Tension however, operate counter to goals since they raise employee absenteeism, attrition, and use of sick time,which results in subpar patient care and higher costs for businesses (Szerk et al,. 2006).

A person's performance, effectiveness, and personal health are all impacted

by occupational stress, which is a physical and mental illness (Rubin et al., 2021). It is a feeling of mental strain brought on by work-related stress (Geson et al., 2009). Occupational stress is any aspect of the workplace that puts an individual in danger, whether it be due to unjust demands ora lack of facilities that may adequately meet their needs, according to Borg and Riding (1991).

Occupational stress, according to Karaek and Theorell (2019), is a psychological strain that results from encountering unpleasant feelings like tension, anger, concern, annoyance, anddespair because of situations connected to one's line of work.

Workplace stress and workload are significantly correlated, and stress also influenced therelationship between travel agents' productivity and job happiness. As a result, increased demands at work also lead to increased stress (Naqvi & Shabbir, 2017). Additionally, overworked employees suffered from physical and mental exhaustion as a result of work-relatedstress, which hindered them from keeping a healthy work-life balance (Mansour et al., 2016).

According to Subramaniam (2013), workplace stress is common and increases risks to one's physical and mental health, which could have negative consequences. When someone believes that their personal and social resources are insufficient to meet other people's expectations, they begin to lose control in this situation (Ismail et al., 2013). Additional researchrevealed that factors including workload, employment uncertainty, a lack of training, etc. might also contribute to work stress (Shkmbi et al., 2015).

The stress of working as a nurse is caused by a number of things, including

the workload,demands of the job, time constraints, emotional stability (nurses may witness death or other threatening situations on a regular basis), and resource availability. Studies show that lack of training, job uncertainty, workload, and conduct can all contribute to work stress (Khan et al., 2014).

Balancing many responsibilities, such as tending to several patients at once, and erratic work schedules, such as lengthy shifts because of a shortage of nursing staff. In this sense, challenges arise for nurses in the course of their work. According to one research, only 1.5% of nurses were happy with the caliber of their work. Additionally, a variety of studies shown that management actions may have a favorable or bad impact on nurses' quality of work life (Xie etal., 2021).

Nurses who work in difficult and emotionally charged environments all the time. It is common for nurses to be assigned to care for patients in unfavorable environments (Qun et al., 2019). It is anticipated that they will regulate their feelings and help patients and their relatives feel less distressed and suffering. Under such conditions, nurses may experience subtle forms ofmistreatment from coworkers and managers, which can exacerbate mental strain and lead to stress (Shafique et al., 2019).

Menzies noted in 1960 that in addition to meeting patients' physical needs, nurses also have to respond to their emotional needs for empathy and compassion. It is common for nurses to be asked to go above and beyond the call of duty when it comes to giving really critical care and comfort. In therapeutic environments, they may encounter unpleasant, repulsive, and frightening situations on a daily basis. Stress in the nursing profession is caused by a number ofthings, including ongoing

contact with ill and injured patients, handling complicated technical equipment with care, keeping an eye out for warning signals of patient distress, and knowing how to react in an emergency. In these types of environments, the demands placed on a nurse's efforts are frequently great and include a lot of time-consuming tasks. Daily tasks frequently involve ongoing interactions with distressed patients or their families or communication challenges with doctors and other nurses (Spitzer et al., 1990).

Stress arises in people when either good or unfavorable events occur in their lives. A person's mental and physical state can be altered by excessive stress, although certain stress is acceptable (Canadian Center for Occupational Health and Safety, 2000). In the modern day, nurses' knowledge of stress is crucial for improving the standard and effectiveness of healthcarefacilities. The patient's health benefits from this in exchange. Therefore, it is crucial to gauge a nurse's level of stress awareness in order to gauge how sensitive they are to their own stress levels.Stress can significantly affect how productive employees are in the healthcare industry.

High levels of stress can have a negative impact on the job performance of healthcare professionals, which lowers the standard of patient care (Kamila & Muafi, 2023). Medical errors,employee turnover, and absenteeism can all be exacerbated by stress. We may choose what happens next even though we are powerless to stop the painful or disturbing memories, judgmental thought patterns, and negative self-talk that triggers them. Through the shift from "doing" to "being," mindfulness offers a pause, a fresh start, and an alternate viewpoint on ourselves and the life we live in.

1.2 Mindfulness

According to Keng (2011), mindfulness is characterized as "consciousness of one's current experience without passing judgment and with acceptance." The cognition to be fully present and awake of oneself, same surroundings, and one's activities while avoiding being overly affected or responding to them is known as mindfulness. This is a trait that is inherent in every person and does not require elicitation. Being completely present and judgment-free in thepresent moment is the mental practice of mindfulness. It involves paying attention to ideas, feelings, and the environment and accepting them without becoming stuck or reacting.

"A growing body of research suggests that practicing mindfulness induces changes in both state and trait" (Tang, 2018). The aim of mindfulness meditation is to focus on being acutely aware of what you're sensing or feeling in the present moment, without explanation or judgment. Deep breathing exercises, guided imagery, and other methods to help relax the body and mind and reduce stress are all part of the mindfulness practice. It seems that practicing mindfulness lowers our stress response by changing activity in brain regions related to emotionalregulation and attention, which has positive benefits on several bodily functions. (Sutton, 2019).The only thing left for the individual to do is to simply work out how to choose it.

According to (Ortet et al., 2020), being mindful is observing and documenting thoughts, feelings,and bodily sensations in an impartial manner. As such, it can function as a tool to identify and manage problematic emotions while keeping a safe distance from judgment and self-analysis.

There is evidence that practicing mindfulness provides benefits both inside and outside of theworkplace. There is a connection between mindfulness and a decreased stress response (Gonzalez, 2015).

In addition to potential risks from patient interaction, such as the possibility of assault,Psychiatric hospital employees who work as nurses, clinical therapists, or mental health professionals also experience psychological and emotional suffering because of administrativeand logistical problems (Murtagh & Jones, 2018). Unchecked professional stress can cause burnout and exacerbate existing health issues like diabetes, gastrointestinal issues, and cardiovascular issues (Gonzalez & Andrade, 2017).

Bodenheimer & Sinsky (2014) state that the goals of health care systems are to lowercosts, increase patient satisfaction, and improve patient health. But stress and burnout work against these goals since they increase staff turnover, absenteeism, and use of sick days, which results in subpar patient care and higher costs for the organizations (Pauly et al., 2006). For thisreason, it is advised that healthcare professionals manage their stress and burnout in order to enhance their wellbeing (Bodenheimer & Sinsky, 2014).

Because of the stressors, effects, emotional control, unsupported work environment, andworkload associated with the nursing profession, there is no time in the schedule for nurses to reflect on their struggles in day-to-day living. These are the kinds of things that could have a detrimental effect on the facilities where psychiatric technicians work and their own quality of life. It's critical to control stress before it has major detrimental effects. Because mindfulness hasbeen shown to

help with stress reduction, it might be a useful strategy (Kabat-Zinn, 1990).

According to Brown et al. (2007) and Glomb et al. (2011), there is a positive association between mindfulness and happiness, life satisfaction, and well-being, and a negative correlation with stress, anxiety, and depression. "Paying attention on purpose in the present without criticismof one's own mental states in any given instant" is how proponents of mindfulness define it (Davis & Hayes, 2011).

General health results may benefit patients and staff equally when healthcare personnel are more mindful. When someone lacks mindfulness, they may avoid or find it difficult to acceptunpleasant, stressful, or challenging situations in medical settings. This can lead to low self- esteem and subpar patient care. The relationship between the connection and mindfulness cycleshas received more attention (Stevenson, et al., 2017). In the healthcare industry, occupational stress is becoming a bigger issue and usually has detrimental effects on staff, social group, and long-suffering (Sutherland & Cooper, 1990). Numerous empirical survey have demonstrated the effectiveness of attentiveness activity as a treatment for depression, anxiety, and stress reduction(Sawyer & Witt, 2010).

"Mindfulness, a Buddhist concept, is defined as "awareness that arises through paying attention on purpose, in the present moment, and non-judgmentally to the unfolding of the experience moment by moment" (Kabat-Zinn, 2003). Based on evidence research has shown that mindfulness is beneficial for treating addiction disorders, substance abuse, and pain(Goldberg et al., 2018).

In the case of hospitalized nurses, a mindfulness awareness level will help them effectively manage the stressors inherent in their line of work. Nurses who

practice mindfulness are able to reduce stress by managing their reaction to high performance and staying in the present moment. By emphasizing mindfulness practices, patient care quality is improved. Nursesbecome far stronger when they are able to control their emotions in response to shifting circumstances. Being aware will improve one's own wellbeing and lessen the effects of stress.

1.3 Psychological Well-being

An individual subjective evaluation of their level of emotional state and contentment with living is referred to as well-being. "Subjective well-being, perceived self-efficacy, autonomy, competence, inter generational dependency, and the awareness of one's capacity to reach one's full emotional and intellectual potential are among the notions of mental health." It can also be a condition of well-being in which people acknowledge their own talents, find waysto productively and efficiently, deal with daily stressors, and give back to their communities (Friedli, 2009). Psychological well-being has multiple facets. These elements include having a sense of autonomy in one's mental process, developing solid and meaningful relationships with others, and accepting oneself, behavior, and the capacity to manage a challenging environment ina way that best suits one's needs and values.

A person's general state of intellectual health and the absence of intellectual illness are mentioned as psychological well-being. It includes a range of elements that support mental wellbeing and a sense of purpose in life. A few essential elements of psychological well-being are self-acceptance, personal development, emotional control, meaning in life, self-worth, and contentment with one's lot in life.

The psychological health of paramedical healthcare workers isthe main subject of this study(Sharma & Aqarwal, 2011).

Research done with the intention of determining how a sample of paramedical healthcare workers' well-being contentment at work and mental health were impacted by their perceptions of hospital workplace characteristics. The data showed that, in both types of hospitals, workplace factors related to processes participatory making decisions and interacting with coworkers have been shown to be important indicators of psychological health and job happiness. On the other hand, job satisfaction and the psychologicalwell-being of healthcare workers were substantially predicted by workplace characteristics related to structure, such as coordination and work autonomy.

A person's drive towards significant life goals gives them a feeling of direction in life anda constant process of personal development. In Ryff's multifaceted paradigm, psychological wellbeing is explained positively, with each person's multiple factors meaningfully contributing to a productive personality.

DeBord in (2009) asserts that an individual's psychological well-being is strongly relatedto the type and quantity of roles they play, which in turn affects their self-esteem. Doing worthwhile and productive work is the best approach to increase one's sense of value and self- worth at work. Research indicates that the advancement and demonstration of workplace spirituality can not only tackle and alleviate stress and burnout problems but also enhance workers' overall health.

The state of one's mind is crucial for people, regardless of whether they are coping with acrisis in their lives, residing in the community, or working. To improve

psychological wellbeing,efforts must be taken to reduce common environmental or mental stressors in addition to detecting and treating mental and behavioral health disorders.

Although nurses are healed positioned to identify and prevent psychological issues like anxiety and depression in populations that are already at risk, their own psychological health andthe stressful situations they frequently encounter have a significant negative impact on their ability to function at activity. Seeing health inequities like food deprivation and dangerous housing can be stressful for workers, especially in community and public health settings. Nurses'health and well-being are impacted by the demands and expectations of their jobs, which in turn affects their ability to do their jobs effectively by increasing the risk of medical errors and compromising patient safety and care (Melnyk et al., 2018).

Nurses are able to read patients' minds. Nurses with a background in psychology are better able to comprehend the feelings and thoughts of their patients. This implies that nurses can tailor their care to the mental health needs of each patient. It functions similarly to a mind readerthat aids in healing. A patient might be brought into the medical facility for a number of reasons,consider a life threatening illness, an unpleasant accident, or recovery from surgery. They go through more than just physical evidence, regardless of the origin. As a result of the negative feelings they frequently experience such as fear, uncertainty, perplexity, and anxiety nurses mustdo everything within their power to promote comfort and relaxation.

Every country aspires to greater standards for mental health and medical

care, which means that global health reforms and adjustments are constant. Mental prosperity is characterized as the state in which constructive and negative effects are balanced. According to Okeke et al. (2018), a person's functioning and outcomes across several distinct but related dimensions, including general, mental, and physical healthfulness, are evaluated to determine their level of well-being.

A higher quality of life is strongly correlated with psychological well-being. Happiness,contentment, and general well-being are all higher in people who have strong psychological health. It makes life more meaningful and fulfilling by fostering a feeling of purpose, meaning, and fulfillment. It is crucial to remember that psychological well-being includes both the presence of positive mental health traits and experiences as well as the absence of mental healthillnesses.

Every country strives for greater standards in psychological well-being and healthcare,according to (OJ et al., 2018), which suggests continuous improvements and health reforms globally. You work in a hard profession, nurses. Nursing professionals deal with moral, psychological, emotional, and physical issues on the job. Depending on the role and setting of the nurse's work, these could include accepting the risk of infection and verbal or physical abuse,meeting physical needs, supervising and helping with the care of multiple patients with complex needs, having difficult conversations with patients and their families, and taking on challenging social and ethical issues. Everyone has the ability to improve their psychological well-being through a variety of techniques, including asking for help, taking care of themselves, and creating constructive coping mechanisms.

1.4 Rationale

Occupational stress is prevailing all over the world and effect every profession. Occupational stress is akey contributor to health problems, according to studies from a range of scientific fields, including higher education, psychology, and medicine (Taahashi, 2016). Working as a frontline, nursing profession face a lot of stress because of multitude of factors, including workload, long working hours, difficult working conditions, compensation, general status and lack of support, make nursing one of the most stressful occupation in Pakistan. According to Mansour et al., 2016 workers who were overworked experienced both physical and mental tiredness as a result of work stress, which prevented them from maintaining a healthy work-life balance.

All over the world different training were given to assess and understand the level of stress. Multiple training given to nurses for coping and relaxation phase given to them. For thereduction of stress vocation given to nursing staff as well. But unfortunately there is no such thing in Pakistan. Work place stress and workload are linked, and women often experience higher level of stress then men (Madadzadeh et al., 2018).

Nursing working in different department have different level of stress. Stress vary between departments on the bases of role and duties among nurses, as some departments have more stress and some have low level of stress. Researches have done in Pakistan on stress but nocomparative study done in the past for assessing the level of stress among different departments of hospital.

The concept like mindfulness and awareness training is very unpopular among nurses in Pakistan. Researches find out that many nurses in Pakistan don't know about their level of mindfulness to assess nursing stress. Nurses in Pakistan report low levels of mindfulness that may be due to a number of multiple factors, comprising of an inadequate instruction in mindfulness practices and a lack of time for self-care. If the nurses know about the level of mindfulness, they will work better to stay in present and now. And don't take stress to home which effect on different domains of life, this stress led to work family conflict as well. In return this conflict cause more stressful environment. According to Ismail et al, (2013) a person start to lose control in the scenario when they feel that their social and personal resources are insufficientto handle the expectations of others.

Nurses psychological well-being and different the stressful situations which they regularly face will impact their work performance. During working hour's nurses faces several challenges like emotional, mental, physical and ethical challenges. A higher quality of life is associated with psychological well-being. Happiness, contentment, and general well-being are allgreater in people who have great psychological health. The pressures and expectations of the job have an influence on nurses' health and well-being, which in turn has an impact on their performance by raising the possibility of medical errors and jeopardizing patient safety and care(Melnyk et al., 2018).

Moreover in the past researches, data were collected from one setting rather than from different wards of hospitals. Especially during the time of Covid-19 researches conducted on nurses through online methods rather than face to face.

Data will be collect from participants in face to face setting will give better understanding of their mindfulness level. Research on nursesin Pakistan are limited and confined to only one setting which can't be generalized. In this research, data were collected from different settings or cities which give more reliability.

Mindfulness was a skill it can reduce stress and increase psychological well-being of a person with high stressful jobs. Nursing is one of the highest stressful job as they work as frontliner and their work is stressful on everyday biases like stressful emergency duties based on trauma, injuries and death as well. The studies conducted in the past focuses on stress, workingstress and how to cope up with stress. Mindfulness can help them to go through this and help them to cope and function well. The physical, psychological, and social components of their employment produce an immense amount of stress among nurses. An environment that lowersprofessional stress and promotes career development is vital for any organization, according toresearch from Pakistan University of Lahore on the impact of career development and professional stress on organizational commitment among nurses. A hospital's stress-free workplace helps both the staff nurses and the corporation greatly (Kiran, et al., 2019).

It is essential to assess the level of mindfulness and to manage the stress level of hospitalnursing staff due to rise in stress. It will aid in enhancing the hospital nursing staff's psychological and mental well-being. The current study will not only help hospital nursing staffbut will be effective for all population. The research will highlights the importance of mindfulness in Pakistani society as well.

1.5 Significance of study

Mindfulness was a skill it can reduce stress and increase psychological well-being of a person with high stressful jobs. Nursing is one of the highest stressful job as they work as frontliner and their work is stressful on everyday biases like stressful emergency duties based on trauma, injuries and death as well. Mindfulness can help them to go through this and help themto cope and function well.

The studies conducted in the past focuses on stress, working stress and how to cope up with stress. Nurses are subject to considerable stress, that arising from the physical, psychological, and social aspects of their work. In Pakistan University of Lahore, research conducted on Impact of Professional Stress and Career Development on Organizational Commitment among nurse's results shows that it is very essential for every organization to provide that environment which reduces the level of professional stress and increase career development. Stress-free working environment in a hospital have tremendous effect for both the organization and its staff nurses (Kiran, et al., 2019).

It is essential to assess the level of mindfulness and to manage the stress level of hospitalnursing staff due to rise in stress. It will aid in enhancing the hospital nursing staff's psychological and mental well-being. The current study will not only help hospital nursing staffbut will be effective for all population. The research will highlights the importance of mindfulness in Pakistani society as well.

Summary

This chapter elaborated the background of the study, introduced and explained occupational stress, mindfulness and psychological well-being, along with problem statement, rationale, significance and objectives of the study.

CHAPTER 2

LITERATURE REVIEW

Study conducted on health care workers in Kashmir which demonstrates how stress has a detrimental effect on workers' performance in addition to how burnout has a positive relationship with stress and a negative link with work performance as well. By decreasing stress and burn out, health care employees show better performance at work (Shakeel & Ahmed 2023).

Stress is ordinary issue in the healthcare industry, as employees are frequently subjected to a variety of pressures. These pressures could have to do with patient care, task strain, interpersonal connections, and organizational issues (Liu et al., 2023). Medical professionals who are frequently under stress may become burned out, which is a condition of extreme emotional, mental, and physical depletion.

According to Huang et al., (2023) stress can harm one's physical health, which can have an even worse effect on an employee's performance. Numerous physical health issues, including gastrointestinal, musculoskeletal, and cardiovascular illnesses, have been related to chronic stress. These medical issues may result in less productivity at work.

It is well known that stress has a negative impact on worker performance. Its impacts also extend to interpersonal relationships and physical health in addition to cognitive and emotional well-being. Employers must therefore implement stress-reduction policies and foster employee wellbeing in order to lessen the detrimental effects of stress on worker performance (Deter et al., 2023).

According to Hamouche, (2023) various modifications to the physical workspace, such as the provision of functional workstations and the reduction of noise levels, are examples of organizational level interventions. Physical factors that contribute to employee stress and burnoutcan be lessened with the aid of these strategies.

A nurse's background, training, and disposition vary, as does the level of care they can provide based on the patient's needs. Despite issues like inefficient regulations and processes, many nurses are committed to providing their patients with the finest care possible, despite thehurdles that the nursing profession undoubtedly faces today. "Caring" is described as "paying close attention to the unique needs of individuals in precarious situations" in the context of nursing (Fong et al., 2023).

Nurses are under constant pressure. This poses a number of challenging issues for both nurses and their patients. More and more behavioral scientists and psychologists are focusing onworkplace mental health, especially in high-stress professions (Nourry et al., 2014). It is well known that nurses are some of the most illustrious workers in the healthcare industry. They playa crucial role in the healthcare system, supporting and enhancing local health services (Alighias,2023).

Every day, tension and worry are faced by nurses. It consequently presents a number ofdangerous challenges for both nurses and patients. The results of a study involving 198 nurses who worked in the emergency departments of hospitals in Multan indicate that job performanceplayed a significant mediation role between coping and mindfulness. Situational anxiety and mindfulness are mediated by

coping strategies and work performance (Saba et al., 2023).

Chinese study focused on ward nurses Ward nurses were noted to exhibit several aspectsof mindfulness, including being in the present moment, paying attention, and being receptive to new ideas. Positive benefits resulted from practicing mindfulness among ward nurses, includingimproved wellbeing and decreased levels of anxiety, sadness, and burnout (Chen et al., 2023).

Given the significant demands that nursing faces in terms of providing services, ward nurses commonly face a variety of obstacles and challenges. The majority of these common elements include rules, patient care issues, and unmet patient needs (Garland et al., 2023). As aresult of their heavy workload, sporadic and sometimes ineffective treatment, and the stress of caring for ill patients, ward nurses may experience detrimental effects on their physical and mental well-being (Reddy & Roy, 2023).

 In today's more complicated healthcare organizational environments, meaningful nurse-patientconnections are becoming increasingly important, but little is known about the specific characteristics that drive nurses' desire to care (Denton, 2022).

Additionally, organizational interventions aim to lessen stress and enhance employee well-being by enhancing the working environment and conditions. Individual, group, and organizational levels are among the organizational levels at which these interventions may bedirected. Individualized interventions could involve various training courses on coping mechanisms and stress management, which could offer employees going through burnout or stress

guidance and support (Gray & Medeiros, 2022).

In addition, stress can negatively affect interpersonal interactions in both personal and professional contexts. Stress may make workers more prone to disagreements and poor communication with coworkers, which could result in less cooperation and teamwork (Karim,2022).

According to Chami-Malaeb (2022), High levels of stress among healthcare professionals can lead to burnout, which is characterized by a loss in productivity. Moreover, burnout can raise turnover rates and have a detrimental effect on job satisfaction.

Excessive stress can wear people out physically and psychologically, which diminishes their ability to function at work and lowers the importance of patient care (Aman-Ullah et al., 2022). Burnout among healthcare professionals may make them less vigilant and more prone tomedical mistakes, which could lower the standard of care provided to patients (Ali et al., 2022).

According to Zaghlou, (2022) when a worker's abilities, resources, or demands don't align with the requirements of the job, they might result in a variety of physical and emotionalreactions. Although it is acknowledged that nursing is a stressful profession, this cannot be further explained by an increase in workload.

The largest workforce in the healthcare industry is made up of nurses, and one of the main causes of nursing stress and shortage globally is an unfavorable work environment Study conducted by Aburuz (2022) in which he concluded that, problems related to peers and not enough preparation to deal with patient's

emotional issues have continuously raised as the leaststressful issues in most studies.

Long-term stress can exacerbate the risk of mental health conditions including anxiety and depression as well as lead to the onset of physical problems. As a result, the nurses may havebad health. The greatest source of stress for nurses is death or the dying process itself (Golubovicet al., 2022).

Furthermore conflicts with senior supervisors, unhelpful demands from patients and theirfamilies, and workload have been identified as top causes of occupational stress. Other stressors such as uncertainty in regard to treatment, conflicts with other health-care professionals, and discrimination have been recognized as among the top four causes of occupational stress (Abu- Salameh et al., 2022).

According to study conducted by the Nursing Council of Iran, the level of stress that theexperiences that nurses were having were typical. Anxiety among patients is a common side effect of care in any kind of nursing institution. Whether they be mental or physical, 75% of Iranian nurses suffer from some form of illness, and the severity of their ailments varies greatly(Taghinejad et al., 2022).

In their field of work, nurses primarily deal with events, pain, suffering, and patient mortality. Inadequate emotional responses, such as stress, worry, and depression, are now acknowledged as crucial components of modern nursing and can have dangerous consequencesfor nurses as well as patients (Jannati et al., 2021).

According to Lin et al. (2020), the deliberate concentration of attention on the internal and outward engagement of what is happening in the present moment is known as mindfulness,and it is typically taught through a variety of meditation techniques. However, mindfulness is a transforming process that increases one's ability to "experience the current moment" with"acceptance," "attention," and "awareness," according to Sarazine et al, (2021).

When employing the breath to help focus attention, people must understand that their thoughts will stray. The more they can accept this, the easier it will be to bring attention back to the present moment (Said & Kheng, 2019). Individuals who struggle with emotions are aware oftheir physical experiences, such as developing their current mental states and attention, without obsessing over the past or the future (Lee et al., 2019).

The foundation of mindfulness is being aware of the situation at hand. mindfulness encourages self-awareness, focuses on the feelings and state of the moment, maintains mental and emotional clarity instead of being hijacked by emotions, and avoids worrying about numerous obstacles at work and unfavorable thoughts about the past or future (Suleiman-Martoset al., 2020).

According to Perrula-de Torres et al. (2019), being in the present moment liberates theindividual from any unpleasant views about the past or the future as well as from thoughts thatare dreadful or anxious.

Motivation at work place is found to be closely related with job satisfaction and psychological wellbeing. People are motivated to behave in a way that made them happy in the past and ignore behaviors which have led them being blue/ sad (Nesse, 2019). Unlucky, health related problems in the workplace are on the peak resulting in high cost, not only for the organization like reduction in productivity , high level of turnover, and absenteeism rates, but also for people such as psychological stress and quality of life decreases (Vezina et al., 2019).

In Abakaliki research conducted to examine the impact of Motivation on the psychological wellbeing among Nurses. Results show that motivation anticipated psychologicalwellbeing among Nurses. Nurses should be highly motivated in order to continue stable psychological wellbeing (Okeke et al., 2019).

Research done on nurses to look at the connection between psychological health and stress. There was a strongly statistically negative link between psychological wellbeing and stress, with one third of the 200 nurses surveyed having moderate levels of stress and one thirdexperiencing low psychological wellbeing (Attia et al., 2019).

According to some theories, stress is an organism's physiological response to a situationthat it perceives as hazardous and requiring more energy, triggering a variety of defense mechanisms. According to Giudio et al. (2019), it can also refer to a certain dynamic that existsbetween an individual and their environment that they perceive as detrimental or that puts theirwell-being at danger.

Continuous stress have fatal effects on individual's health. Stress maybe the cause or worsen variety of diseases, together with coronary artery disease,

blood pressure, kidney, inflammatory diseases, asthma, in return these diseases lead to many other fatal conditions. When the sympathetic nervous system is triggered by an acute stress reaction, the body's homeostasis (temperature) decreases and the heartbeat, breathing rate, blood pressure, muscletension, and brain activity increase (Shultz, 2019).

Every country aspired to achieve excellent standards for mental health and medical care,which translates into global advancements in changes and health reforms. Mental health is reflected in the equilibrium between favorable and unfavorable effects. Evaluation of one's functionality and overall performance in addition to a wide range of interconnected aspects, suchas world peace and physical and mental health, constitutes positive well-being. A favorable stateof physical, mental, and social well-being is known as psychological well-being. It is more than only the lack of illness and disability (Okeke, 2018).

According to an Egyptian study, a higher percentage of nursing students 40.2% than those in other studies employing various distress measures in both industrialized and developingnations reported significant levels of stress. The detrimental consequences of stressors on cognitive function and health, i.e., the emergence of mental disorders such depression, anxiety, eating disorders, sleep disorders, and substance abuse, make stressor research crucial for nursingstudents. Additionally, stress can lead to poor work and communication among students, which lowers the standard of healthcare services (Criollo et al., 2018).

When the level of stress become high as a result psychological wellbeing impaired. A research conducted in Khyber Pakhtunkhwa Pakistan, to investigate the

association between secondary school heads' psychological well-being and their perception of professional stress. Thefindings demonstrated a detrimental relationship between stress and psychological health (Suleman, 2018).

Study findings by Divya et al., (2018) in which they explore stress can impact health of nurses working in hospitals leading to various somatic complaints. Researcher compare the levelof stress among nurses based on their working years of experience. 51.5% nurses suffer from mild, 34% face moderate, and almost 2.10% experienced severe level of stress. Disagreement with supervisors, patients, and families of patients, and over burden work were the main reason of occupational stress although differentiation was least affected domain. Nurses with 6–10 yearsof working experience had maximum level of stress. The stress levels linked with the extent of somatic complaints.

Furthermore nurses with six to ten years of working experience had the highest level of stress, and this was notable higher than nurses with >15 working years of experience. In Serbia study conducted on nurses between the ages ranges of 30–39 years experienced a higher level ofstress in contrast to their younger or older fellows, it could be possible that the mid-level nurses have both big burden of responsibility or high frequency of workload which could have contributed to increase the level of stress. On the other hand, increased experience on the job may have helpful to the senior nurses as they develop more protective mechanisms to cope up with stress (Sad, 2021).

There are several potential causes for an increase in stress level, including unclear job responsibilities, and work over load, assignments and interpersonal

conflicts among employees (Mali & Suryawanshi, 2013). Most working mothers struggle to manage their career and familyobligations, and they experience a great deal of stress doing so, compared to non-working mothers (Sultana, 2012).

Due to lack of spousal support and a stronger negative remarks made by superiors, women were shown to have a higher work-life imbalance then men. Females must balance moreresponsibilities between work and family life since they feel more responsibility for their children and elderly at home (Punia et al., 2019).

Research on the connection between job and psychological well-being and family conflict which shown that it is connected to job stress, burnout, and decreased satisfaction from job (Fread et al., 2007). Additionally, stress played a role in the relationship between travel agent's job satisfaction and productivity. Consequently, a rise in work demands also cause a risein stress (Naqvi & Shabbir, 2017).

According to Nixon et al., (2011) there are substantial links between professional stress and physical symptoms of stress. Long term work place stress can cause anxiety, depression, andburn out, sleeping issues, psychological strain and job dissatisfaction, as well as physical and mental disorders (Colligan& Higgins, 2005).

Individuals who believed they were required to perform tasks that beyond their own capabilities tended to be less satisfied and to feel more negatively about their jobs (Netemeyer,2016).

According to studied conducted by (Shkmbi et al., 2015) work stress is also a result of work load, job uncertainty, a lack of training , people behavior etc.

Work place stress is normaland increases hazard to one's physical and mental

health, which might have determine effects, claims Subramanian (2013).

2.2 Theoretical Framework

In line with the stress hypothesis, the four fundamental components of the Neuman system paradigm are the environment, person, nursing, and health. "A composite of variables (physiological, psychological, sociocultural, developmental, and spiritual) consisting of a centralcore or core survival factor structure and surrounding concentric defensive rings" is how one defines a human being, a family, a community, or a social problem. In order to protect itself while interacting with the environment, the client system develops what are known as "defense lines." The client's typical state of healthiness might be understood as the regular line of defense. By comprehending this model, nurses may support clients efficiently as it provides an improved understanding of the relationship among the working environment and client interactions (Dahamoon & Hnnoodee, 2023).

According to mindfulness stress buffering model, by being aware of the effects of mindfulness on health through the mechanism of decreasing stress can be very beneficial for rapid recovery of patient because when a health care worker come to know about their perceivedstress level, then they try to decrease or overcome upon it (Kashani et al., 2020). Mindfulness yields beneficial effects in improving individual's quality of life and improving mental health bythe reduction of perceived stress.

As the nurses work in hospital as frontline worker, so they face complicated situations,injuries, trauma, deaths, bullying by patients and their attendants. Nursing is itself a very stressful job due to various factors like work duties, long shifts, work load, working conditionsand many more. When nurses don't have awareness about stress and their level of mindfulnessthen how can nurses cope up with these kind of situations. And in return nurses psychological wellbeing also disturbed. If these issues don't resolve on time it will effect on other daily activates as well.

A comprehensive description of how mindfulness can lessen the adverse impacts of stressand boost both psychological and physical well-being can be found in the Mindfulness Stress Buffering Model. Mindfulness is a potent tool in stress management because it improves present-moment awareness, nonjudgmental acceptance, cognitive flexibility, emotion regulation, self- compassion, and improved interpersonal interactions

Rumination is an essential factor to the emergence and upkeep of stress and grief, and mindfulness aids minimize it. Mindfulness helps people interrupt the cycle of stress and negativethoughts through lowering rumination. Through a range of processes, mindfulness boosts copingmechanisms and lessens the impact of occupational stresses, which enhances psychological well-being of nurses.

According to the theories of mindfulness, it has to do with not interfering with experienceby letting input remain conscious and just viewing what is happening. Buddhism describes it as a form of meditation where practitioners seek to focus on

and are present in the here and now. This idea has been linked to western influences in multiple ways. Meditation is a popular yoga technique that improves awareness of the human body. The mental process resulting in an ongoing awareness of the experiences that take place in the here and now (Kabat-Zin, 2015).

METHODOLOGY

3.1 Research Design

The design of research used in present study is a correlational research design, as it is quantitative research. The mediating relationship between the variables were measured.

Objectives

- To examine the relationship between occupational stress and psychological well-beingamong nurses.

- To investigate the impact of mindfulness on psychological well-being among nurses.

- To assess mediating role of mindfulness in the relationship of occupational stress and psychologicalwell-being among nurses.

- To study significant departments differences in occupational stress, mindfulness andpsychological well-being among nurses.

- To study significant gender differences in occupational stress, mindfulness andpsychological well-being among nurses

Hypotheses

- There would be a negative relationship between occupational stress andpsychological well-being among nurses.

- There would be a significant positive relationship between mindfulness and psychologicalwell-being among nurses.

- Mindfulness will mediate the relationship between occupational stress and psychologicalwell being among nurses.

- There would be significant departments differences in occupational stress mindfulness andpsychological well being among nurses.

- There would be significant gender differences in occupational stress, mindfulness andpsychological well-being among nurses.

3.3 Sample

The research sample was comprised of 250 nurses from 8 different departments of hospital across twin cities. The sample was identified and participants were chosen "on purpose,"not randomly from specific group. Sample size was determined by the help of G-Power.

3.4 Participant

Participants (nurses) selected from different wards of hospital (cardiac ward, peeds ward, ENT ward, surgery ward, Oncology ward, derma ward, gynae ward and ICU) from twin cities Islamabad/ Rawalpindi public and private hospital. The maximum age range of nurses were 25-45 years (early adulthood and middle adulthood) according to World Health Organization (WHO, 2023). Both male and female nurses were considered as part of this study.

3.5 Inclusion Criteria

- They must be permanent faculty as a nurse working in any hospital.

- Nurses working in both public and private hospital.

- Both male and female nurses considered in this study.

3.6 Exclusion Criteria

- The nurses working in the hospital less than 5 year experience didn't considered in thestudy.

- Nurse's whose age were less than 25 year didn't take part in study.

3.7 Operational definitions

Occupational Stress

For present study occupational stress defines "as the negative physical and emotionalreactions brought on by a variety of psycho social factors, such as

working circumstances, opportunities for advancement and personal growth, social support, workplace bullying, andsigns of occupational stress".

Mindfulness

For present study, Mindfulness is explained as "a sustained, receptive attention and awareness to present events and experience that helps in disengaging individuals from automaticthoughts, habits and unhealthy behavioral pattern" and hence might be crucial in promoting knowledge and self-approved behavioral control that associates with well-being enhancement (Brown & Rayan, 2003). In this study, it will be taken as the level of attentiveness while being inthe present moment.

Psychological well-being

Psychological well-being refers to a person adequate mental health. Psychological wellbeing refers to how individuals assess their lives; these assessments might be as perceptionsor as influence (Ryff &Singer, 2013).

3.8 Assessment Protocols

Demographic Form

The demographic form include age, gender, material status, family type, financial support, duration of job, monthly income, department name, Any responsibility of taking care of any elderly.

Mindfulness Attention Awareness Scale (MAAS)

Richard Ryan and Krik Warren Brown created the Mindfulness Attention Awareness Scale in 2003. The measure of one's level of attention to the current moment consists of fifteen items (Brown & Ryan, 2003). This is a 6 point Likert scale will use, and to calculate scores, the15 item mean will use. Greater scores correspond to dispositional mindfulness at higher levels. There is no subscale or reverse scoring. Cronbach's alpha for the 2016 study evaluating the psychometric properties was 0.92. So, MAAS demonstrates that it is a valid and reliable scale (Ruiz et al., 2016).

Occupational Stress Questionnaire (OSQ)

A questionnaire on occupational stress has been developed by Malik et al., (2017). A questionnaire intended to assess potential sources of work stress is focused on nurses working in hospital settings. It has total 29 items. Good working conditions, social support at work, possibilities for advancement and development, workplace bullying, and signs of job related stress and the sub scales. On all five-point scales, responses were provided (0 being strongly disagreed, 1 being disagreed, 2 being neutral, 3 being agreed, and 4 being disagreed). The scales dependability ratings ranged from = .74 to = .92. The sub scales Cronbach's alpha values are .75, 0.86, 0.74, and 0.92.

Psychological well-being Scale (PWB)

Psychological wellbeing scale was developed by Ryff in 1989. It is used

to investigateindividual's eudemonic well-being. There are 18 items on the scale with five sub scales and reverse scoring as well. The Cronbach's alpha value for the Psychological well-being scaletypically ranges between 0.70 and 0.80 in various studies with good reliability and validity.

3.9 Procedure

First of all researcher approached different hospitals for data collection and submitted permission form along with questionnaire and sort the permission from the concerned department of the hospitals. After seeking permission researcher collected data on one to one bases as they were busy in their official work. The study duration, nature and tittle was describedto the participants. Researcher address about confidentiality, procedure and purpose of study.

The researcher was approached nurses from different wards (cardiac ward, peeds ward, ENT ward, surgery ward, Oncology ward, derma ward, gynae ward and ICU) of hospital private and government for the purpose of data collection. OSQ, PWB and MAAS used to assess the level of stress, psychological well-being and mindfulness. Informed consent taken from participants. Questionnaire were given to participants and ask them to fill. After the collection ofdata SPSS statistical analysis was used. The data collection were prolonged on the period of 4-5 months. The nurses were appreciated for their active participation in research and appreciated for their given time.

3.10 Ethical Considerations

Throughout the course of this research, the maintenance of ethical

guidelines of the utmost importance. These criteria were based on numerous key elements. To begin, obtaining written consent from all participants was a fundamental principle that ensure their voluntary engagement in the research. Participants supplied with detailed information about the study objectives and scope via the consent form. The autonomy of each participant respected, and all obtained data kept strictly confidential for the research purposes only. Participants could leavethe research at any moment, with no repercussions if they did.

CHAPTER 4
RESULTS

The current research aimed to investigate the relationship between occupational stress, mindfulness and psychological well-being among nurses. The data was analyzed in four steps. Inthe first step descriptive statistics of demographic variables were computed. In the second step, the reliability analysis of all study variables was computed using the Cronbach alpha. In the thirdstep, person product moment correlation analysis was carried out to find the relationship. Furtherto explore the association between occupational stress, mindfulness and psychological well- being. In fifth step, an independent sample t test was used to explore the gender and marital differences in terms of study variables mindfulness, occupational stress and psychological well- being.

Lastly, mediation analysis was employed to investigate the role of mindfulnessas mediator between occupational stress and psychological well-being.

Table 1

Descriptive Statistics of Demographic Characteristics of the Sample, (N=250).

Sample Characteristics	*f*	*%*	*M*	*SD*
Age			35.46	7.27
25 to 35	135	54.0		
36 to 45	94	91.6		
46 to 55	21	98.4		
Gender				
Male	106	42.4		
Female	144	57.6		
Marital Status				
Single	54	21.6		
Married	196	78.4		
Family System				
Joint	141	56.4		
Nuclear	109	43.6		
Financial Support				
Yes	141	56.4		
No	109	43.6		
Job Duration (years)			2.69	0.97
1 to 5 years	27	10.8		
6 to 10 years	87	34.8		
11 to 15 years	73	29.2		
Above 15 years	63	25.2		
Salary (Thousand Rupees)				
20 to 60K	50	20.0		
61 to 100K	132	52.8		
More than 100K	68	27.2		
Adultery Care				
Yes	139	55.6		
No	111	44.4		
Department/ Wards				
Cardiac	23	9.2		
Gynee	38	15.2		
Peeds	34	13.6		
Eear Nose Throat (ENT)	34	13.6		
Surgery	33	13.2		
Oncology	30	12.0		
Derma	24	9.6		
Intensive Care Unit (ICU)	34	13.6		

Note. *M=mean, SD=standard deviation, f=frequency, %=percentage.*

Table 2

Psychometric properties for OCS MAAS and PWB scales

Scales	k	M	SD	Range		α
				Potential	*Actual*	
Occupational stress Scale	29	53.86	13.34	116	25-90	.70
Mindfuness Attention Awareness Scale	15	57.14	12.74	90	26-86	.80
Psychological wellbeing Scale	18	84.90	10.43	126	57-112	.60

Note. *K= no. of items, α= Cronbach's alpha*

The above table showed the descriptive statistics (mean, standard deviation, actual and potentialranges) and internal consistency using cronbach's alpha reliability of occupational stress scale, mindfulness attention awareness scale, and psychological wellbeing. The reliability evaluation exhibited internal good consistency ranging from .0.6-0.80 for the constructs

Table 3

Pearson Bivariate correlation between Occupational Stress, Mindfulness and Psychological Well-being.

	Variables	1	2	3	4	5	6	7	8	9
1	Occupational Stress	-	.83**	-.78**	.12*	.10	-.11	-.01	.04	.03
2	Mindfulness		-	.88**	-.11	-.07	.12*	.067	-.009	-.002
3	Psychological Wellbeing			-	-.19**	-.11	.18**	.11	.00	.02
4	Autonomy				-	.44**	.13*	.18**	.08	.24**
5	Personal					-	.30**	.28**	.16**	.49**
6	Positive						-	.41**	.28**	.44**
7	Purpose							-	.25**	.45**
8	Self-acceptance								-	.34**
9	Environment									-

Table 3 shows the Pearson bivariate correlation between occupational stress, mindfulness and psychological well-being. Correlation analysis showed that mindfulness was significantly positively correlated with psychological well-being (positive, purpose, environment). There was a significant positive correlation of psychological well-being with positive, purpose. There was a significant negative correlation of psychological well-being with autonomy and personal. Furthermore occupational stress was significantnegatively correlated with psychological well-being (autonomy, positive, and environment).

Table 4

Standardize estimates direct effects for occupational stress mindfulness and
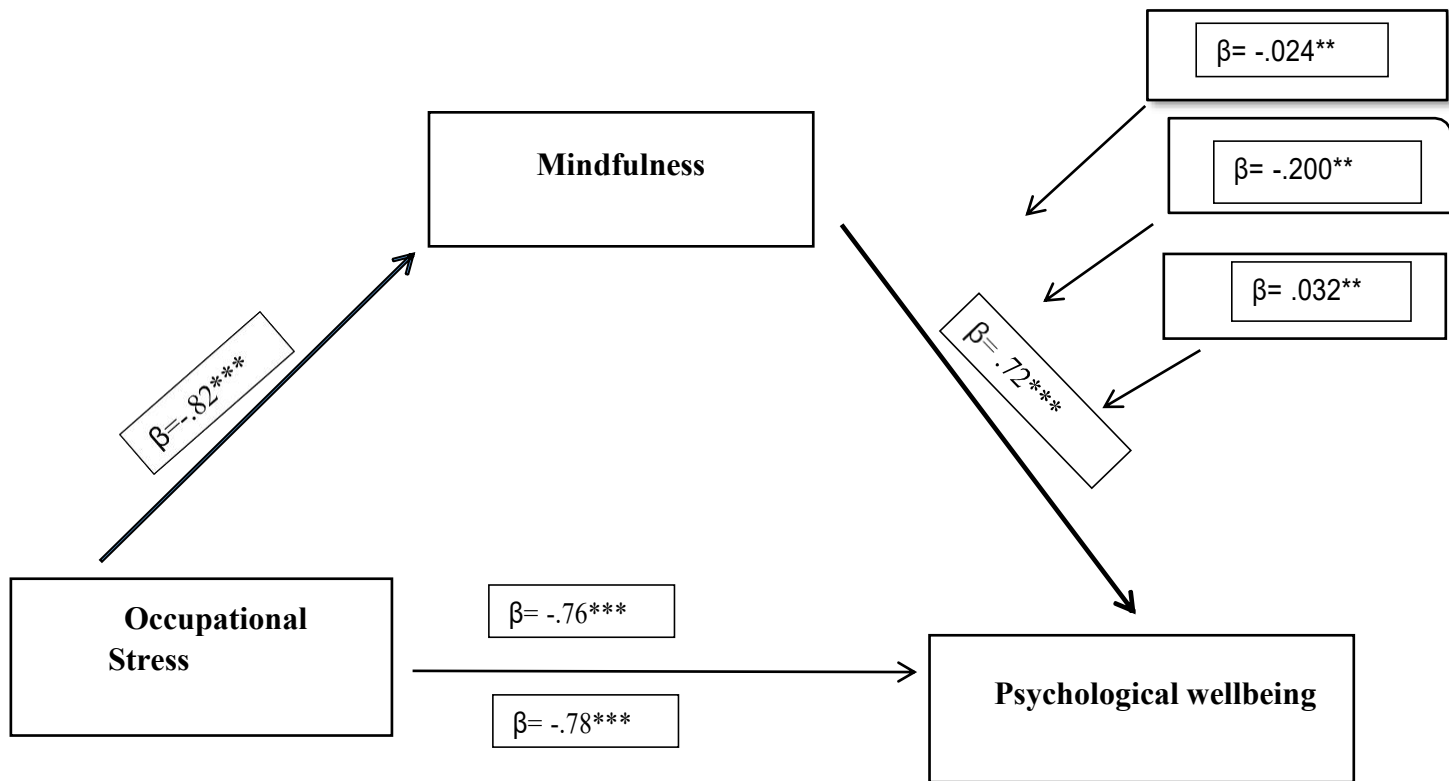
psychological well-being among nurses (N=250)

Variables	Mindfulness		Psychological well-being	
	β	SE	β	SE
OC	-.82***	.02	-.17***	.037
Mindfulness			.72***	.04
Co variates				
Gender			-0.02**	.90
Salary			-.00**	1.10
Job duration			.19**	.99
Age			-.20**	.12
R square	.70		.78	
F	197.4		223.2	

Note. *$p< .05$. **$p< .01$. ***$p< .001$

This table shows the results of mediation analysis, results of

direct effect showed that occupational stress was a significant

negative predictor of mindfulness (70%) and psychologicalwell-being

(62.8%), similarly mindfulness was a significant positive predictor of

psychological well-being (78.4%).

Table 5

Standardize estimates indirect effects for Occupational stress Mindfulness and Psychologicalwell-being among nurses (N=250)

Variables	Psychological well-being		95% Boot CI	
	β	SE	Boot LL	Boot UL
Mindfulness	-.60	.04	-.70	-.50

Note. *p<.05. **p<.01. ***p<.001

Table shows the result of indirect effect, the indirect effective found that mindfulness was found to significantly mediate the relationship between occupational stress and psychological well-being which showed that an increase in occupational stress tends to decrease mindfulness, and a decrease in mindfulness tends to decrease psychological well-being.

Figure 2

Pathway model of mediation process for occupational stress and psychological well being,(N=250)

The model depicts the mediating effect of mindfulness on relationship between occupational stress and psychological well-being among nurses. The model is depicting that occupational stress was significantly relating with psychological well-being both before and after introductionof mediating variable which concluded that mindfulness was partially mediating the relationshipbetween occupational stress and psychological well-being

Table 6

One way Anova between departments of hospitals and Occupational Stress, Mindfulness, and Psychological well-being, (N=250)

Variables	Cardiac		Gyane		Peeds		ENT		Surgery		0ncology		Derma		ICU				
	M	SD	M	SD	M	SD	M	SD	M	SD	M	SD	M	SD	M	SD	F	η2	Post hoc
OC	50.09	17.13	50.18	17.95	54.65	24.01	62.15	22.55	54.94	26.71	52.33	19.40	51.71	19.69	63.18	21.44	1.82	.05	
MAAS	71.96	15.52	58.24	17.49	65.38	18.67	55.29	19.72	66.27	19.68	66.83	16.15	65.42	19.34	59.47	16.37	2.76**	.07**	1>4
PWB	88.61	13.21	79.18	12.47	85.38	16.05	77.07	15.93	83.91	14.91	84.80	13.81	83.21	14.56	76.21	13.38	2.80**	.07**	1>8

Note. M= Mean SD= Standard Deviation η2= Effect Size

This table shows results of one-way analysis that was carried out in terms of occupational stress, mindfulness and psychologicalwell-being variance in terms of hospital departments. The results depicted that there was insignificant difference found among occupational stress. It was found there were significant

difference found among mindfulness and psychological well-being. For further pairwise comparisons, a post

hoc test (Gabriel) was applied which shows that in cardiac ward mindfulness is greater which shows thatnurses

in cardiac ward experienced higher levels of mindfulness as compared to nurses in ENT.

Table 7

Independent sample t- test analysis of Gender, Occupational Stress,
Mindfulness andPsychological well-being among Nurses in (N=250)

Variables	Male		Female				
	(n=106)		*(n=144)*				
	M	*SD*	*M*	*SD*	*t*(248)	*p*	Cohen's *d*
OC	54.00	22.38	56.10	21.33	-.752	.453	0.096
MAAS	66.2	18.63	60.67	18.00	2.36	.019	0.3018
PWB	84.39	15.19	80.05	14.13	2.32	.021	0.2958

Note. M= Mean, SD=standard deviation

The results of independent sample t test revealed significant mean differences in mindfulness andpsychological well-being. The results showed that male exhibited higher scores in mindfulness and psychological well being as compared to female nurses. The value of chohen's d (0.3018, 0.2958) which shows small effect.

CHAPTER 5

DISCUSSIONS

The study focused on the analysis of the association between occupational stress, mindfulness and psychological wellbeing among nurses. In this section, the findings of the present study are linked with existing literature about the occupational stress, mindfulness andpsychological wellbeing.

It was hypothesized that there is a negative relationship between occupational stresses, psychological wellbeing among nurses. The findings of the current study were that there is a significant negative relationship between psychological wellbeing and occupational stress.

These findings are consistent with the previous literature as one study revealed that nursing profession reported higher level of stress due to their long shifts and over burden of work in this way psychological well-being decreases (Abed et al., 2019)**.** A study by Shkmbi et al. (2015) found that in along with people's behavior, work load, job insecurity, and a lack of training, additional factors can also contribute to work stress.

 Stress at work is typical and raises risks to one's bodily and mental health, which may have significant consequences (Subramanian,2013). According to Noury et al., (2015) nurses are under constant pressure. Mental health at work place can lead problem in domestic chores in return well being of nurses decreases rapidly.This posses multiple challenging problems for both nurses and their patients.

Research done on nurses to look at the connection between psychological health and stress. There was a strongly statistically negative link between psychological wellbeing and stress, with one third of the 200 nurses surveyed having moderate levels of stress and one thirdexperiencing low psychological wellbeing (Attia et al., 2019).

It was hypothesized that there is a positive relationship between mindfulness and psychological well-being among nurses. The findings of the current study shows that there isa significant positive relationship between mindfulness and psychological well-being. These findings are consistent with previous literature as one research revealed that, in China on ward nurses, it was observed that ward nurses demonstrated several features of mindfulness, which included being attentive, accepting of new ideas, and living in the present moment.Ward nurses who exercised mindfulness reported increased wellbeing and decrease in depressive, anxious, and burnout symptoms (Chen et al., 2023).

In Abakaliki research, the effect of motivation on nurses' psychological well-being was investigated. The findings indicate that the nurses' psychological well-being was forecast by theirmotivation. According to Okeke et al. (2019), nurses require an elevated level of motivation to maintain sustained psychological well-being.

Being mindful helps to lessen depressive and anxious symptoms, which enhances psychological health. People who use it exhibit better emotional regulation, which lessens emotional distress (Witt et al., 2020). Maintaining psychological well-being relies on maintaining emotional control and cognitive performance, both of which are made better by mindfulness. This involves enhanced executive function,

working memory, attention, and stress and psychological reaction management (Vago et al., 2021).

It was hypothesized that mindfulness mediate the relationship between occupational stress and psychological wellbeing among nurses. The findings of the current study showed thatmindfulness is mediate the relationship between occupational stress and psychological wellbeing. These findings are consistent with previous literature as one study conducted by Lin et al. (2020) in which mindfulness, which is defined as the intentional focus of attention on the internal and external engagement of what is happening in the present moment, is usually taught through a variety of meditation practices. But practicing mindfulness improves one's capacity to "experience the current moment" with "acceptance," "attention," and "awareness." It is a transformative process (Sarazine et al. 2021).

According to Carslon et al., 2020 Research focusing on nurses especially has shown that mindfulness-based therapies result in lower levels of stress and burnout as well as greater perceptions of psychological well-being and job satisfaction. By assisting people reframe how they see stress, mindfulness helps people become less reactive to stressors and more competent at managing stress (Feedmaan et al., 2019).

Moreover, study conducted by Feldman et al., 2019, by minimizing the adverse impact ofwork stress on psychological well-being, mindfulness can serve as a mediator. Mindfulness helpspeople manage stress efficiently by encouraging a nonjudgmental awareness of the present moment, which optimizes psychological results.

It was hypothesized that there is a significant departments difference in occupational stress, mindfulness and psychological wellbeing among nurses. The

findings of the current study reveal that there is significant department's difference in occupational stress, mindfulness and psychological wellbeing among nurses. These findings are consistent with previous literature as one study conducted on 198 nurses who worked in Multan's hospital emergency rooms, job performance significantly mediated the relationship between mindfulnessand coping. Nurses deal with stress and anxiety on a daily basis. As a result, it poses several risky situations for nurses as well as patients (Saba et al., 2023).

Another research conducted on emergency department (ED) in Lahore which shows thatnurses working in emergency department have moderate level of stress and high level of psychological wellbeing.

It is hypothesized that there is a significant gender difference in occupational stress,mindfulness and psychological wellbeing among nurses. The findings of the current study reveal that there is significant gender difference in occupational stress, mindfulness and psychological wellbeing. These findings are consistent with previous literature as one study conducted by McVicar, A. (2020) which reveal that Compared to their male counterparts, female nurses frequently encounter higher levels of work stress. This can be ascribed to a number of things,

which include issues with work-life balance and gender-specific

responsibilities andexpectations which include issues with work-life

balance and gender-specific responsibilities andexpectations.

Research conducted by Palmer (2019) in the workplace, stressors may differ for male and female nurses. For instance, emotional labor and patient care are the primary causes of stress for female nurses, whereas spot ambiguity and a lack of supportive peers

can be stressful for male nurses. According to Keyes et al., (2018) women commonly reporting higher levels of psychological distress and lower levels of well-being versus men. This pattern can be seen in avariety of occupations, including nursing.

Another study conducted by Hyde, (2021) which shows that psychological well-being of nurses can be profoundly affected by gender roles and societal expectations. Women in nursing may be challenged psychologically by the demands placed on them to provide care for others both at work and at home.

6.2 Conclusion

The present study was designed to explore the association between occupational stress, mindfulness and psychological wellbeing among nurses. The aim was to explore whether nursesface occupational stress and level of mindfulness and psychological wellbeing and how these variables are interrelated. Further the research also aimed to explore how mindfulness mediates the relationship between occupational stress and psychological wellbeing among nurses. It has been concluded from the research that there is a positive association between mindfulness psychological wellbeing and negative association between occupational stress and psychologicalwellbeing among nurses.

Nursing is a highly stressful profession, as the working conditions are harmful for their own health. Nurses working in multiple departments of hospital face different level of stress, in return level of mindfulness and psychological wellbeing also vary from department to department. Gender difference can observe easily through the findings of research as female facemore occupational stress as compared to men, so psychological wellbeing of men is good in comparison to women. As findings also call

for further research, the need to address the presenceof occupational stress, mindfulness and psychological wellbeing among nurses, in order to make nurses aware of this process and how they can use the awareness to manage themselves as wellas their patients better.

6.3 Implications

• A proper training program can be incorporated into the curriculum to make nurses aware of occupational stress, mindfulness and psychological wellbeing and help to identify occupationalstress they can spot whenever they are experiencing it and then timely manage it.
• To balance work load roaster made by hospital so that time allotted to patients and self-care practices in between the duty hours to keep oneself mentally healthy because workdivided between all workers equally.

• Further changes in organizational culture can make policies regarding the amount of patients and working hours. Policies to manage the number of patients taken daily, time allotted to themand self-care practices in between the duty hours to keep oneself mentally healthy
• Hospital administration can conduct periodically seminar on psychological awarenessthat can help not only nurses to manage the workload and stress.

6.4 Limitations

- Limitation of the present research is that participants were drawn from twin cities ofPakistan (i.e., from Rawalpindi ad Islamabad), therefore the

sample was small in diversity, and this factor may limit the generalizations of result.

- Secondly, the sample size was small as the time span provided for data collection and theentire research was limited.

- The specific units (Operation Theater, Psychiatry ward, Neuro ward) were not givingtime and willing to participate but after 2 months due to busy schedule but researchercouldn't have much time.

6.5 Recommendations

• Future research can do longitudinal research where they can explore how experiences of occupational stress, mindfulness and psychological wellbeing change over time and how nurseslearn to manage it with time.

• Data can be calculated from multiple cities so that results can be generalized.

• Further researchers can also focus on targeting an intervention plan that can help nurses intheir working condition as how to cope with the stress, and an intervention study can be conducted in future to explore its efficacy.

• With this future research can focus on including diverse population and different age groupsand different kinds of nurses which deal with patients and it impacts them.

• Qualitative research can be done to dive deep into the personal experiences, coping styles andlearning that nurses develop with time to manage stress.

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Annexure

Consent Form

I am Hafiza Yusra Sultan student of MS Clinical Psychology at Bahria University Islamabad, the partial fulfillment of my degree required conducting a research thesis. For this Purpose, I amexploring the Occupational Stress and Psychological well-being among Nurses; Mediating role of Mindfulness. I am here requesting you to fill this questionnaire form according to your own experience, attitudes, behavior, knowledge and experience. I guarantee you that the information provided by you will be completely confidential and anonymous, and response will only be utilized for research purposes and will not be used for personal benefit, it will take only 20 to 25 minutes to complete the questionnaire. You also have the right to withdraw at any stageduring the research without any penalty. However, I'll be very thankful if you complete this questionnaire till the end. By submitting this form, you are indicating that you have read the description of the study and that you agree to the terms as described.

I agree to participate in the research study. I understand the purpose and nature of the study and I am participating voluntarily. I understand that I can withdraw from the study at any time withoutany penalty or consequences.

_____

SIGNATURE

Demographic Sheet

1. Gender

☐   1. Male

☐ 2.   Female

2. Age

_____

3. Marital status

1. Single

2. Married

4. Family system

☐ 1.   Joint

☐ 2.   Nuclear

5. Financial Support

☐ 1.   Yes

☐ 2.   No

6. Duration of job

1. 1-5 years

2. 6- 10 years

3. 11-15 years

4. More then 15 years

7. Monthly Salary

1. 20-60k

2. 61-100k

3. More then 100k

8. Any responsibility of taking care of any adultery

1. Yes

2. No

9. Department/ Ward

1. Cardic

2. Gyane

3. Peeds

4. ENT

5. Surgery

6. Oncology

7. Derma

8. ICU

Questionnaire 1

Occupational Stress Questionnaire

	0 - Strongly Agree	1 - Disagree	2 - Neutral	3 - Agree	4 - Strongly Agree
My workplace condition (e.g. space, light and noise)					
I have all the necessary equipment and infrastructure support at work.					
I am not frequently interrupted at work					
There are enough instructional facilities in my department					
I am satisfied with my monthly salary					
The head of my department is reasonable in his/her attitude towards me					
I am happy with the level of support got from my colleagues					
There is a great understanding between staff and head of the department					
I get appreciated for my efforts					
There are enough promotion opportunities in the job					
Performance rather than politics determine who gets promoted in my department					
My annual appraisal process has fairly recognized my achievements and abilities					
The universities has enough facilities for undertaking research					
The university offers proper training and development opportunities					

I have been exposed to insulting remarks at my workplace					
I have been exposed to verbal abuse					
I have been exploited at my workplace					
I was told indirectly to quit my job					
I have been exposed to bullying at my workplace					
Exhaustion					
Difficulties to concentrate					
Weariness and feebleness					
Insomnia					
Nervousness					
Irritation					
Depression					
Indifference towards everything					
Reduced work performance					
Reduced self-confidence					

Day-to-Day Experiences

Instructions: Below is a collection of statements about your everyday experience. Using the 1-6 scale below, please indicate how frequently or infrequently you currently have each experience. Please answer according to what *really reflects* your experience rather than what you think your experience should be. Please treat each item separately from every other item.

1	2	3	4	5	6
Almost Always	Very Frequently	Somewhat Frequently	Somewhat Infrequently	Very Infrequently	Almost Never

I could be experiencing some emotion and not be conscious of it until some time later.   1   2   3   4   5   6

I break or spill things because of carelessness, not paying attention, or thinking of something else.   1   2   3   4   5   6

I find it difficult to stay focused on what's happening in the present.   1   2   3   4   5   6

I tend to walk quickly to get where I'm going without paying attention to what I experience along the way.   1   2   3   4   5   6

I tend not to notice feelings of physical tension or discomfort until they really grab my attention.   1   2   3   4   5   6

I forget a person's name almost as soon as I've been told it for the first time.   1   2   3   4   5   6

It seems I am "running on automatic," without much awareness of what I'm doing.   1   2   3   4   5   6

I rush through activities without being really attentive to them.   1   2   3   4   5   6

I get so focused on the goal I want to achieve that I lose touch with what I'm doing right now to get there.   1   2   3   4   5   6

I do jobs or tasks automatically, without being aware of what I'm doing.   1   2   3   4   5   6

I find myself listening to someone with one ear, doing something else at the same time.   1   2   3   4   5   6

1	2	3	4	5	6

Almost Always	Very Frequently	Somewhat Frequently	Somewhat Infrequently	Very Infrequently	Almost Never

I drive places on 'automatic pilot' and then wonder why I went there.	1	2	3	4	5	6
I find myself preoccupied with the future or the past.	1	2	3	4	5	6
I find myself doing things without paying attention.	1	2	3	4	5	6
I snack without being aware that I'm eating.	1	2	3	4	5	6

MAAS Scoring

2

Instructions: Circle one response below each statement to indicate how much you agree or disagree.

1. "I like most parts of my personality."

| Strongly agree | Somewhat agree | A little agree | Neither agree nor disagree | A little disagree | Somewhat disagree | Strongly disagree |

2. "When I look at the story of my life, I am pleased with how things have turned out so far."

| Strongly agree | Somewhat agree | A little agree | Neither agree nor disagree | A little disagree | Somewhat disagree | Strongly disagree |

3. "Some people wander aimlessly through life, but I am not one of them."

| Strongly agree | Somewhat agree | A little agree | Neither agree nor disagree | A little disagree | Somewhat disagree | Strongly disagree |

4. "The demands of everyday life often get me down."

| Strongly agree | Somewhat agree | A little agree | Neither agree nor disagree | A little disagree | Somewhat disagree | Strongly disagree |

5. "In many ways I feel disappointed about my achievements in life."

| Strongly agree | Somewhat agree | A little agree | Neither agree nor disagree | A little disagree | Somewhat disagree | Strongly disagree |

6. "Maintaining close relationships has been difficult and frustrating for me."

| Strongly agree | Somewhat agree | A little agree | Neither agree nor disagree | A little disagree | Somewhat disagree | Strongly disagree |

7. "I live life one day at a time and don't really think about the future."

Strongly agree	Somewhat agree	A little agree	Neither agree nor disagree	A little disagree	Somewhat disagree	Strongly disagree

8. "In general, I feel I am in charge of the situation in which I live."

Strongly agree	Somewhat agree	A little agree	Neither agree nor disagree	A little disagree	Somewhat disagree	Strongly disagree

9. "I am good at managing the responsibilities of daily life."

Strongly agree	Somewhat agree	A little agree	Neither agree nor disagree	A little disagree	Somewhat disagree	Strongly disagree

10. "I sometimes feel as if I've done all there is to do in life."

Strongly agree	Somewhat agree	A little agree	Neither agree nor disagree	A little disagree	Somewhat disagree	Strongly disagree

11. "For me, life has been a continuous process of learning, changing, and growth."

Strongly agree	Somewhat agree	A little agree	Neither agree nor disagree	A little disagree	Somewhat disagree	Strongly disagree

12. "I think it is important to have new experiences that challenge how I think about myself and the world."

Strongly agree	Somewhat agree	A little agree	Neither agree nor disagree	A little disagree	Somewhat disagree	Strongly disagree

13. "People would describe me as a giving person, willing to share my time with others."

Strongly agree	Somewhat agree	A little agree	Neither agree nor disagree	A little disagree	Somewhat disagree	Strongly disagree

14. "I gave up trying to make big improvements or changes in my life a long time ago"

Strongly agree	Somewhat agree	A little agree	Neither agree nor disagree	A little disagree	Somewhat disagree	Strongly disagree

15. "I tend to be influenced by people with strong opinions"

Strongly agree	Somewhat agree	A little agree	Neither agree nor disagree	A little disagree	Somewhat disagree	Strongly disagree

16. "I have not experienced many warm and trusting relationships with others."

Strongly agree	Somewhat agree	A little agree	Neither agree nor disagree	A little disagree	Somewhat disagree	Strongly disagree

17. "I have confidence in my own opinions, even if they are different from the way most other people think."

Strongly agree	Somewhat agree	A little agree	Neither agree nor disagree	A little disagree	Somewhat disagree	Strongly disagree

18. "I judge myself by what I think is important, not by the values of what others think is important."

Strongly agree	Somewhat agree	A little agree	Neither agree nor disagree	A little disagree	Somewhat disagree	Strongly disagree

**Permission
Letters**

Bahria University

Discovering Knowledge

24-Jan-2024

TO WHOM IT MAY CONCERN

REQUEST FOR DATA COLLECTION

It is stated that **Hafiza Yusra Sultan** Enrollment No. 01-275222-025 is a student of MS Clinical Psychology Bahria University Islamabad Campus conducting research on "**Relationship between Stress and Mindfulness on Psychological Well Being among Nurses**" under supervision of undersigned. It is requested that kindly allow her to collect the data from your esteemed institution.

Regards,

Ambreen Fatima
Senior Lecturer
Bahria School of Professional Psychology
Bahria University
E-8 Islamabad

Bahria School of Professional Psychology Shangrilla Road E-8 Islamabad
Tel: 051-9260002 Ext. No. 1406 Fax: 051-9260889

To,

The Cheif Nursing Supredentent.
PIMS Islamabad.

Subject: Permission of data collection
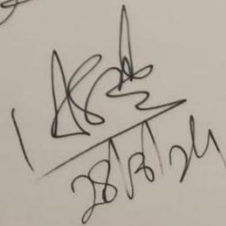
Respected Madam,

It is stated that I am a student of Bahria Univirsity Islamabad. I am doing research on the topic of Relationship between Stress and Mindfulness on Psychological well being among nurses. So my research population are nurses. The porticipation in this study is entirely Voluntary. All the information kept confidential.

Kindly grant me permission for data collection I shall be very thankful to you.

Your Obediently,
Hafiza Yusra Sultan
Date 28-3-24

Allowed.

28/3/24

Yusra Sultan 1:11 AM
to Kaj.bjorkqvis...

From Yusra Sultan usrabajwa@gmail.com
To Kaj.bjorkqvist@abo.fi
Date Feb 11, 2024, 12:47 AM
View security details

I am Yusra Sultan, final year student in Clinical Psychology,Bahria University, Islamabad, Pakistan. I am conducting my research on Relationship between occupational stress and mindfulness on Psychological well being among nurses under the guidance of my supervisor. For that I need permission to use your Occupational stress scale to access occupational stress levels among nurses.
Kindly grant me permission to use the Occupational stress scale. So, that I can begin my work.

Waiting for your positive response.
Regards,
Yusra Sultan
Bahria University Islamabad.

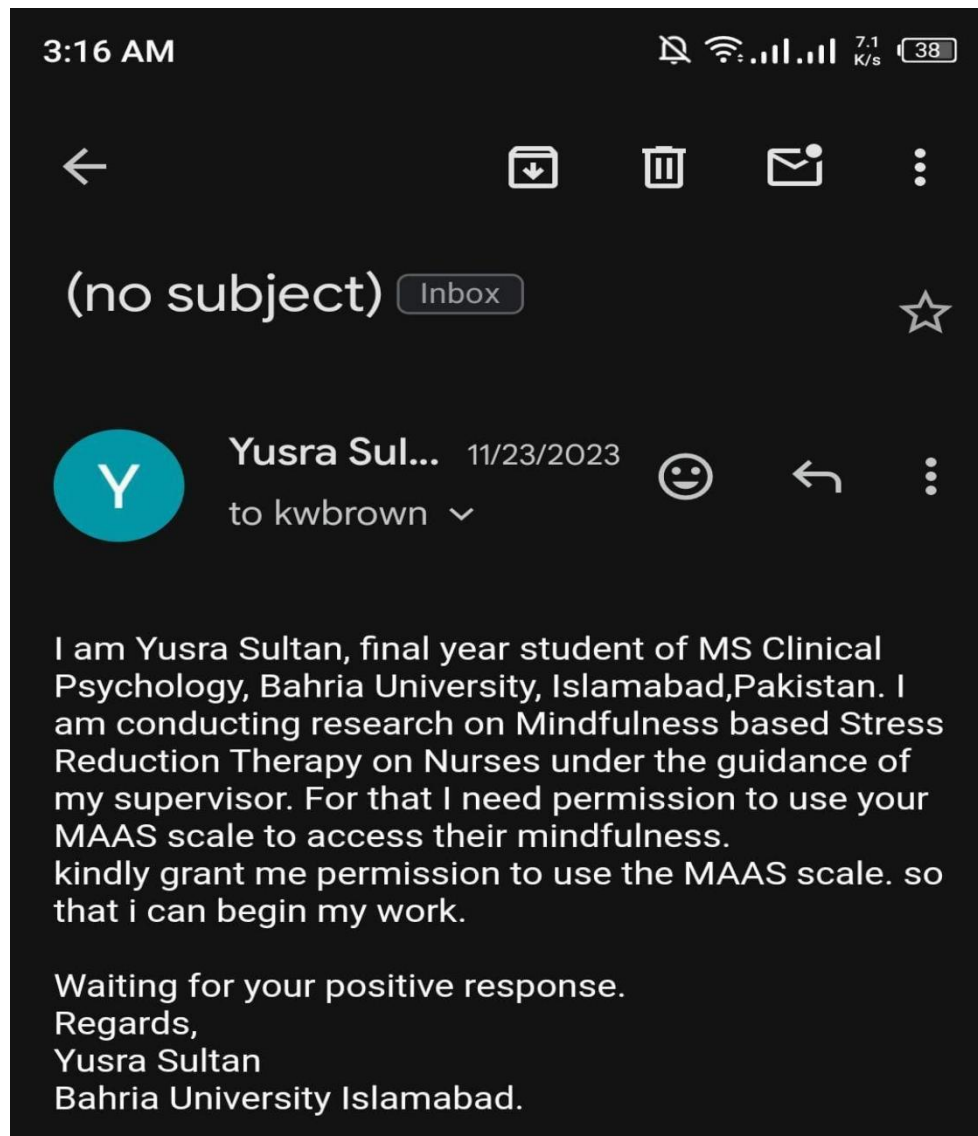Kaj Björk... 3/21/2024

to me

Dear Yusra,

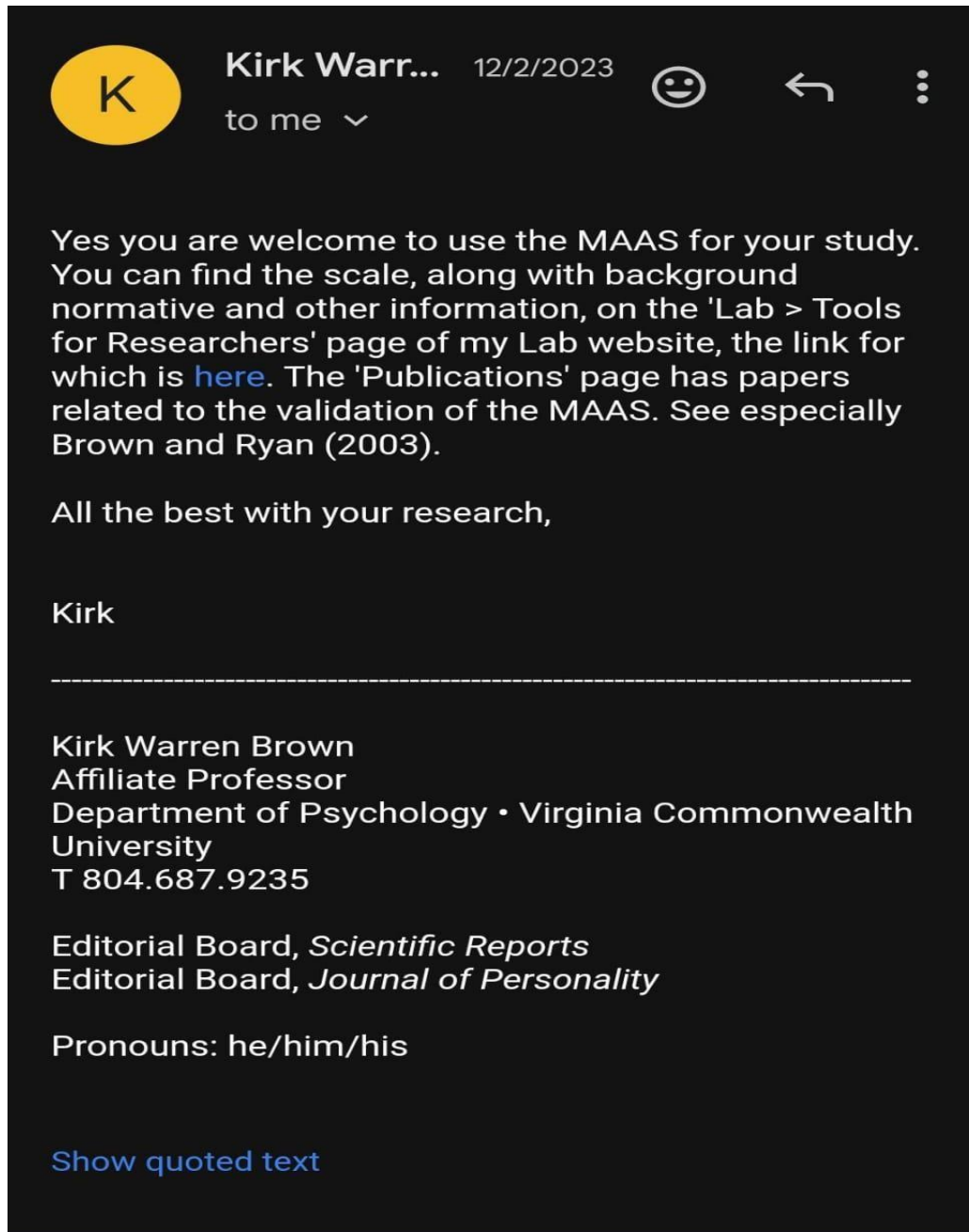**You are welcome to use my Occupational Stress Scale. As per your requirements you can use the acquired data provided. We did not define or use any cut−off points.We compared the scores of different groups(males vs females;pakistani vs Finns) with each other.Any cutoff point is also subjective, and cannot be objectively verified.**

Kind regards, Kaj

3:16 AM

(no subject) Inbox

Yusra Sul... 11/23/2023
to kwbrown

I am Yusra Sultan, final year student of MS Clinical Psychology, Bahria University, Islamabad,Pakistan. I am conducting research on Mindfulness based Stress Reduction Therapy on Nurses under the guidance of my supervisor. For that I need permission to use your MAAS scale to access their mindfulness.
kindly grant me permission to use the MAAS scale. so that i can begin my work.

Waiting for your positive response.
Regards,
Yusra Sultan
Bahria University Islamabad.

Kirk Warr... 12/2/2023

to me

Yes you are welcome to use the MAAS for your study. You can find the scale, along with background normative and other information, on the 'Lab > Tools for Researchers' page of my Lab website, the link for which is here. The 'Publications' page has papers related to the validation of the MAAS. See especially Brown and Ryan (2003).

All the best with your research,

Kirk

Kirk Warren Brown
Affiliate Professor
Department of Psychology • Virginia Commonwealth University
T 804.687.9235

Editorial Board, *Scientific Reports*
Editorial Board, *Journal of Personality*

Pronouns: he/him/his

Show quoted text

Permission of scale ➤ Inbox ☆

Yusra Sultan 12:33 PM
to cryff@wisc.edu

I am Yusra Sultan, final year student in Clinical Psychology,Bahria University, Islamabad, Pakistan. I am conducting my research on Relationship between occupational stress and mindfulness on Psychological well being among nurses under the guidance of my supervisor. For that I need permission to use your Psychological well being scale (Pwb 18 items) to assess Psychological wellbeing of nurses.
Kindly grant me permission to use the Psychological wellbeing scale. So that I can begin my work.

Waiting for your positive response.
Regards,
Yusra Sultan
Bahria University Islamabad.

Your request is approved.   Yes, of course you can.   Yes, of course you can!

Reply

Cryff@wisc.ed ... 3/21/2024

to me

Dear Yusra,

I have granted your request to use my scale of psychological well-being. You are free to utilize the obtained data in accordance with your needs.
 We define cut-off and sub scales (Anatomy, Environmental, self Acceptance, Purpose, positve) as well. Further more good luck for your research.

Kind regards,
Cryff.

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