Abstract: The purpose of this research was to study the coping strategies and job satisfaction among nurses working in general hospital and psychiatric hospital. The sample consisted of 300 nurses (150 nurses from general hospital and 150 from psychiatric hospital) drawn from Hubli and Dharamward district hospitals, Chitrarduga, shimoga district hospitals of Karnataka. The nurses were administered Ways of Coping questionnaire and job satisfaction questionnaires. The primary objective of the study is to study the use of coping strategies and level of job satisfaction among nurses working in general hospitals and psychiatric hospitals. The participants were administered the ways of coping questionnaire developed by Lazarus and Folkman (1989) and Job satisfaction questionnaire developed by C.N. Daftuar. The results of the study have shown that General hospital nurses and psychiatric hospital nurses shown the difference in using the coping strategies in problematic situations and General hospital nurses and psychiatric hospital nurses shown the difference in the level of job satisfaction they experience in their jobs and finally Gender has no significant influence on the use of coping strategies and level of job satisfaction among nurses working in general hospitals and psychiatric hospitals.

Keywords: Coping strategies, job satisfaction and Nurses

1. Introduction

Nursing profession is completely given for the public service benefit and is the part of open organization. Nursing is a profession in the field of social sciences, whose object of study and intervention is human care, as suggested in the constitution, experience, improvement, insurance, and recuperation of wellbeing, and whose recipients are the human subject as a social being, the family, gatherings, groups, and society as unit of consideration. With an aggregate medicinal services workforce of 2.2 million and a population of more than one billion, India’s nursing density 7.9 for every 10,000 population is well beneath universal measures and is insufficient to meet the present domestic health benefits needs.

Coping Strategies:

Coping is characterized as “the intellectual and passionate endeavors made to overcome stress”. Frydenberg (1997) characterizes ‘Coping is the thing that one does: it is the psychological and behavioral techniques that are utilized to manage the requests of regular living’. Lazarus and Launier (1978) said that coping comprises of endeavors, both activity arranged and intra psychic, to oversee (i.e., expert, endure, diminish or minimize) natural and inward requests and clashes among them. At the point when individuals endeavor to cope, they attempt to manage contrasts they see between the requests of an upsetting circumstance and their capacity to meet those requests. Researchers have found that coping is plainly an intricate procedure, impacted by both identity characteristics (Bolger, 1990; Friedman et al, 1992; Long and Sangster, 1993), situational requests (Folkman and Lazarus, 1986; Heim et al., 1993), and even the social and physical attributes of the setting (Mechanic, 1978).

Job Satisfaction

Worldwide a lack of nurses has been widely reported in numerous nations. In Australia, an additional 13500 new enrolled nurses every year will be required by 2016, to take care of the demand for nursing administration. Canada is anticipated to be shy of around 13000 attendants by 2016. Additionally, by 2020 the USA nursing workforce is evaluated to be 20% underneath requirements. Nurse’s job satisfactions are basic for nurse’s retention. A significant part of the examination into nurse’s job satisfaction has taken a gander at how to enlist and hold attendants by giving a situation that makes medical caretakers need to stay in the calling. At the point when larger amounts of nurse’s job satisfaction are experienced, there is an expansion in spirit and responsibility which makes it more probable that a nurse will stay in the profession.

Nursing job satisfaction is critical to both social insurance suppliers and patients. Nursing job fulfillment has been connected to positive patient results and a more prominent saw nature of consideration. Nurse’s job disappointment, then again, adds to the nursing deficiency with a resulting unfriendly impact of higher attendant patient proportions, longer patient holding up records and nursing staff smolder out.

Objectives of the Study

- To study the coping strategies of the nurses working in General and Psychiatric hospitals.
- To study the levels of job satisfaction among the nurses working in General and Psychiatric hospitals.
Hypotheses of the study
Hypothesis 1. Nurses working in General and Psychiatric hospitals differ in their coping strategies.
Hypothesis 2. Nurses working in Psychiatric hospitals differ in their job satisfaction compared to nurses working in general hospitals.

Tools Used

Coping checklist: Coping checklist was developed by Lazarus and Folkman (1984). The purpose of this checklist is to find out how people deal with or handle difficult situations that they have to face in their everyday life. The list provides some of the common used methods for handling stress and reducing stress. This scale aims at identifying preventive strategies for suicide prevention. Most of the suicides are impulsive at the stress situations. These situations are overcome through different coping patterns that are used consciously or unconsciously by everybody but sometimes it is difficult to develop a pattern of coping. Those coping methods by which they found some relief or solution to their problems are identified. There are 66 items, each statement you are using or not in stressful situation that indicates Not Used, Used Somewhat, Used Quite A Bit and Used a Great Deal.

Whether, each method is used or not in stressful situation is indicated as yes or no. It covers a wide range of cognitive, behavioral and emotional responses that are used to handle stress. There are eight subscales: confrontive coping, distancing, self controlling, seeking social support, accepting responsibility, escape avoidance, planful problem solving and positive reappraisal. Space is provided for providing their responses for each type of coping items.

Job satisfaction scale
Job Satisfaction Scale developed by C.N. Daftuar consisting of 19 items including 2 which measure separately overall satisfaction with the company and overall satisfaction with the work was used for the purpose. The respondents were asked to rate each statement on a five point scale ranging from 5 (strongly agree) to 1 (strongly disagree).

The subject is asked after good rapport formation to attempt answering all statements. They were asked to give their responses on five point scale from strongly agree to strongly disagree. Instructions are printed on the cover page of the test booklet. It is good to reinforce instructions by orally reiterating that the examinee will be doing himself and must be good by being frank and honest in describing himself. In the present study all the subjects were literate. So they can read instructions easily.

Scale with the range of strongly agree to strongly disagree responses which are scored 5 to 1 and summed, the possible range of score was between 19 and 95. Higher score naturally indicates a higher level of job satisfaction.

Reliability: Alpha (Cronbach’s) reliability of the two scales used is HRD Climate Scale = .96, Job Satisfaction = .95. This indicates a very high internal consistency.

Validity: Inter item correlation:.67 to .84.

2. Procedure

A total of 300 participants were selected for this study. They were drawn from different government general hospitals (N = 150) and psychiatric hospitals (N = 150) across Karnataka state.

Initially the investigator established rapport with the authorities and employees and taken consent for their involvement in the proposed research. They were briefed about their participation and requested to fill up the bilingual research instruments under study. They were administered Ways of Coping and Job satisfaction questionnaires. During the process of administering the research questionnaires doubts were clarified.

After the data gathered from the participants, scoring was done according to the norms developed by the authors of the questionnaires. Later, comparison was done between nurses of general hospitals and psychiatric hospitals in their use coping strategies and level of job satisfaction. The researcher also found the influence of gender on coping strategies and job satisfaction of nurses who are working in the general and psychiatric settings.

3. Data Analysis

The obtained data were scrutinized, scored according to the scoring keys respectively and subjected to the following statistical techniques:

- The data collected have been analyzed using descriptive statistics such as Total, mean, and Standard Deviation.
- Independent t tests were used to examine the significance of the difference between the two groups (Nurses of General hospitals and Nurses of Psychiatric hospitals) in using of coping strategies and job satisfaction.
- Independent t test was used to find out gender differences in coping strategies and job satisfaction of nurses who are working in general and psychiatric settings.

4. Result Analysis

The scores of coping strategies are compared between general hospital nurses and psychiatric hospital nurses by using independent sample t test. The results of the analysis are interpreted in the following section.
Table 1: Mean scores and Standard Deviation scores of different coping strategies of nurses of General Hospitals and Psychiatric Hospitals and results of independent sample test.

<table>
<thead>
<tr>
<th>Coping Strategies</th>
<th>Group</th>
<th>Mean</th>
<th>SD</th>
<th>t-value</th>
<th>p-value</th>
</tr>
</thead>
<tbody>
<tr>
<td>Confrontive coping</td>
<td>GH Nurses (N=150)</td>
<td>15.94</td>
<td>4.99</td>
<td>2.882</td>
<td>.004**</td>
</tr>
<tr>
<td></td>
<td>PH Nurses (N=150)</td>
<td>14.52</td>
<td>3.32</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Distancing</td>
<td>GH Nurses (N=150)</td>
<td>15.76</td>
<td>3.68</td>
<td>3.521</td>
<td>.001**</td>
</tr>
<tr>
<td></td>
<td>PH Nurses (N=150)</td>
<td>14.32</td>
<td>3.39</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Self-controlling</td>
<td>GH Nurses (N=150)</td>
<td>15.92</td>
<td>3.15</td>
<td>2.921</td>
<td>.004**</td>
</tr>
<tr>
<td></td>
<td>PH Nurses (N=150)</td>
<td>14.84</td>
<td>3.25</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Seeking social support</td>
<td>GH Nurses (N=150)</td>
<td>16.44</td>
<td>4.10</td>
<td>4.899</td>
<td>.001**</td>
</tr>
<tr>
<td></td>
<td>PH Nurses (N=150)</td>
<td>14.21</td>
<td>3.78</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Accepting responsibility</td>
<td>GH Nurses (N=150)</td>
<td>10.64</td>
<td>3.57</td>
<td>2.017</td>
<td>.045*</td>
</tr>
<tr>
<td></td>
<td>PH Nurses (N=150)</td>
<td>9.92</td>
<td>2.51</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Escape-Avoidance</td>
<td>GH Nurses (N=150)</td>
<td>20.09</td>
<td>5.09</td>
<td>2.357</td>
<td>.019*</td>
</tr>
<tr>
<td></td>
<td>PH Nurses (N=150)</td>
<td>18.82</td>
<td>4.17</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Planful problem-solving</td>
<td>GH Nurses (N=150)</td>
<td>16.19</td>
<td>3.76</td>
<td>2.372</td>
<td>.018*</td>
</tr>
<tr>
<td></td>
<td>PH Nurses (N=150)</td>
<td>15.16</td>
<td>3.73</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Positive reappraisal</td>
<td>GH Nurses (N=150)</td>
<td>19.89</td>
<td>4.01</td>
<td>3.657</td>
<td>.001*</td>
</tr>
<tr>
<td></td>
<td>PH Nurses (N=150)</td>
<td>18.17</td>
<td>4.13</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

*significant @ 0.05, **significant @ 0.01, GH* General Hospital, PH* Psychiatric Hospital.

As shown in table 1, the mean and standard deviations (SD) of general hospital nurses and psychiatric hospital nurses in their coping strategies are presented. The mean and SD of general hospital nurses in their confrontive coping are 15.94 and 4.99, whereas for psychiatric hospital nurses in their confrontive coping are 14.52 and 3.32 respectively. The test of significance (t = 2.882, p = .004**, significant at 0.01 level) shows that general hospital nurses and psychiatric hospital nurses are differ in their confrontive coping.

The mean and SD of general hospital nurses in their distancing coping are 15.76 and 3.68, whereas for psychiatric hospital nurses in their distancing are 14.32 and 3.39 respectively. The test of significance (t = 3.521, p = .001**, significant at 0.01 level) shows that general hospital nurses and psychiatric hospital nurses are differ in using distancing coping strategy.

The mean and SD of general hospital nurses in their self controlling coping are 15.92 and 3.15, whereas for psychiatric hospital nurses in their self controlling are 14.84 and 3.25 respectively. The test of significance (t = 2.921, p = .004**, significant at 0.01 level) shows that general hospital nurses and psychiatric hospital nurses are differ in using self controlling coping strategy.

The mean and SD of general hospital nurses in their seeking social support coping are 16.44 and 4.10, whereas for psychiatric hospital nurses in their seeking social support coping are 14.21 and 3.78 respectively. The test of significance (t = 4.899, p = .001**, significant at 0.01 level) shows that general hospital nurses and psychiatric hospital nurses are differ in using seeking social support coping strategy.

The mean and SD of general hospital nurses in their accepting responsibility coping are 10.64 and 3.57, whereas for psychiatric hospital nurses in their accepting responsibility coping are 9.92 and 2.51 respectively. The test of significance (t = 2.017, p = .045**, significant at 0.05 level) shows that general hospital nurses and psychiatric hospital nurses are differ in using accepting responsibility coping strategy.

The mean and SD of general hospital nurses in their escape avoidance coping are 20.09 and 5.09, whereas for psychiatric hospital nurses in their escape avoidance coping are 18.82 and 4.17 respectively. The test of significance (t = 2.357, p = .019*, significant at 0.05 level) shows that general hospital nurses and psychiatric hospital nurses are differ in using escape avoidance coping strategy.

The mean and SD of general hospital nurses in their planful problem solving coping are 16.19 and 3.76, whereas for psychiatric hospital nurses in their planful problem solving coping are 15.16 and 3.73 respectively. The test of significance (t = 2.372, p = .018*, significant at 0.05 level) shows that general hospital nurses and psychiatric hospital nurses are differ in using planful problem solving coping strategy.

The mean and SD of general hospital nurses in their positive reappraisal coping are 18.89 and 4.01, whereas for psychiatric hospital nurses in their planful positive reappraisal coping are 18.17 and 4.13 respectively. The test of significance (t = 3.657, p = .001*, significant at 0.01 level) shows that general hospital nurses and psychiatric hospital nurses are differ in using positive reappraisal coping strategy.
As shown in table 2, the mean and standard deviations (SD) of general hospital nurses and psychiatric hospital nurses in their job satisfaction are presented. The mean and SD of general hospital nurses in their job satisfaction are 65.28 and 14.51, whereas for psychiatric hospital nurses in their confrontive coping are 55.19 and 16.03 respectively. The test of significance (t = 5.712, p = .001**, significant at 0.01 level) shows that general hospital nurses and psychiatric hospital nurses are different in their job satisfaction.

5. Discussion

The results of the present study have shown that there is a significant difference between the general hospital nurses and psychiatric hospitals in coping strategies. The hypothesis states that ‘Nurses working in General and Psychiatric hospitals differ in their coping strategies’ and the results of the study has proved that there is a significant difference between general hospital nurses and psychiatric hospital nurses in the use of coping strategies in stressful situations or problematic conditions. The coping strategies they use in stressful conditions of their work are categorized into eight strategies and these eight strategies are again grouped in to two main categories. They are:

1. Active coping strategies:
   a. Confrontive coping
b. Seeking social support

c. Planful problem solving

d. Positive reappraisal

2. Passive coping:

a. Distancing

b. Self-controlling

c. Accepting responsibility

d. Escape avoidance

The differences between general hospital nurses and psychiatric hospital nurses in active coping strategies are discussed below.

The results of the present study has shown that general hospital nurses and psychiatric hospital nurses are differ in using Confrontive coping when they confront with the stressful situations at the working conditions. It indicates that general hospital nurses take more necessary actions and directly confront with problem when they face in their working conditions compared to psychiatric hospital nurses.

In the coping strategy of seeking social support, the results of the present study have shown the significant differences between the general hospital nurses and psychiatric hospital nurses. The p value of the statistical analysis has shown that there is greater difference exist between the both groups of nurses. The mean scores of the seeking social support coping strategy indicating that general hospital nurses seek greater amount of social support while they are working in the hospitals compared to psychiatric hospital nurses. Seeking social support indicates that seeking informational and emotional support from others in the working conditions. In the working settings they face any problems or issues which rise stress of anxiety in them, they try to get or seek informational and emotional support from their colleagues or peer works or from other whoever is available in the settings.

The present study has shown that there is a significant difference exists between general hospital nurses and psychiatric hospital nurses in Planful problem solving. The p value of the Planful problem solving indicates that greater difference found between the two groups. It has shown that the general hospital nurses execute well planned problem solving strategies compared to psychiatric hospital nurses. In which the nurses of general hospitals execute well-structured plans in solving problems which have been raised in the working conditions. When the problems have been raised they try to confront with the problem and try to understand in detail and understand the reasons behind the problems before they execute proper solutions to them. But the nurses of psychiatric hospitals are poor in executing well-structured problem solving strategies compared nurses of general hospitals.

In the coping strategy of positive reappraisal, the results of the present study have shown the significant differences between the general hospital nurses and psychiatric hospital nurses. The p value of the statistical analysis has shown that there is greater difference exist between the both groups of nurses. The mean scores of both the groups indicate that general hospital nurses use more positive reappraisal coping strategy when they confront with the stressful conditions compared to psychiatric hospital nurses. The positive reappraisal coping indicates that create positive a meaning and focus on personal growth. The nurses of general hospitals always try to focus on create more positive aspects by focusing their minds on solving problems which raised in their working conditions and seeking informational and emotional support from others. They also focus on personal growth. It has shown that they also more concentrate on developing themselves in their career. But the nurses of psychiatric hospitals use this coping strategy less compared to general hospital nurses.

The differences between general hospital nurses and psychiatric hospital nurses in passive coping strategies are discussed below.

In the coping strategy of distancing coping, the present study revealed that there is a significant difference exists between the general hospital nurses and psychiatric hospital nurses. The p value of the statistical analysis has shown that both the groups are differ in using distancing coping in the stressful conditions. The distancing coping indicates that most of the time when the problem is been raised we assume ourselves that the problem will be solved by itself or we try to not to confront with the problem or stressful situations. The results of the present has shown that the nurses of general hospitals use more distancing coping compared to nurses of psychiatric hospitals. Most of the time they try to avoid the situations which are stressful compared to psychiatric hospital nurses.

The results of the present study also indicate that the nurses of general hospital and nurses of psychiatric hospitals are differ in using self-controlling coping strategy. The p value of the statistical analysis has shown that there is much difference exist between two groups of nurses such as general hospital and psychiatric hospitals in using the self-controlling coping. Self-controlling coping reveals that whenever we confront with the stressful situations or problematic conditions we try to make put effort as much we can to regulate our feelings and actions in order to resolve problematic conditions or stressful situations. In this study, it has been shown that general hospital nurses do use more self-controlling coping strategy compared to psychiatric hospital nurses. They try to control themselves in stressful situations and try to put more effort as much as they can to regulate their feelings and actions which are required for reducing the stress or solving the problems compared to nurses of psychiatric hospitals.

In the coping strategy of accepting responsibility coping, the present study revealed that there is a significant difference exists between the general hospital nurses and psychiatric hospital nurses. The p value of the statistical analysis has shown that both the groups are differing in using accepting responsibility coping in the stressful conditions. Accepting responsibility indicates that if the person is directly or indirectly involved in the raise of any problem in the working conditions, he or she should be ready to accept the fault and try to solve with the help of others. The study has shown that the general hospital nurses are ready to accept the mistake they have done and they are ready to take responsibility in resolving them. But this kind of attitude or
coping strategy used by psychiatric hospital nurses is less compared to other group of nurses.

The results of the present study also indicate that the nurses of general hospital and nurses of psychiatric hospitals are differing in using escape avoidance coping strategy. The p value of the statistical analysis has shown that there is much difference exist between two groups of nurses such as general hospital and psychiatric hospitals in using the escape avoidance coping. Escape avoidance indicates that the person try to avoid the problem by wishful thinking and putting behavior efforts whenever confronts with the stressful situation or problematic conditions. The results of the study has shown that the general hospital nurses use more escape avoidance coping strategy compared to psychiatric hospital nurses. Whenever they face stressful situations or problematic conditions they try to avoid those kind of situations by wishful thinking and putting their behavior efforts as well. But the nurses of psychiatric hospitals they don’t avoid or escape from the situations which increase stress in them, instead they try to face the situation directly compared to nurses of general hospitals.

Contrasts in dominance of stress exert their impact principally in the individual’s evaluation of the unpleasant experience i.e. primary or secondary evaluation. In spite of the fact that coping may lead to diminished stress intensity, the adequacy with which one manages distressing circumstances is not inherent characteristic in most meanings of coping (Anshel, 2000). Keil (2004) suggests that coping seems to convey with it a feeling of achievement or disappointment. Nonetheless, Webb (1996) additionally contends that achievement or disappointment is not fundamental to the idea of coping; all responses are some typical of coping, what is at issue is the adequacy of these reactions. Lazarus and Folkman (1984) distinguished two methodologies: coping, which reduces emotional stress (emotion-focused coping) and coping, which endeavors to manage or adjust the problem causing distress (problem focused coping).

In addition to individual assets, individuals have access to assets in their social environment. In particular, individuals' associations with others are a potential wellspring of support during times of stress. The impact of social support on conformity to work stress has gotten a lot of consideration amount of empirical concentration (Dewe et al., 2010). The idea of social support alludes to social systems (i.e., family friends, and associates) that can give a person with assets, both tangible (i.e., emergency money related help) and intangible (i.e., feelings of belonging or self-worth) (Stranks, 2005). Social support has been recognized as an asset that helps people cope with work stress through supportive associations with others (Sutherland and Cooper, 2000).

The results of the present study has shown that significant difference found between general hospital nurses and psychiatric hospital nurses in their level job satisfaction. The p value of the statistical analysis shown that greater amount of difference found between them. The hypothesis of this study states that ‘Nurses working in Psychiatric hospitals differ in their job satisfaction compared to nurses working in general hospitals’ and it has been accepted since the results of the study shown the difference between general hospital nurses and psychiatric hospital nurses. The mean values of job satisfaction scores indicating that general hospital nurses have shown higher level of job satisfaction compared to psychiatric hospital nurses. The following set of variables might have affected on the level of job satisfaction among nurses.

The following set of variables might have affected on the level of job satisfaction among male and female nurses. These variables are demographic conditions and age, training, years of experience in nursing, assignment and other socio-demographic variables, Personal conditions, Work conditions the second set of variables, reflect state of mind toward nature encompassing the work and real execution of the occupation and Organizational conditions, the last variable set, compare to components that are outer to the real execution of nurses’ work and speak to the bigger setting in which a nurse’s employment is performed.

6. Conclusions
Nursing profession is the most challenging job in the present context. In this context lot of factors will affect the nature of work of the nurses. In which coping strategies and job satisfaction is the most important one which will affect negatively on nurses working performance, fulfillment of their needs and adaptability to the situations. The present study was tried to explore the differences between general hospital nurses and Psychiatric hospital nurses in their coping strategies and level of job satisfaction. It has been said that the working conditions, organizational commitment, attitude towards the work and many more influence on the nurses in their level of job satisfaction and use of coping strategies in stressful situations. The present study tried an attempt to explore these variables.

References

