

VII. SUMMARY

The 21st century nurse and midwife is a professional, who continuously develops her knowledge, trains new skills, and fulfills the duty of lifelong learning according to the provisions of the Act of 15 July 2011 on the occupation of nurses and midwives and the Code of Professional Ethics of Nurse and Midwife Polish Republic [84,85,202].

Involvement in post-graduate education implemented in the forms of specialized training, qualifying, specialist and further training is the fulfillment of the duty of updating knowledge [32,144,173,202,206,226,227].

Nowadays, specialization training called specialization might be available in 17 fields, 13 fields for nurses, 2 for midwives and 2 for both- nurses and midwives [170].

Education at the level of qualification courses could be conducted in 24 fields, specialist courses are available in 38 disciplines [159,170].

Education, in the relevant statutory types of education, is based on basic training programs approved by the minister responsible for health matters, excluding professional development courses for which the training program should be prepared by the organizers [162,173,202].

Nurses and midwives are particularly exposed to stress which is related to the impact of many stressful factors as the duty of lifelong learning [47,90,156,206,215]. Ability of dealing with stressful situations and generalized self efficacy are important elements of the stress issue [19,26].

The aim of the study was to assess the styles of coping with stress by nurses and midwives who participate in specialized training.

The study obtained the positive opinion of the Bioethical Committee at the Medical University of Lublin, in accordance with Resolution No. KE-0254/128/2017.

The study was conducted from April to December 2018 in randomly selected institutions providing specialized training throughout the country. The responses were informed about voluntariness, anonymity in tests, as well as obtained search results. 1444 nurses and midwives who participated in specialist training, took part in the study. The study group consisted of 1223 nurses and 221 midwives.

The questionnaire technique was used in the research. The study tools were: Coping Inventory for Stressful Situations (CISS), Generalized Self-Efficiency Scale (GSES) and a self-

designed questionnaire which contained questions allowing the characteristics of respondents participating in the study and assessment of their working conditions and job satisfaction.

Statistica version 13.3 computer software and IBM SPSS Statistics was used for statistical analysis of the collected data.

To achieve the aim of the study the following research problems have been formulated

1. What styles of coping with stress and the level of self-efficacy do nurses and midwives present during specialization training?
2. Are stress coping methods different depending on the respondents' sociodemographic data?
3. Is the sense of self-efficacy presented by nurses and midwives varied depending on the selected sociodemographic variables?
4. Is there any relationship between nurses and midwives styles of coping with stress and a sense of self-efficacy?
5. Is it possible to identify types of coping with stress among nurses and midwives based on the analysis of clusters of styles of coping with stress, burdens associated with the organization of work, burdens associated with psychosocial working conditions and burdens associated with individual characteristics of the respondent?
6. Do nurses and midwives representing particular types of coping with stress differ in socio-demographic characteristics, variables related to work and self-efficacy?

In the group of nurses, the majority are respondents aged 41-45 (23.30%), married or in a relationship (76.25%), with a master's degree in nursing (40.31%), living in a voivodship city (39.33%), having work experience in the profession being in the range from 21 to 25 years (20.44%), working in hospital (78.09%), on surgical wards (20.08%), working in rotational (57.97%), two-shift (62.96%), 12 hours (59.36%) system, as a senior nurse (51.76%), having an employment contract (97.22%), not having an additional job (67.29%) belonging to professional organizations (89.29%), not members of scientific associations (98.12%).

The group of midwives is mostly represented by people under 30 years of age (32.58%), married or in a relationship (73.76%), having a master's degree in midwifery (49.77%), living in a provincial city (40.27%), having a job experience of 1 to 5 years (21.27%), working in hospital care (81.90%), on the midwifery ward (51.58%), in rotational (66.97%), two-shift (71.04%), 12 hours (65.16%) system, working as a senior midwife (45.70%) having an employment contract (95.48%) not having additional work place (66.97%), belonging to professional organizations

(86.88%), who are not members of scientific societies. In the group of nurses, most respondents participate in the specialization training of internal medicine in nursing (27.64%), in the group of midwives most respondents participate in the specialization training of family nursing (74.21%).

Collected data, its statistical analysis and interpretation of results make it possible to draw significant final conclusions.

Nurses and midwives participating in specialized training presented a style of coping with stress, including a task-focused style, focused on emotions and a style focused on avoidance including engaging in substitute activities and seeking social contacts, the use of which depends on their generalized sense of self-efficacy

Nurses and midwives participating in specialization trainings present the average intensity of using selected styles of coping with stress, i.e. task-focused style, emotion-focused style and style focused on avoiding involving engaging in substitute activities and seeking social contacts, and a high level of generalized self-esteem effectiveness. There is a statistically significant difference between nurses and midwives participating in specialized training in the style focused on avoiding and seeking social contacts. Midwives more often present a style focused on avoidance, seeking social contacts in stressful situations than nurses.

Nurses' methods of coping with stress vary depending on the selected sociodemographic variables including age, place of residence, marital status, level of education, professional experience and participation in qualification courses:

- the younger the nurses, the more often they use a avoidance-focused style in stressful situations and are engaged in substitute activities;
- nurses who live in other cities than provincial cities more often choose emotion-focused stress management style, compared to nurses from provincial cities and villages /settlements, while nurses from "villages and settlements" more often use stress-focused style of coping with stress emotions than nurses who live in provincial cities;
- nurses who are single more often use a avoidance-focused style in a stressful situations and engaged in substitute activities than nurses who are in relationship;
- highly educated nurses more often use a task-focused style of coping with stress, a style focused on avoiding, are more involved in substitute activities and more often seek social contacts in stressful situations;
- nurses who completed at least one qualification course more often choose a avoidance-focused style coping with stress consisting in seeking social contacts;
- nurses with shorter job experience more often use all the styles of coping with stress
- The ways in which midwives deal with stress vary depending on age and job experience:
 - the younger the midwives, the more often they seek social contacts in a stressful situation;
 - in the group of midwives, the shorter their job experience, the more often they seek social contacts in the face of stress.

Nurses generalized sense of self-efficacy did not depend on any of the sociodemographic variables when it was differentiated in the midwife group by completing the qualification course.

Midwives who completed at least one qualification course presented a higher generalized sense of self-efficacy.

There is a statistically significant relationship between styles of coping with stress and a generalized sense of self-efficacy - both in the group of nurses and midwives .

Based on the analysis of clusters of styles of coping with stress, burdens associated with the organization of work, burdens associated with psychosocial working conditions and burdens associated with the individual properties of the individual, specific types of coping with stress by the surveyed nurses and midwives were identified.

Types distinguished in the group of nurses:

- harmonious type - nurses belonging to this type rated work-related stress low and in stress situations most often used a task-focused coping style;
- inharmonious type - nurses belonging to this type perceived work as significantly mentally burdensome, and experiencing stress situations they often used a coping style focused on emotions;
- inharmonious disorganized type - nurses representing this type rated work-related stress the highest, and in a stressful situation they used an emotion-focused style, avoided solving the problem, engaging in substitute activities, or focused on seeking social contacts.

Types distinguished in the group of midwives:

- harmonious involved type - midwives belonging to this type perceived work as moderately burdensome due to organizational issues, and in stressful situations they usually used task-focused style;
- harmonious uninvolved type - midwives representing this type had the highest self-burden and, assessed work-related burdens average, and in stressful situations used different coping styles at a low level;
- harmonious disorganized type - midwives belonging to this type highly rated work-related loads, and in a stressful situation most often used a style focused on emotions and avoidance, and engaged in substitute activities;

Surveyed nurses and midwives representing particular types of coping with stress significantly differ statistically from each other in selected socio-demographic features, variables related to professional work and a generalized sense of self-efficacy.

The results of the study increase the scope of knowledge about coping with stress by nurses and midwives and enable understanding of the relationship between generalized sense of self-efficacy and the presented styles of coping with stress, which could undoubtedly contribute to future activities allowing nurses and midwives effectively deal with stress in the workplace.

