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PREVALENCE OF ROLE CONFLICT AMONG NURSES

Monika Devi¹, Rajwant Kour², Priyanka Choudhary³

Ph.D. Scholar¹ Professor Community Health Nursing², Associate Professor Medical Surgical Nursing³
Desh Bhagat University, Off To NH1 Mandi Govindgarh, Distt Fatehgarh Sahib, Punjab, INDIA

Abstract- This study designed to explore the prevalence of role conflict among the nurses who is working in multispecialty medical college hospitals of Dakshina Kannada district in Karnataka state. There is necessitate to emphasize the difficulty of nurses who occupy yourself in providing better healthcare to the society. 500 respondents selected through simple random technique and the result showed that the majority of nurses had moderate level of role conflict (72.2%). A incorporated logical structure of specific strategies are required to decrease their job stress and role conflict.

I. INTRODUCTION

A person performs diverse roles in the community. whereas performing these roles ,if there is a deviation or bitterness towards the role assigned, variety of roles are being performed, if the person thinks the job which he is performing is below his rank and when there is a variance between the observation of the role and in point of fact what he is doing, a person might experience role- conflict. These role conflicts generate dissatisfaction, disappointment and serious behavior penalty. So each social system will function easily and professionally if the roles are without a doubt allocated, human rights and duties are clearly understood and each member behaves in his role as expected.

Nurses who perform as the first line of patient health care and are the stamina of medical organization are horizontal to high scale of stress due to work load, high job burden, low compassionate connection in the work place, dealing with death and dying situations, shift duties, and unhelpful family members (Bhajwa. NN Times.2004).

Many studies have shown that people with low job stress show signs of improved job satisfaction, better managerial assurance and reduced absenteeism. It is also observed that high level of role conflicts is correlated to lower job satisfaction and reduced managerial commitment.

Job place troubles can direct to physical as well as mental problems. Physical problems may be fatigue, hypertension, backache and migraine. mental problems may be stress and anxiety (Onasoga.European Journal.2004).

Further sources of stress for nurses may include economic factors, conflict stuck between family and work roles, insecure work contracts and moral distress experienced by nurses may include to their woes. Moral distress is experienced due to issues such as feeling of powerlessness, lack of authority, time and supply constraints, power hierarchies and when their skill is not familiar.

Only some studies have been made on nurses in medical sociology specially with observe to their troubles. Their role has all the time undermined compared to the physicians. There is necessitate to emphasize their problems and focus on their input towards catering to the health requirements of the public.

RESEARCH METHODOLOGY

- **Population and Sample**

Nurses who are working in the famous multi -speciality medical college hospitals of Dakshina Kannada district in Karnataka state and Sample size was 500.

- **Study Design**

A descriptive research design was used to evaluate the prevalence of role conflict among nurses.

- **Study Setting**

The study was conducted in the famous multi-speciality medical college hospitals of Dakshina Kannada district in Karnataka state.

- **Sampling Technique**

Simple random sampling method was used in the study.

Data and Sources of Data

The primary data was collected from the Nurses who are working in the famous multi-speciality medical college hospitals of Dakshina Kannada district in Karnataka state through questionnaire method

Theoretical framework

The data obtained were analyzed on the basis of objectives. Demographic variables were analyzed by taking percentage. Assessment of role conflict was done by deriving mean, median and standard deviation. The data collection tools used in the study were

- A. Socio-demographic profile of the respondents.
- B. Standardized tool for assessing role conflict.

RESULTS AND DISCUSSION

Results of Descriptive Statics of Study Variables

Table 1 – Socio-demographic variables of nurses

No	Demographic Characteristics	Frequency (f)	Percentage (%)
1.	AGE		
	20-30	398	79.6
	31-40	53	10.6
	41-50	41	8.2
	Above 50	8	1.6
2.	Religious		
	Hindu	224	44.8
	Muslim	7	1.4
	Christian	265	53
	Other	4	0.8
3.	Nationality		
	Indian	494	99
	Other	5	1
4.	Place of residence at report		
	Urban	254	50.8
	Rural	246	49.2
5.	Annual family income		
	Less than 1 Lakh	327	65.4
	Between 1 lakh to 5 lakh	163	32.6
	Between 5 lakh to 10 lakh	8	1.6
	More than 10 lakh	2	0.4
6.	Type of family		
	Joint family	89	17.8
	Nuclear family	405	81
	Extended family	5	1
	Staying alone	1	0.2
7.	Marital Status		
	Single	306	61.2
	Married	190	38.0
	Divorced	3	0.6
	Widowed	1	0.2
8.	No.of children		
	No Children	53	27.3
	One	83	42.8
9.	First Child age		
	<1years	2	1.4
	1-5 years	59	41.8
	6-10 years	21	14.9
	11-15 years	30	21.3
	More than 15 years	29	20.6
b.	Second child age		
	Less than 1 year	0	0
	1-5 year	17	28.8
	6-10year	18	30.5

	11-15 years	16	27.1
	More than 15 years	8	13.6
c.	Third child age		
	Less than 1 year	0	0
	1-5 years	4	80
	6-10 years	0	0
	11-15 years	0	0
	More than 15 years	1	20
10.	Professional Qualification		
	GNM	256	51.2
	BSC(N)	149	29.8
	Pb .B.Sc (N)	65	13
	M.Sc (N)	8	1.6
	Other	22	4.4
11	Total year of work experience		
	Less than 1 year	127	25.4
	1-5 years	231	46.2
	6-10 years	66	13.2
	11-15 years	21	4.2
	More than 15 years	55	11
12.	Distance from home to work place		
	Less than 1 KM	119	23.8
	1-5 KM	74	14.8
	6-10 KM	46	9.2
	More than 10KMS	261	52.2
13.	MODE OF TRANSPORTATIONS TO THE WORK PLACE		
	Public service	337	67.4
	Auto service	17	3.4
	Own vehicle	64	12.8
	Hostel	9	1.8
	Institution vehicle	11	2.2
	By walk	62	12.4

FINDINGS

The socio demographical profile of the nurses indicates that majority of them (79.6%) were in the age group of 20 to 30 years and living in a nuclear family set up (81.0%). Most of the nurses belonged to Christian (53.0%) and Hindu religion (44.8%). The place of residence indicates that almost equal number of nurses were residing in rural (49.2%) and urban (50.8%) areas. The marital status of the nurses shows that majority of them were single (61.2%) and those who were married (38.0%) most of them had one child (42.8%). The professional qualification of the nurses indicates that majority of them had done GNM diploma course (51.2%) with most of them having work experience between 1 to 5 years (46.2%). The mode of transportation to the work place shows that majority of the nurses travelled by public transport system (67.4%) and most of them travelled more than 10 Km to the work place.

The assessment of role conflict was done by deriving mean, median and standard deviation. Role conflict was measured by using standardized tool consisting of 11 following statements.

- My job makes me very angry or frustrated.
- I am usually calm and at ease when working.
- There are many time constraints in my work that are difficult to meet.
- Having a job makes it difficult to spend enough time with my family.
- I don't have time for my interest/hobbies outside of my work.
- Exposure to infectious diseases creates anxiety in me.
- I find it difficult to deal with ethical issues.
- Shift duties especially night duties create relational problems in my family life.
- I feel nursing is a noble profession.
- My job produces strain that makes it difficult to fulfill family duties.

DISCUSSION

The findings of the present study indicates that majority of the nurses belonged to 20 to 30 year age group, mostly living in urban areas and had a nuclear family set up. Most of the nurses were single and belonged to Christian and Hindu religion. Majority of them were GNM diploma holders and were using public transport system to travel to their work place.

Table 2: Overall assessment of role conflict among respondents n=500

S.No	Level of role conflict	Range	Frequency (f)	Percentage (%)	Mean±S.D
1.	Low	11-25	36	7.2	35.02±6.20
2,	Moderate	26-40	361	72.2	
3.	High	41-50	103	20.6	

The overall assessment of role conflict which was measured by summing the responses of the respondents revealed that majority of them (72.2%) had moderate level of role conflict, 20.6percent had high level of role conflict and only 7.2percent had low level of role conflict. On an average the Mean and Standard deviation was 35.02 ± 6.20 , which shows that moderate level of role conflict existed among the nurses.

RECOMMENDATION

- Keeping in view the findings of the study, the following recommendations are made:
- The present study can be made on a larger scale with more sample size.
- A study can be done to see the effect of role conflict on role performance of the nurses.
- The government, policy makers and hospital management should work hand in hand to improve the working conditions of the hospitals.
- There should be provisions for nurses to attend continuing educational programs, health talks, family counseling sessions and stress management programs.

CONCLUSION

Human beings do not act toward each other as isolated individuals; they are part of larger communities and groups, whose members have some common agreement about the various social roles and their performance. Whenever there is a disagreement or resentment towards the role assigned, then there is tension or role conflict.

Nurses who are experiencing role conflict should be personally and professionally empowered in order to be able to overcome their stress. They should be given the opportunity to express their concern about institutional constraints and should be involved in problem solving. There has been growing evidence that role conflict has both physical and psychological effect on the individual. Emotional and moral support from the family, sharing the responsibility and respect towards the profession can go a long way in dealing with stress, occupational burn out and role conflict among nurses.

My views

Shyama K V (2020), conducted a study on 500 nurses by using simple random sampling method who are working in multispecialty medical college and hospital dakshina kannada ditt. Karnataka. To assess the prevalence of role conflicts among nurses which helps to rule out the problems of nurses who delivered a vital role in providing better care to the society. Result showed that the majority of nurses had moderate level of role conflicts (72.2%) A incorporated logical structure of specific strategies are required to decrease their job stress and role conflict.

Points to be added

- Every organization should make a policy which describes the employees job description.
- Should Respect the employees and involve everyone in collaboration health care programmes.
- Organization should conduct program for employees which he/she express himself/herself.
- Assign adequate work not too much nor too low.
- Maintain equity between employees.

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