Short Synergic Breaks Program to Cope With Work Stress in Nursing Professionals

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ABSTRACT

This research serves to raise awareness, motivate, and improve activities related to strengthening human capital and improving the work performance of nurses.

Objective: To determine the effect of the short synergistic break program on coping with work-related stress among nursing professionals at Chancay Hospital, Peru 2024.

Methodology: Sample: 52 nursing graduates who provide care in hospitalization areas. The research design was pre-experimental, applied, explanatory level with a quantitative approach. The effect of the intervention was measured by applying a pre- and post-test.

Results: Before the program was implemented, nursing professionals reported high stress levels in 28.8%, medium in 61.5%, and low in 9.6%; after the program was implemented, no professionals showed high levels of stress, the medium level was reduced to 19.2%, and the low level rose to 80.8%. To measure the level of work-related stress before and after implementing the program, the Wilcoxon statistical test showed that the probability was less than the significance level ($Z = -6.563$, $p < 0.05$).

Conclusions: Consequently, it is concluded that the implementation of the program has a positive effect on coping with work-related stress in nursing professionals.

Keywords: Work-related stress, short synergistic breaks, nursing professionals.

INTRODUCTION

Objective

The main objective of this research is: To determine the effect of the short synergic breaks program on coping with work stress in nursing professionals at the Hospital de Chancay, Peru 2024. The International Labor Organization (ILO, 2016), states that stress represents the physical and emotional response in the face of harm caused by an imbalance resulting from perceived demands and the resources and capabilities that a person possesses to cope with certain demands. For Sarsosa and Charria (2018), occupational stress at the level of the healthcare professional originates to a large extent that entails being responsible for human life, as well as the uncertainty generated by the diagnosis and treatment of the disease in each patient, added to the exposure to ethical and legal conflicts that are specific to the health sector. Pan American Health Organization (2023). Therefore, in the hospital setting the incidence of occupational stress can become serious as it not only affects the nursing professional, but also the patient who depends on their care (Benavides, et al. 2023; Megías and Castro, 2018).

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Nursing professionals who care for people affected by disease are exposed to long hours of intense work, fear of contamination, uncertainty due to the limitations of the healthcare system, among other conditions that cause high levels of stress. Faced with this, the World Health Organization (WHO, 2020), called on governments and those in charge of health care to address the constant threats to the health and safety of health personnel and patients, urging to improve mental health, among other things. Health institutions whose mission is to ensure the care, physical and mental well-being of patients, should ensure that their collaborators find the same conditions that lead to the proper functioning of the health system, since the development of care activities involves dealing with stressful and emotionally demanding situations. The COVID-19 pandemic reminded everyone of the essential role played by healthcare workers in alleviating the suffering and preventing the death of those in their care (WHO, 2020).

In Peru, through Ministerial Resolution No. 375-2008-TR, the basic ergonomics guidelines were published, as well as the ergonomic risk assessment procedures, whose objective is to establish parameters that will allow adapting working conditions to the physical and mental characteristics of workers in order to provide them with well-being, safety and efficiency in the performance of their duties (Ministry of Labor and Employment Promotion (2009). In this regulation, in numeral 37 clause e, it states that active breaks for rest must be included, advising short and frequent synergic breaks rather than long and scarce ones.

As Urgilez (2023) points out, it is precisely the performance of physical activities on a regular basis that is linked to both mental and physical benefits, which is why physical activity in the workplace is recognized as an action that promotes and prevents health, leading to a healthy lifestyle. As stated by the WHO (2022), physical activity reduces symptoms of depression and anxiety, which are triggers of work-related stress. Therefore, the Ministry of Health (MINSA, 2018), emphasizes that before, during and after work activities, collaborators of public institutions should develop active breaks of short duration as it will contribute to the prevention of diseases and reduce stress levels; unfortunately such practice is not observed in health institutions, whose professionals before the demand of patients do not take due time to develop active breaks despite not being required for a long time; for example, just stretching for 5 to 10 minutes to encourage changes of position and reduce muscle loads, improves blood circulation, promoting self-esteem and the ability to concentrate, since moving the joints of the neck, hands, legs and hips, relaxes the muscles that are tense (Adriana, 2020; Casierra, 2014, Graduate School of Business Administration-ESAN, 2018).

The ILO (2020) also insists that health professionals should be encouraged to take regular breaks, get up and move around for one minute every hour, an action that is rarely practiced and can lead to serious problems. Rodriguez (2022), states that the problems of anxiety and depression worldwide suffered an increase of 25% hand in hand with the pandemic and this has had a direct impact on the world. University of Malaga (2024), states that it is important to include active breaks in the work activity, creating spaces to stop and take a break from the tasks to be performed, thus contributing to cope with work stress.

Therefore, from the field of public health it is important to propose joint interventions with the aim of acting to change things, since as pointed out by the National Institute of Health (2018), public health comes to be the comprehensive social practice responsible for preventing diseases, prolonging life by promoting physical and mental health through organized efforts of political authorities and the community itself (Yépez, 2014; Zúñiga, 2019).

Furthermore, it is important to remember that, as stated by Segura et al. (2003), despite the contributions made in the past, public health currently occupies a marginal position in the health system, and this lack of prominence is associated with the little recognition given to the health profession and professionals. For Benavides et al. (2023), the public health emergency of international category by the COVID-19, has caused governments and society as a whole to turn their attention to health institutions and their professionals where human resources for health are considered an essential element to guarantee the health of the population and to advance towards the longed-for universal health.

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In this context, it is necessary to propose a program of short synergic breaks that will allow nursing professionals to face work stress, since human behavior is a complex and dynamic subject that requires research and permanent updating. The results allow defining action plans aimed at improving aspects that negatively affect the normal development of the institution, enhancing those favorable conditions that make daily management a pleasant and motivating work (Barradas et al, 2018).

The objective of the research is to determine the effect of the short synergic breaks program on coping with work stress in nursing professionals at the Hospital de Chancay, Peru 2024. The study is justified by the lack of evidence of previous research, even more so in relation to nursing professionals, which is the healthcare occupational group with 40% of the total number of workers in the institution under study. Therefore, the research will help managers to raise awareness, motivate and improve activities related to the strengthening of human capital, allowing them to face work stress, and thus improve response actions to resolve adverse situations, which will be reflected in the work performance of nurses, thus meeting the objectives of the institution (Cuervo, et al. 2020).

METHOD

The research design is pre-experimental (Campbell & Stanley, 1963), a control group with which to confront and determine causality effects was not considered, but the effect of the intervention was measured by applying a pre-test and post-test. At the same time, it is of an applied type, with an explanatory level of research (Hernández et al., 2014), since the causes of why the phenomenon occurs and under what conditions it occurs are explained. The approach is quantitative, determining the hypothesis through statistical analysis of the numerical data that were collected.

The population consisted of 52 graduates in nursing who perform care functions in the hospitalization areas (medicine, pediatrics, neonatology, surgery and gynecology). Non-probabilistic sampling was applied, with the participation of the total population.

The techniques used for the research during the pre-test and post-test were the checklist and survey. For the measurement of work stress, the questionnaire was used as an instrument by means of a list of questions to measure it according to its dimensions and to obtain answers that the respondent provided by filling it out himself (Hernández et al., 2014). The instrument used to measure the level of work stress in the nursing professional was the ILO-WHO work stress scale, whose authors are Matteson and Yvancevich, and for this reason, the adaptation of the ILO-WHO work stress scale was taken as a reference (Suárez, 2013), which was adapted taking into consideration the area of study.

To determine the validity of the instrument, Aiken's V was used and the result was 96%, therefore, it has a high validity. The instrument was composed of 20 items, distributed in 05 dimensions: organizational structure, organizational territory, technology, lack of cohesion and group support; each one considered 04 items. The Likert scale was used as a response alternative: totally disagree (1), disagree (2), neither agree nor disagree (3), agree (4), totally agree (5). The evaluation scale used was: high stress level (74 - 100), medium stress level (47 - 73) and low stress level (20 - 46). To determine the reliability value of the instrument, the internal consistency method based on Cronbach's Alpha Coefficient was used. The questionnaire was applied to a total of 20 nursing professionals from a hospital with similar characteristics to the study population, and was found to have excellent reliability, obtaining a value of 0.913.

The short synergic breaks program was developed based on the occupational gymnastics plan already validated by the Ministry of Labor and Employment Promotion (2024), being adapted by the researcher to the hospital setting, aimed at nursing professionals. To measure the execution of the program, a sequence of exercises was applied for a period of two months (June and July 2024). Each session lasted 10 minutes and included breathing, mobility and stretching exercises to deal with work stress.

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RESULTS

Table 1.- Stress levels before and after the short synergic breaks program.

Short synergic breaks program					
			Before	After	
		F	%	F	%
Level of work stress	Higt	15	28.8%	0	0.0%
	Medium	32	61.5%	10	19.2%
	Low	5	9.6%	42	80.8%

Source: Database – researcher's SPSP report.

Table 1 shows the levels of work stress in nursing professionals before and after the implementation of the short synergic breaks program. Before the intervention, 28.8% of the professionals reported high levels of stress, 61.5% reported medium levels and 9.6% reported low levels of stress. After the intervention, none of the professionals reported high levels of stress, while 19.2% reported medium levels, and 80.8% reported low levels. The results obtained indicate a significant decrease in work stress levels, indicating that the short synergic breaks program is beneficial in reducing stress among nursing professionals at the Hospital de Chancay, Peru. These results are related to those found by Palacios (2022).

Table 2.- Organizational structure-related stress levels before and after the short synergistic breaks program.

Short Synergistic Break Program					
			Before	After	
		f	%	f	%
Stress level in the organizational structure	Higt	1	1.9%	0	0.0%
	Medium	38	73.1%	7	13.5%
	Low	13	25.0%	45	86.5%

Source: Database – researcher's SPSP report.

Table 2 shows the levels of work stress associated with the organizational structure in nursing professionals before and after the implementation of the short synergic breaks program. Before the intervention, 1.9% of the professionals reported high levels of stress, 73.1% reported medium levels, and 25.0% reported low levels of stress in terms of organizational structure. After the intervention, none of the professionals evidenced high levels of stress, while 13.5% of the professionals reported medium levels, 86.5% reported low levels. The results obtained show a significant decrease in the levels of work stress associated with the organizational structure after the implementation of the short synergic breaks program, indicating that the intervention was effective in improving the well-being of nursing professionals in this area. These results are related to those obtained by Robles and Saavedra (2021).

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Table 3.- Stress levels related to the organizational territory before and after the short synergic breaks program.

Short Synergistic Break Program					
			Before	After	
		f	%	f	%
Stress level in relation to the organizational territory	Higt	7	13.5%	0	0.0%
	Medium	27	51.9%	8	15.4%
	Low	18	34.6%	44	84.6%

Source: Database – researcher's SPSP report.

Table 3 presents the levels of work stress associated with the organizational territory in nursing professionals before and after the implementation of the short synergic breaks program. Before the intervention, 13.5% of the professionals reported high levels of stress, 51.9% reported medium levels and 34.6% reported low levels in relation to the organizational territory. After the intervention, none of the professionals reported high levels of stress, while 15.4% reported medium levels, 84.6% reported low levels. These results show a notable decrease in the levels of occupational stress associated with the organizational territory after the implementation of the short synergistic breaks program, indicating that the intervention was effective in improving the well-being of nursing professionals in this aspect (López, 2020; WHO 2022).

Table 4.- Levels of technology-related stress before and after the short synergistic breaks program.

Short Synergistic Break Program					
			Before	After	
		f	%	f	%
Stress level related to technolog	Higt	26	50.0%	0	0.0%
	Medium	18	34.6%	11	21.2%
	Low	8	15.4%	41	78.8%

Source: Database – researcher's SPSP report.

Table 4 shows the levels of work-related stress associated with technology in nursing professionals before and after the implementation of the short synergic breaks program. Before the intervention, 50.0% of the specialists reported high levels of stress, while 34.6% presented medium levels and 15.4% presented low levels in relation to technology. After the intervention, none of the professionals reported high levels of stress, while 21.2% of the professionals reported medium levels, 78.8% reported low levels. The results obtained show a significant decrease in the levels of work-related stress associated with technology after the implementation of the short synergistic breaks program, indicating that the intervention was effective in improving the well-being of nursing professionals in this area (Cuervo, et al, 2020).

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Table 5.- Stress levels related to lack of cohesion before and after the short synergistic breaks program.

Short Synergistic Break Program					
			Before	After	
		F	%	f	%
Stress level in relation to lack of cohesion	Higt	19	36.5%	0	0.0%
	Medium	28	53.8%	5	9.6%
	Low	5	9.6%	47	90.4%

Source: Database – researcher's SPSP report.

Table 5 presents the levels of work stress associated with the lack of cohesion in nursing professionals before and after the implementation of the short synergic breaks program. At the time of the intervention, 36.5% of the professionals reported high levels of stress, 53.8% reported medium levels, and 9.6% reported low levels of stress related to lack of cohesion. After the intervention, none of the professionals reported high levels of stress, 9.6% reported medium levels, and 90.4% reported low levels. These results suggest a significant decrease in work stress levels associated with lack of cohesion after the implementation of the short synergistic breaks program, indicating that the intervention was effective in improving the well-being of nursing professionals in this aspect.

Table 6.- Stress levels related to group support before and after the short synergistic breaks program.

Short Synergistic Break Program					
			Before	After	
		F	%	f	%
Stress level in relation to group support	Higt	9	17.3%	0	0.0%
	Medium	35	67.3%	10	19.2%
	Low	8	15.4%	42	80.8%

Source: Database – researcher's SPSP report.

Table 6 presents the levels of work stress associated with group support in nursing professionals before and after the implementation of the short synergic breaks program. Before the intervention, 17.3% of the professionals reported high levels of stress, while 67.3% had medium levels and 15.4% had low levels of stress in relation to group support. After the intervention, none of the professionals reported high levels of stress, 19.2% reported medium levels and 80.8% low levels. The results obtained suggest a significant decrease in stress levels associated with group support after the implementation of the short synergistic breaks program, indicating that the intervention was effective in improving the well-being of nursing professionals in this area.

Occupational stress originated in hospital centers can affect the quality of life and productivity of nursing professionals, negatively impacting the proper development of the work team and therefore the organization; leading to a double impact, since it not only affects the health professional but also the person receiving the service.

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In the present study, it has been determined that the short synergic breaks program has positive effects on coping with work stress in nursing professionals at the Hospital de Chancay, Peru. Before the implementation of the program, nursing professionals reported high stress levels in 28.8%, medium stress in 61.5% and low stress in 9.6%. After the implementation of the program, no professional evidenced high levels of stress, while the medium stress level was reduced to 19.2%, and the low stress level increased to 80.8%. Therefore, by means of the Wilcoxon test with a significance value of 5%, it was concluded that the active breaks program was effective, given that a significant decrease in work stress levels after the intervention was statistically demonstrated.

This result is similar to the study conducted by Luna (2024), who demonstrated using Wilconxon statistics, with a p= <0.05 that the short synergic breaks program significantly reduced work stress in the personnel of Centro Médico Cima S.A.C. Similarly, Farro (2022), determined that the active breaks program has a positive effect on work stress since the level of high stress went from 21.2% to 2.4%, being its application effective, thus demonstrating the effectiveness of the program. In the same line, Tunja (2021), in his research, determined that the active breaks program contributes to the reduction of work stress, so it is necessary to promote this type of program in all sectors. Montero (2019), for his part, was able to demonstrate the benefits of applying a program of active breaks within the workday in order to reduce the symptoms of stress at work, managing to identify that the program of active breaks contributes to the reduction of symptoms of stress in nursing.

Regarding the organizational structure dimension, before the intervention of the short synergistic breaks program, 1.9% of the nursing professionals reported high levels of work stress, 73.1% reported medium levels, and 25.0% low levels; after the intervention, none of the professionals reported high levels of work stress, 13.5% reported medium levels, and 86.5% reported low levels.

Referring to the organizational territory dimension, before the intervention of the short synergic breaks program, 13.5% of the nursing professionals reported high levels of work stress, 51.9% medium levels and 34.6% low levels of stress; after the intervention it was possible to establish that none of the professionals showed high levels of stress, while 15.4% showed medium levels, increasing to 84.6% the low levels of stress, establishing a considerable decrease in the levels of work stress, the intervention being effective in improving the wellbeing of the professionals.

In the technology dimension, before the short synergistic breaks program intervention, 50.0% of nursing professionals reported high levels of work-related stress, 34.6% had medium levels, and 15.4% had low levels. After the intervention, it was found that none of the professionals showed high levels of stress; only 21.2% reported medium levels, while 78.8% had low levels. The results obtained show a significant decrease in the levels of stress associated with technology, indicating that the intervention was effective in improving the professionals' well-being.

Regarding the lack of cohesion dimension, before the short synergistic breaks program intervention, 36.5% of nursing professionals reported high levels of work-related stress, 53.8% medium levels, and 9.6% low levels. After the intervention, no professionals reported high levels of stress, 9.6% reported medium levels, and 90.4% reported low levels. The results show that the program has significant effects on reducing work-related stress levels among professionals.

In the group support dimension, before the short synergistic breaks program intervention, 17.3% of nursing professionals reported high levels of work-related stress, while 67.3% had medium levels and 15.4% had low levels. After the intervention, none of the professionals reported high levels of stress, 19.2% reported medium levels, and 80.8% reported low levels. The results established a significant decrease in work-related stress levels, improving the well-being of professionals.

General hypothesis testing

H_0: The short synergistic break program has no positive effect on coping with work-related stress among nursing professionals at Chancay Hospital, 2024.

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H_1: The short synergistic break program has a positive effect on coping with work-related stress among nursing professionals at Chancay Hospital, 2024.

Table 7.- Kolmogorov-Smirnov test for the difference between stress levels before and after the short synergistic break program

			Estrés
N			52
Parameters normal[a,b]	Mean		24.4231
	Std. Deviation		7.57536
Maximum extreme differences	Absolute		0.184
	Positive		0.135
	Negative		-0.184
Test statistic			0.184
Sig. Asyn. (two tailed)[c]			0.000
Post-before diference after-before	Sig.		0.000
	Confidence intervalo 99%	Lower limit	0.000
		Upper limit	0.001

Source: Database – researcher's SPSP report.

Table 7 presents the Kolmogorov-Smirnov normality test for the difference between the job stress level before and after. The table shows that the probability is below the significance level ($p = 0.000 < 0.05$), which implies the rejection of the null hypothesis (Ho: the difference is normally distributed), with a significance level of 5%. It is concluded that the average difference in the stress level after minus the before is not normally distributed. As a result, the nonparametric Wilcoxon test will be used to test the research hypothesis.

Table 8. Wilcoxon Signed Rank Test for stress level before and after the short synergistic breaks program.

		N	Average rank	Sum of ranks
Work stress after - work stress before	Negative ranges	47[a]	24.00	1128.00
	Positive ranges	0[b]	0.00	0.00
	Ties	5[c]		
	Total	52		
a. Work stress < occupational stress				
b. Work stress > occupational stress c. Work stress = occupational stress				

Source: Database – researcher's SPSP report.

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Table 8 shows the Wilcoxon signed rank test for the active break program before and after. The short synergistic break program did reduce work-related stress levels among nursing professionals. A detailed analysis of the results revealed that 47 participants experienced a decrease in their stress levels (negative ranks), while no increases in stress levels were observed (positive ranks), and there were ties in 5 participants.

Table 9. Wilcoxon signed rank test statistics for stress levels before and after the short synergistic break program.

	Word stress after – Word stress before			
Z			-6,563[b]	
Sig. asin. (bilateral)			0.000	
a. Wilcoxon signed-rank test b. It is based on positive ranks.				

Source: Database – researcher's SPSP report.

Table 9 displays the Wilcoxon test statistics for stress levels before and after the short synergistic break program. The probability of failure was found to be less than the significance level ($Z = -6.563$, $p < 0.05$), leading us to reject the null hypothesis. Consequently, with a significance level of 5%, we conclude that the short synergistic break program has a positive effect on coping with work-related stress, given that a significant decrease in work-related stress levels after the intervention has been statistically demonstrated.

According to the results obtained for the general objective, taking into account the Wilcoxon test statistics for work-related stress levels before and after the implementation of the short synergistic break program, it was evident that the probability of failure was less than the significance level ($Z = -6.563$, $p < 0.05$). With a significance value of 5%, it is concluded that the short synergistic break program has a positive effect on coping with work-related stress in nursing professionals, demonstrating through statistics a significant decrease in work-related stress levels after applying the program.

For the level of work-related stress associated with the organizational structure before and after implementing the active break program, the probability was shown to be below the significance level ($Z = -5.745$, $p < 0.05$); with a significance level of 5%, it was concluded that the short synergistic break program had a positive effect on nursing professionals' coping with work-related stress related to the organizational structure. Statistically, a significant reduction in stress levels was demonstrated after the intervention.

Regarding the level of work-related stress in the organizational setting before and after implementing the short synergistic break program, the probability was found to be below the significance level ($Z = -4.963$, $p < 0.05$); With a significance value of 5%, it is concluded that the active break program has a positive effect on coping with work-related stress in nursing professionals related to the organizational territory, establishing through statistics a significant decrease in stress levels after the intervention.

Regarding the level of work-related stress in the technology field before and after implementing the short synergistic break program, the probability was found to be lower than the significance level ($Z = -5.614$, $p < 0.05$); with a significance level of 5%, it was concluded that the active break program had a positive effect on nursing professionals' coping with work-related stress related to technology. Statistically, a significant reduction in stress levels was found after the intervention.

Regarding the level of work-related stress due to lack of cohesion before and after implementing the short synergistic break program, the probability was found to be lower than the significance level ($Z = -6.258$, $p < 0.05$); With a significance level of 5%, it is concluded that the short synergistic break program has a positive effect on coping with work-related stress in nursing professionals related to a lack of cohesion, establishing through statistics that there was a significant reduction in stress levels after the intervention.

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For the level of work-related stress caused by group support before and after implementing the short synergistic break program, the probability was below the significance level ($Z = 6.298$, $p < 0.05$); with a significance level of 5%, it was concluded that the short synergistic break program had a positive effect on nursing professionals' coping with work-related stress related to group support, demonstrating a significant reduction in stress levels after the intervention.

CONCLUSIONS

Consequently, it was concluded that the implementation of the short synergistic break program had a positive effect on nursing professionals' coping with work-related stress.

Ethical Considerations

The research group's ethics committee provided ethical approval, demonstrating the researchers' responsibility to conduct the study ethically.

Written and verbal consent was obtained from the respondents prior to their participation in the study. The authors ensured that they were adequately informed about the research objective, methodology, procedures, and techniques, as well as any potential risks or benefits. Participants' rights and well-being were protected, and the study adhered to ethical guidelines and principles.

In obtaining ethical approval and informed consent, the researcher upheld the principles of beneficence, respect for autonomy, and justice in the study.

Conflicts of Interest

The authors declare no conflicts of interest.

Author Contributions

Conceptualization, JMF and ELOC; Methodology, ELOC, JRTB, and MGGS; Formal Analysis, JMF, JRTB, and MGGS; Research, JMF, ELOC, and MGGS; Data Curation, ELOC and ZFHC; Drafting and preparation of original manuscripts by JMF, MGGS, and ZFHC; Writing – review and editing by JMF, ELOC, JRT, MGGS, and ZFHC.

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