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Research Article

**EMOTIONAL EXPERIENCES AND COPING STRATEGIES OF
NURSING AND MIDWIFERY PRACTITIONERS IN PAKISTAN**Shagufta Perveen¹, Neelam Zia², Tahira Shaheen³¹Assistant Nursing Instructor, School of Nursing District Headquarters Hospital, Vehari²Nursing Instructor, College of Nursing Fatima Jinnah Medical University/Sir Ganga Ram Hospital, Lahore³Nursing instructor, Post Graduate College of Nursing Punjab, Lahore**Article Received:** January 2021**Accepted:** January 2021**Published:** February 2021**Abstract:**

Introduction: Nurses have tremendous responsibilities and deal with enormous challenges. It is reported that nurses are more prone to developing stress than other health care professionals. **Objectives:** The main objective of the study is to analyse the emotional experiences and coping strategies of nursing and midwifery practitioners in Pakistan. **Material and methods:** This cross-sectional study was conducted in District Headquarters Hospital, Vehari during June 2020 to December 2020. The population for the qualitative study involved staff nurses and midwives, including their managers. **Results:** The significant relationships between surface acting and job attitudes but no significant relationship between deep acting and job attitudes as witnessed by created a clear path for the qualitative study. Negative emotion is thus normatively prohibited. The participant below establishes a connection from a cultural norm of emotional regulation to explain her current expected organisational emotional behaviour. **Conclusion:** It is concluded that professional healthcare is associated with emotional experiences ranging from abuse, bullying, sadness and emotional exhaustion.

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INTRODUCTION:

Nurses have tremendous responsibilities and deal with enormous challenges. It is reported that nurses are more prone to developing stress than other health care professionals. Burnout is unfortunately one of the challenges that many nurses in different parts of the world are facing today [1]. In 2013, National Health Service (NHS) in England issued a report about nurses leaving the profession due to occupational stress and inability to provide nurse assessed good quality care. The Royal College of nursing revealed that in a survey carried out in 2013 involving 10,000 nurses, 62% of them contemplated resigning from their job the previous year citing stress. 61% cited hectic schedules as being a hindrance to providing good quality care and 83% felt an increase in workload which has seen 5000 nurses leaving the profession in a three-year period [2].

To explain emotional labour, nurses and other health professionals, as part of their job description, are expected to show positive and organizationally/occupationally desired emotions especially, to clients [3]. Thus, the engagement in emotional labour by nurses and midwives enable them to maintain a cordial relationship with clients. It must be acknowledged that nurses and midwives experience a wider range of emotional situations including anger, guilt, helplessness and others, regardless of context [4].

Extant literature has identified two broad strategies employed by service workers including nurses in the process of engaging in emotional labour; surface acting and deep acting. That is when nurses encounter emotional situations in their line of duties, they are expected to always show enough external positive emotions such as empathy and happiness if they are internally not [5]. Surface acting has been explained as the suppression of internally felt emotions with the purpose of enhancing organizationally or occupationally desired emotions. On the contrary, deep acting is conceptualised as engaging in emotional expressions which are consistent with internally felt emotions [6].

Objectives

The main objective of the study is to analyse the emotional experiences and coping strategies of nursing and midwifery practitioners in Pakistan.

MATERIAL AND METHODS:

This cross-sectional study was conducted in District Headquarters Hospital, Vehari during June 2020 to

December 2020. The population for the qualitative study involved staff nurses and midwives, including their managers. The staff nurses and midwives of the various units, departments and health facilities were chosen for this part of the study because they have been engaged in the health care profession for a considerable number of years and have diversified experiences in relation to the emotional demands of health care. All interviews were conducted face-to-face at the health facilities with nurses and midwives who met the study's inclusion criteria. The flexibility of the semi-structured interview, which was employed allowed the researchers to dig deeper into the issues of concern.

RESULTS:

The significant relationships between surface acting and job attitudes but no significant relationship between deep acting and job attitudes as witnessed by created a clear path for the qualitative study. Negative emotion is thus normatively prohibited. The participant below establishes a connection from a cultural norm of emotional regulation to explain her current expected organisational emotional behaviour. Aside the meaning that nurses and midwives gave to emotional labour, they also asserted that they encounter a myriad of emotional situations in the course of their professional duties. The emotional demands as reported by these health professionals range from positive emotions (happiness) to negative emotions (sadness, abuse, and emotional exhaustion). However, the emotional demands of healthcare, as alluded to by nurses and midwives, are not compensated for (emotionally) by superiors and organisations.

Another emotion demands of nursing and midwifery is emotional and physical abuse. The abusive nature of healthcare is mostly experienced by psychiatric nurses due to the kind of patients they take care of. The abusive nature of caring for patients is expressed by one psychiatric nurse as:

“oh, I quite remember one time a patient poured water, bucket full of water on a staff claiming that the staff looks like “shrek”, she watched some cartoon, but I don't know the mood of the staff but then she wept, how can you compare me to shrek”

Healthcare is noted to be stressful due to varying health conditions presented to professional workers. The stressful nature of healthcare professional duties tends to have a consequential effect on emotional wellbeing of the healthcare workers such that they get emotionally exhausted.

DISCUSSION

Healthcare delivery is anchored with emotional regulations which are expected to conform with organizationally or occupationally desired emotional display. Nurses and midwives are always expected to show positive emotions such as showing empathy and happiness on their job. Nevertheless, the display of positive emotions by these health professionals may be consistent or contradict their inner feelings which will in turn influence their job attitudes [7]. As witnessed in this study, the engagement in emotional labour is accompanied by varying emotional experiences. Hence, nurses and midwives, as part of their training, should be socialized to develop the necessary emotional intelligence that will enable them to manage the emotional experiences and demands of their professional duties. The development of emotional intelligence by these health professionals will sharpen and strengthen their psychological capital in the event of managing the emotional and stressful nature of their jobs [8].

The nature of work among nurses and midwives requires them to have an ability of managing and regulating their emotions [9]. Their display of emotions is expected to be in line with organizationally desired emotions which also have consequences on a myriad of issues including their job attitudes [10].

CONCLUSION:

It is concluded that professional healthcare is associated with emotional experiences ranging from abuse, bullying, sadness and emotional exhaustion. In addition to the above, the study found a number of coping resources employed by nurses and midwives in managing the emotional demands of the profession. The use of a qualitative research methodology to the study of emotional labour and gain better understanding of the phenomenon is evidenced in the present study.

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