KNOWLEDGE OF WORKPLACE STRESS AND APPLICATION OF WORKPLACE STRESS REDUCTION STRATEGIES AMONG NURSES IN THE UNIVERSITY OF UYO TEACHING HOSPITAL, UYO.

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Article history:		Abstract:
		The main focus of this study was to assess knowledge of workplace stress and application of workplace stress reduction strategies among nurses in the University of Uyo teaching hospital, Uyo. Cross-sectional survey design was adopted for this work. The area covered by the researcher was University of Uyo Teaching Hospital, Uyo. The target population for this study was 529 nurses in UUTH Administration Office); comprising male and female nurses between 27 to 50 years of age working at the Hospital. Simple random sampling technique was used to select 250 (two hundred and fifty) respondents consisting of nurses working at the Teaching Hospital from six Departments who constituted the sample size used for the study. The instrument used in this study for data collection was a questionnaire titled " The Health Work Questionnaire" (HWQ). In order to establish both the face and content validity of the research instruments, the drafted instrument was given to the researcher's supervisor and an expert in Physical and Health Education Department, University of Uyo, Uyo and from Educational Foundation, Guidance and Counseling Department, University of Uyo, Uyo. To validate it. The Measure of Central Tendency (mean and percentage) was used to obtain the Criterion Mean. The Chi-square statistical analysis was used to test the hypotheses, set at probability alpha level of 0.05. From the result it was observed that there is significant difference in the extent of knowledge and awareness of workplace stress among nurses at UUTH, Uyo. It was observed that there is significant difference in the extent of presence of workplace stressors among nurses at the UUTH, Uyo. Finally, the result proved that there is significant difference in the extent of application of individual workplace reduction strategies among nurses at the UUTH, Uyo. The study concluded that nurses are knowledgeable and aware of stress at workplace, stressors like overloading work, negative supervisory relationship and feeling irritated at workplace are among the factors determining workplace stress. One of the recommendations made in the study was that employer's efforts at UUTH, Uyo to decrease the determinants of stress in the workplace can increase nurses' productivity and so should be encouraged.

INTRODUCTION

Stress in one way is a result of social relationship in such a way that a person may undergo stress because of the people and things around him or her (Achalu, 2014). A person may undergo stress especially when he assumes a danger to his or her person. In Exercise Physiology and Sports Medicine, stress possesses both negative and positive outcomes (AHA, 2018). Stress that promotes good health like the stress from serious sports training, dancing and activities that one enjoys so much despite some dissipation of mental and physical energy is termed eustress. The stress that is accompanied with pains, sadness, disappointment and unhappiness is termed distress. Hence, there is beneficial and harmful stress (AHA, 2018).

Stress is also a response of the body to the beneficial things or to things dangerous (Achalu, 2014; American Institute of Stress, 2022). When a person perceives danger, automatically signals are transferred to the mind and reaction to that danger is generated. In positive sense, stress pulls us towards a necessary

reaction and solution against the threat posed to us. While in negative sense, distress is a barrier which reduces productivity and plays a major role in creating hurdles to achieve our goals.

Work can have both negative and positive health effects on workers. Work can serve as means of economic survival and happiness but can also expose workers to what can be termed as occupational hazards that pose serious threats to health and well-being of workers and their organisations. These hazards can lead to occupational stress which in the study is called workplace stress (Stranks, 2015).

According to American Institute of Stress (2022). Event or objects that trigger a stress response may include:

a.   Environmental stressors (hyper or hypothermic temperatures, elevated sound and noise at noise pollution level; over-illumination and overcrowding).
b.   Daily stressing events (traffic hold-ups, lost keys, money, quality and quantity of physical activity).
c.   Life changes (e.g. divorce, bereavement).
d.   Workplace stressors (such as, high job demand, versus low job control, repeated or sustained exertions, forceful exertions, extreme postures, office cluster).
e.   Social stressor (such as societal and family demands).
f.   Chemical stressors (such as tobacco, cigarettes, alcohol, drugs).

The work of helping people to achieve good health is what nurses do primarily and to disseminate positive health information to people to achieve good health. Nurses in hospitals are a class of workers that by themselves need to focus on what they do at workplace. They need to work in an environment free of stress and if faced with stress be able to apply stress reduction strategies to maintain good health (Czajka, Czajka, Biłas, Pałka, Edrusik and Czapkiewicz, 2020).

Occupational or workplace stress is common among nurses and is thought to be one of the key factors for the global shortages of nurses in hospitals and health centres according to the World Health Organization (WHO, 2020). To the best of the researcher's knowledge, no study has yet been done to assess the workplace stress among the nurses in the University of Uyo Teaching Hospital, (UUTH) Uyo.

The present study therefore aimed at identifying the extent of knowledge of workplace stress and application of workplace stress reduction strategies among nurses in the University of Uyo Teaching Hospital, Uyo**.**

STATEMENT OF THE PROBLEM

Researches have highlighted occupational stress as one of the major problems confronting workers in modern society (Sveinsdottir, Biering and Ramel, 2016). The Lancet (2020), submitted that occupational stress or workplace stress is a major hazard for many workers and nurses cannot be exempted. Increased workload, fear of staff downsizing and rationalization, overtime, hostile working environment are just a few of the stressors workers are facing. Apart from job security, the job contents are becoming very technological such that machines used by workers pose serious threats to the operators. Workplace stress can lead to major illnesses which bring about physical, mental and emotional health implications. Researchers have pointed to associated bodily pains, heartache, stroke, obesity, constipation, insomnia, anxiety, and memory lapses (Wright and Cropanzano, 2018; Wu, Sun and Wang, 2017). The related effects of stress of parents, of which some of the nurses are with families, have been shown to affect their family members (Solantaus, Leinonen and Punamaki, 2015).In view of these health problems from stress, work productivity is reduced due to absenteeism and may also result in eventual customer's apathy to good patronage. Workers as well as the employers need to work harmoniously to apply workplace reduction strategies to occupational stress (Stranks, 2015). They need to study the types of work and its attendant possible hazards.

The University of Uyo Teaching Hospital (UUTH) is a Federal hospital; and a teaching hospital to medical students and other related health personnel trainees. A nurse is a trained healthcare worker found in health institutions usually working along with the physicians. The work of nurses is vital to the hospital and their good health will go a long way to provide positive productivity at the Institution. Literature is yet to be found investigating stress study on nurses of the Federal Hospital. This study therefore aimed at filling the gap by identifying the nurses' knowledge of workplace stress and application of stress reduction strategies among them in the University of Uyo Teaching Hospital (UUTH), Uyo**.**

PURPOSE AND OBJECTIVES OF THE STUDY

The purpose of the study is to investigate the knowledge of workplace stress and extent of application of workplace stress reduction strategies among nurses in the University of Uyo Teaching Hospital (UUTH), Uyo**.** The objectives used to guide the study are as follows:

1. To determine the extent of knowledge and awareness of workplace stress among nurses at UUTH, Uyo.

2. To determine the extent of the presence of workplace stressors among nurses at the UUTH, Uyo.
3. To determine the extent of nurses' application of individual workplace stress reduction strategies at the UUTH, Uyo.

RESEARCH QUESTIONS

The following research questions were generated to guide the study

1. What is the extent of knowledge and awareness of workplace stress among nurses at the UUTH, Uyo?
2. What is the extent of presence of workplace stressors among nurses at the UUTH, Uyo?
3. What is the extent of application of individual workplace stress reduction strategies among nurses at the UUTH, Uyo.

HYPOTHESES

The following hypotheses were generated to guide the study:

1. There is no significant difference in the extent of knowledge and awareness of workplace stress among nurses at UUTH, Uyo.
2. There is no significant difference in the extent of presence of workplace stressors among nurses at the UUTH, Uyo.
3. There is no significant difference in the extent of application of individual workplace stress reduction strategies among nurses at the UUTH, Uyo.

The Significance of the Study

The findings of the study would provide useful information to the nurses and the management of UUTH, Uyo on the knowledge of workplace stress and application of stress reduction strategies among nurses in the University of Uyo Teaching Hospital (UUTH), Uyo**.** The findings would also provide possible solutions to improve workplace stress among the nurses. It may help the public health educators and educationists generally and government in particular to be aware of the problems of workplace stress encountered by the nurses in their workplaces and ways of developing intervention strategies to tackle the problem.

As a public health study the information will help to enhance knowledge and awareness of workplace stress not only on nurses but on other workers at the hospital. The study would be beneficial to other researchers in providing relevant literature with emphasis on the workplace stress. Lastly, the study will add to the present stock of knowledge for future researchers intending to expand the scope of the study.

RESEARCH METHODOLOGY

The cross-sectional survey design was used for the study It helped the researcher to collect the relevant data as required among nurses at the study area; as earlier used by Strank (2015) and Siegrist (2019).

The area of study is the University of Uyo Teaching Hospital, Uyo. It is sited along Abak Road, in Uyo, the Akwa Ibom State capital. The justification for selecting the study area was by its position as the only teaching hospital of a Federal University in the State. The researcher is also a nurse conversant for years with the nature of work of the nurses in hospitals, and wishes to undertake the study at the Teaching Hospital to bring out information about their health conditions to their knowledge.

The target population for the study is 529 nurses (Source: UUTH Administration Office); comprising male and female nurses between 27to 50 years of age working at the Hospital.

The researcher used the simple random sampling technique to select 250 (two hundred and fifty) respondents consisting of nurses working at the Teaching Hospital from six Departments. The sample size was 43.9% of the population of 569 nurses, far above 10% minimum as stated by Cohen, Manion and Morrison (2000).

The instrument for collecting the data was a self-structured questionnaire for the first objective. The Health Work Questionnaire (HWQ) of Shikiar, Halpern, Rentz and Khan (2004), was respectively adapted for use for the other two objectives. The respondents were to answer accordingly as requested to the statements/questions in the various columns in the questionnaire.

The instrument was examined by two experts from the Physical and Health Education Department, University of Uyo, Uyo and one from Educational Foundation, Guidance and Counseling Department, University of Uyo, Uyo.

Thirty (30) copies of the questionnaires were administered to nurses at the St. Luke's Hospital, Anua, Uyo which is outside the main study Institution with nurses. The data collected were treated with the Cronbach Alpha Statistics, which provided a reliability coefficient index of r. 83. That showed the study instrument was highly suitable for use

The researcher had employed the assistance of five (5) research assistants, who were Heads of Departments at the Teaching Hospital to administer the questionnaires accordingly to 250 the nurses only. To make room for any mortality and effective returns of 250 copies of the questionnaire, 254 copies of the

questionnaire were administered of which252 were returned; in which the researcher then used 250 copies as designed as the sample size.

The data generated were sorted out and treated with the Descriptive (measure of Central Tendency) statistics to answer the research questions following (Sullivan and Artino, 2013). The Measure of Central Tendency (mean and percentage) was used to obtain the Criterion Mean. The Chi-square statistical analysis was used to test the hypotheses, set at probability alpha level of 0.05.

RESULTS

Research Question 1: What is the extent of knowledge and awareness of workplace stress among nurses at UUTH, Uyo?

Table 1: Descriptive (Measure of Central Tendency) statistical analysis of the extent of knowledge and awareness of workplace stress among nurses.

Nos.	Knowledge and awareness of workplace stress	Yes	No	Total	TWS	IM	GM	CM	Result
1.	The eustress type of stress can be beneficial	228	22	250	478	1.9	1.93	1.5	Positive
2.	The distress type of stress is a harmful stress	228	22	250	478	1.9			
3.	Stress management is vital to work productivity	236	14	250	486	1.9			
4.	Work overload and irritating customers can be workplace stressors	250	-	250	500	2			
5.	Workplace stress affects physical, mental and emotional health seriously	242	8	250	492	1.97			
	Total (Average)	1184 (94.7%)	66 (5.3%)	1250 (250)		9.67			

Result: In Table 1, the descriptive statistical result is that on the average, 94.7 % of the respondents have knowledge and awareness of workplace stress while 5.3 % did not have. All the item means (numbers 1 to 5 respectively with 1.9, 1.9, 1.9, 2 and 1.97 scores); and the Grand mean with 1.8 were all greater than the Criterion mean of 1.5. The result was therefore positive, showing that the extent of nurses' knowledge and awareness of workplace stress is positively high.

Research Question 2: What is the extent of presence of workplace stressors among nurses at the UUTH, Uyo?

Table 2: Descriptive (Measure of Central Tendency) statistical analysis of the extent of presence of workplace stressors among the nurses.

Nos.	Presence of workplace stressors among nurses	Yes	No	Total	TWS	IM	GM	CM	Result
1.	Do you feel overworked at place of work?	180	70	250	430	1.7	1.5	1.5	Positive
2.	Are you working at poor working environment?	104	146	250	354	1.4			
3.	Have you been having insomnia (lack of sleep) at home after work?	98	152	250	348	1.4			
4.	Are you getting worried with raised heart-beats?	186	64	250	436	1.7			
5.	Do you experience memory lapses and eyes roaming from time to time?	129	121	250	379	1.5			
6.	Do you often pace up and down and get restless at workplace?	116	134	250	366	1.5			
7.	Do you have apathy and loss of interest at workplace?	138	112	250	388	1.6			
8.	Do you feel irritated and depressed at workplace?	130	120	250	380	1.5			
9.	Do you get home feeling tense with loss of sex drive?	97	153	250	347	1.4			
10.	Are you eating more or less than normal?	128	122	250	378	1.5			
11.	Do you have incessant headache and body pains?	106	144	250	356	1.4			
12.	Do you feel like taking alcohol and, or drugs to keep you relaxed?	40	210	250	290	1.2			
13.	Do you have poor supervisory relationship at workplace?	168	82	250	418	1.7			
14.	Do you often feel like sitting down most of the time?	206	44	250	456	1.8			
	Total (Average)	1826 (52%)	1674 (47.8)	3500 (25)		21.3			

Result: In Table 2, the descriptive statistical result is that on the average, 52 % of the respondents agreed there is presence of workplace stressors among the nurses at the UUTH, Uyo while 47% did not agree. The item means (numbers 1, 7, 8, 10, 13 and 14 respectively with 1.7, 1.6, 15, 1.5, 1.7 and 1.8 scores); and the Grand mean with 1.5 were either equal to or greater than the Criterion mean of 1.5. The result is therefore positive, showing that there is a noticeable presence of workplace stressors among the nurses at the UUTH, Uyo.

Research Question 3: To what extent is the application of individual workplace stress reduction strategies among nurses at the UUTH, Uyo?

Table 3: Descriptive (Measure of Central Tendency) statistical analysis of the extent of the application of individual workplace stress reduction strategies among the nurses.

Nos.	Nurses' Individual workplace stress reduction strategies.	Yes	No	Total	TWS	IM	GM	CM	Result
1.	Have you identified the risk(s) associated with your type of work?	62	188	250	312	1.2	1.36	1.5	Negative
2.	Have you identified the harm it may cause you to the risk?	63	187	250	313	1.3			
3.	Do you design your work to be of normal load at the workplace?	118	132	250	368	15			
4.	Do you design your work to have break time?	72	178	250	272	1.1			
5.	Do you master thoroughly the skills required for your work?	206	44	250	456	1.8			
6.	Do you request for assistants should your work be overloaded?	53	197	250	303	12			
7.	Do you readily recognize stress flash point in your behaviour?	96	154	250	346	1.4			
8.	Do you stop to rest when you are fatigued?	89	161	250	339	1.4			
9.	Do your meal contain balanced items (without much sugar)?	122	128	250	372	1.5			
10.	Do you refrain from having the urge for alcohol and, or drugs to relax?	76	174	250	326	1.3			
11.	Do you undertake sports and exercises after work?	28	222	250	278	1.1			
12.	Do you access medical examinations from time to time?	64	186	250	314	1.3			
13.	Do you have time to relax with other refreshing activities?	119	131	250	369	1.5			
14.	Do you try and have time for sound sleep in the night?	114	136	250	364	1.5			
	Total (Average)	1282 (37%)	2218 (63%)	3500 (25)		19.1			

Result: In Table 3, the descriptive statistical result is that on the average, 37 % of the respondents agreed to applying individual workplace stress reduction strategies while 63% did apply. The item means (numbers 3, 5, 9, 13 and 14 respectively with 1.9, 1.8, 15, 1.5 and 1.5 scores); and the Grand mean with 1.38 were either equal to or greater than the Criterion mean of 1.5. The result is negative, showing that the majority of the nurses do not apply individual workplace stress reduction strategies among them at the UUTH, Uyo.

Hypothesis 1: There is no significant difference in the extent of knowledge and awareness of workplace stress among nurses at UUTH, Uyo.

Table 4: Chi-square statistical analysis of no significant difference in the extent of knowledge and awareness of workplace stress among nurses at UUTH, Uyo.

Nos.	Knowledge and Awareness	FO	FE	FO-FE	$(Fo-Fe)^2$	X^2	Result
1.	The eustress type of stress can be beneficial	228	125	84.87	103	502.8*	Significant
2.	The distress type of stress is a harmful stress	228	125	84.87	103		
3.	Stress management is vital to work productivity	230	125	98.6	101		
4.	Work overload and irritating customers can be workplace stressors	250	125	125	125		
5.	Workplace stress affects physical, mental and emotional health seriously	242	125	109.5	117		
		1184			502.8		

*Significant at $P \leq 0.05$, df 1, = 3.84 Critical X^2 value

Result: In Table 4, the calculated X^2 value of 502.8 is greater than the X^2 critical value of 3.84. The hypotheses that there is no significant difference in the extent of knowledge and awareness of workplace stress among nurses at UUTH, Uyo is rejected. The result means that there is significant difference in the extent of knowledge and awareness of workplace stress among nurses at UUTH, Uyo.

Hypothesis 2: There is no significant difference in the extent of presence of workplace stressors among nurses at the UUTH, Uyo.

Table 5: Chi-square statistical analysis of no significant difference in the extent of presence of workplace stressors among nurses at UUTH, Uyo.

Nos.	Presence of workplace stressors	Fo	Fe	Fo-Fe	$(Fo-Fe)^2$	X^2	Result
1.	Do you feel overworked at place of work?	180	125	55	24.2	167.9*	Significant
2.	Are you working at poor working environment?	104	125	-21	3.5		
3.	Have you been having insomnia (lack of sleep) at home after work?	98	125	-27	5.8		
4.	Are you getting worried with raised heart-beats?	186	125	61	0.5		
5.	Do you experience memory lapses and eyes roaming from time to time?	129	125	4	0.1		
6.	Do you often pace up and down and get restless at workplace?	116	125	-9	0.6		
7.	Do you have apathy and loss of interest at workplace?	138	125	13	1.4		
8.	Do you feel irritated and depressed at workplace?	130	125	5	0.2		
9.	Do you get home feeling tense with loss of sex drive?	97	125	-28	6.3		
10.	Are you eating more or less than normal?	128	125	3	0.07		
11.	Do you have incessant headache and body pains?	106	125	-19	0.15		

12.	Do you feel like taking alcohol and, or drugs to keep you relaxed?	40	125	-85	57.8
13.	Do you have poor supervisory relationship at workplace?	168	125	43	14.79
14.	Do you often feel like sitting down most of the time?	206	125	81	52.5
		1826			167.9

*Significant at P ≤ 0.05, df 1, = 3.84 Critical X^2 value.

Result: In Table 5, the calculated X^2 value of 167.9 is greater than the X^2 critical value of 3.84. The hypotheses that there is no significant difference in the presence of workplace stressors at UUTH, Uyo is rejected. The result means that there is significant difference in the extent of presence of workplace stressors among nurses at the UUTH, Uyo.

Hypothesis 3: There is no significant difference in the extent of application of individual workplace reduction strategies among nurses at the UUTH, Uyo.

Table 6: Chi-square statistical analysis of no significant difference in the extent of application of individual workplace reduction strategies among nurses at UUTH, Uyo.

Nos.	Nurses' Individual workplace stress reduction strategies.	Fo	Fe	Fo-Fe	(Fo-Fe)²	X^2	Result
1.	Have you identified the risk(s) associated with your type of work?	62	125	-63	31.8	322.3*	Significant
2.	Have you identified the harm it may cause you to the risk?	63	125	-62	30.8		
3.	Do you design your work to be of normal load at the workplace?	118	125	-7	0.4		
4.	Do you design your work to have break time?	72	125	-53	22.5		
5.	Do you master thoroughly the skills required for your work?	206	125	81	52,5		
6.	Do you request for assistants should your work be overloaded?	53	125	-72	41.5		
7.	Do you readily recognize stress flash point in your behaviour?	96	125	-29	6.7		
8.	Do you stop to rest when you are fatigued?	89	125	-36	10.4		
9.	Do your meal contain balanced items (without much sugar)?	122	125	3	0.1		
10.	Do you refrain from having the urge for alcohol and, or drugs to relax?	76	125	-49	19.2		
11.	Do you undertake sports and exercises after work?	28	125	-97	75.3		
12.	Do you access medical examinations from time to time?	64	125	-61	29.8		
13.	Do you have time to relax with other refreshing activities?	119	125	-6	0.29		
14.	Do you try and have time for sound sleep in the night?	114	125	-11	0.97		
	Total	1282			322.3		

*Significant at P ≤ 0.05, df 1, = 3.84 Critical X^2 value.

Result: In Table 6, the calculated X^2 value of 322.3 is greater than the X^2 critical value of 3.84. The hypotheses that there is no significant difference in the presence of workplace stressors at UUTH, Uyo is rejected. The result means that there is significant difference in the extent of application of individual workplace reduction strategies among nurses at the UUTH, Uyo.

DISCUSSION OF FINDINGS
Knowledge of Workplace Stress among Nurses of the UUTH

The study finding showed the majority of the nurses at UUTH have significant high knowledge and awareness of workplace stress among them (P ≤. 0.05, df 1 = 502.8).This is possible as the nurses are trained health professionals with knowledge of Health Education. Knowledge and awareness of any health problem is akin to being fore-armed against an attack. The knowledge would help to avoid and minimize implication of stress and even help to apply the stress reduction strategies. Achalu (2014) had posited the need for knowledge and awareness of the type of work one is engaged with and its inherent health problems such as stressors at workplace. The author asserted that such knowledge and awareness would be the first step to tackle occupational stress. Accordingly, Clements (2020), also toed the same line, submitting in support that stressors can come from the physical and social environments. Readily recognizing the stressors as forces determining stress at workplace is helpful in taking precautionary means to avoid stress. The study of Wu, Sun and Wang (2017) among Chinese female emergency nurses also noted that knowledge of Health Education and stress reduction training is necessary for nurses. Then putting the knowledge into practice would meet the solution for containing workplace stress.

Presence of Workplace Stressors among Nurses of UUTH

There is a significantly fair presence of workplace stressors among the nurses at UUTH (P ≤. 0.05, df 1 = 167.9).as reported in the study. That meant there are some determinant factors causing stress among them. The areas were that, they felt overworked, felt irritated at workplace and have poor supervisory relationship, though they agreed the working environment was okay. As American Institute of Stress (2022) and Achalu (2014), pointed out the presence of stressors must surely bring forth stress on the workers. The nurses had agreed to having worried mind and raised heartbeats; apathy to work; and being overworked. The nursing profession requires moving up and down to attend to patients and assist the medical

doctors. In a hospital like the Teaching Hospital there would be many patients and if the number of nurses are not enough definitely the few nurses employed will be stressed to cope with the enormous duties around them as noted by Jenkins and Elliott (2014) and WHO (2020). A presence of stressors need be addressed by the employers and the workers as well (WHO, 2021). The presence of stressors showed that there are determining factors for stress among the nurses which is noted same by Gulavani and Shinde (2014) and Marine, Ruotsalainen, Serra, and Verbeek(2016),.in their respected studies among nurses.

Application of Individual Workplace Stress Reduction Strategies among Nurses at UUTH

The present study found that there is no significant application of workplace stress reduction strategies among nurses at UUTH (P ≤. 0.05, df 1 = 322.3).According to Wu, Sun and Wang (2017) and Revicki and May(2019), workplace stress reduction would come from individual worker and the employer with the officers supervising the workers. Supervisor relationship with nurses is a very important aspect of keeping them free of stress (Tsitmideli, Skordoulis, Chalikias, Sidiropoulos and Papagrigoriou, 2016). It is clear from the results of the study that the nurses, to mention but a few, have not identified the risks associated with their jobs; they do not recognize the stress flash points so as to relax a bit; and they do not take to sports and exercises which is important to boost physical fitness capacity for workload. According to Siegrist (2019) and Stranks (2015), there is need to study how one's body would be behaving so as to know when stress would set in. The stress flash points can show by being fatigued, lapsing in memory, having an abnormal eating habit. Applying stress reduction strategies would help a lot to tackle workplace stress and would contain the stressors.

The study showed that at the UUTH, there is workload for nurses and relationship with the supervisors affects them negatively. These have served as few of the determining stressors inherent at UUTH among the nurses; though the study did not ask of other stress determinants like salary and job satisfaction that would come from regular promotions; provision of transportation and financial advances to acquire personal vehicles. As noted by Van Wormer, Fyfe-Johnson and Boucher (2015), the unavailability of all these necessary working items would surely become the stressors at workplace and nurses are also workers that need them to work comfortably. The UUTH authority could promote the nurses physical fitness status by incorporating sports and games centre in the form of a welfare scheme for the nurses as suggested and seen

in the study of O'Reilly, Scott, Thirlaway, (2019) and Wu, Sun and Wang (2017).

CONCLUSION

The findings of the study offered the conclusions that the nurses are knowledgeable and aware of stress at workplace, stressors like overloading work, negative supervisory relationship and feeling irritated at workplace are among the factors determining workplace stress. The nurses do not apply individual workplace stress reduction strategies. Thus study indicated there is stress among the nurses at UUTH, Uyo.

RECOMMENDATIONS

1. The study findings therefore permit the recommendations:
2. That employer's efforts at UUTH, Uyo to decrease the determinants of stress in the workplace can increase nurses' productivity and so should be encouraged.
3. That nurses should be afforded better supervisor relations.
4. Stressors should be readily identified and treated as a matter of urgency.

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