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Obstacles Encountered by Nursing Professionals in the Healthcare Facilities of Mosul City

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Abstract

Objective: To measure the challenges associated with nurses' work in Mosul City Hospitals.

Methodology: A descriptive study design was carried out at wards of Mosul Hospitals to measure the challenges associated with nurses' work from 1st / April till 18 / September 2024. A non-probability (purposive) sample was chosen for the current study. The sample comprised 200 nurses who worked in every ward of the chosen hospitals. To quantify the problems, a two-part questionnaire was created and made available to nurses. Using ten experts, the questionnaire tool's validity was validated. Twenty randomly chosen nurses participated in a pilot research to statistically assess the questionnaire's reliability (excluded from study findings). The Cronbach alpha result, calculated with SPSS version 26, is 0.793.

Result: The challenges associated with nurses' work explain that the social and cultural challenges were 61.0% (122) of the nurses' sample results at a not agreed level with chi-square (90.76) and high significant p.value (0.000). The psychological challenges were 52.0% (104) of the nurses' sample results at the not agreed level with chi-square (51.64) and high significant p.value (0.000). The economic challenges were 70.0% (140) of the nurses' sample results at the neutral level with chi-square (122.92) and high significant p.value (0.000). The administrative challenges were 70.0% (140) of the nurses' sample results at the not agreed level with chi-square (226.72) and high significant p.value (0.000).

Recommendations: To improve nurses' understanding of this important topic, hospital departments should develop and implement a continuous, comprehensive special program, training course, and seminars about pneumonia in children under five.

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Introduction

To guarantee the provision of high-quality treatment in medical facilities, nurses are essential. The largest group of professionals in healthcare organizations are nurses and midwives, who are estimated to number 29 million worldwide. However, the lack of nurses has become a global issue in recent decades. Approximately 50,000 nursing positions are available in the United Kingdom: 43615 in England, 3060 in Scotland, 1612 in Wales, and 1671 in Northern Ireland ^[1].

The number of registrants who departed the Nursing and Midwifery (NMC) register in 2019 was 27589, which includes nurses with and without UK training. This number was 23% higher than in 2013. Because organizations must constantly hire and train new staff to replace departing ones, a reduction in nurse numbers inevitably jeopardizes patient safety, the quality of care given, and efficiency. It also has an impact on staff morale and the health of individual nurses ^[2].

Similar reports to the most recent RCN workforce review warned of the impending crisis in nursing staff supply that is currently and will occur due to inadequate workforce planning, workforce strategies, and policy initiatives. Economic, organizational, environmental, and personal factors all affect nursing retention; while policymakers are concentrating on creating new pathways to nursing, steps must also be taken to address the enduring issues that have caused and will continue to cause nurses to leave their jobs or the profession before they reach retirement age [3].

The research has proven the persistence of high turnover rates and related expenses in the nursing profession. Different countries have different nurse turnover rates: the USA has a 17.1% rate, Canada has a 20% rate, the UK has a 17.5% rate, and Jordan has a 36.6% rate. The percentages vary from 12% to 21% in European nations. A number of studies conducted in the 1990s indicated that nurses benefited from good nursing administration and leadership [4].

High rates of burnout, absenteeism, and turnover put nurses at heightened risk for stress-related issues. The Saudi Arabian nursing workforce has been reliant on non-Saudi women. The needs of the growing healthcare services have also outstripped the yearly supply of Saudi nursing graduates. Saudi nurses do, in fact, comprise fewer than 30% of the Kingdom's nursing workforce. Job stress is a detrimental physical and emotional reaction that occurs when an employee's needs, abilities, and resources are unable to meet the demands of their position, according to the U.S. National Institute of Occupational Safety and Health [5].

All nursing students enrolled in their first year of nursing in the United States receive training using this model, which is now the standard for nursing in healthcare systems in the majority of developed countries. The application of the nursing process aids in the creation and planning of good, clear, and effective nursing care, which ultimately helps to improve the quality of patients' care. Nevertheless, despite the outcomes, some studies have revealed that the nursing process in practice faces many difficulties [6].

According to some experts, the current nursing process is unclear, time-consuming, and challenging to carry out. Few studies have been done to determine the factors that determine the appropriate implementation of the nursing process, and because of this understanding gap, the nursing process has not been developed [7]. The main aim of this study was to measure the challenges associated with nurses' work in Mosul City Hospitals.

Objectives of the study:

1. To measure the challenges associated with nurses' work in Mosul City Hospitals.
2. To find out the relationships between the socio-demographic variables and the nurses' challenges associated with their work in Mosul City Hospitals

Material and Methods:

Design of the study: A descriptive study design was carried out at wards of Mosul city hospitals to measure the challenges associated with nurses' work from 1st / April till 18 / September 2024

Sample of the study: A non-probability (purposive) sample was chosen for the current study. The sample consisted of (200) nurses working in all wards of selected hospitals.

Study tool: The questionnaire was developed from the research of Hussein, Z., & Saadoon, N. (2021) [11] and provided for nurses to measure their challenges associated with work in Mosul city hospitals, which consists of two parts. The first part concerns the socio-demographic variables (age, sex, level of education, general service, hospitals name, working hours), while the second part was concerns to the nurses' challenges associated with their works, that consist of four sections and each section content of many close ended questions. The first section related to nurses' social and cultural challenges and consist of (19) close ended questions, the second section related to nurses' psychological challenges and consist of (12) close ended questions. The third-section related to nurses' economic challenges and consists of (11) close ended questions. And four-section related to nurses' administrative challenges and consist of (16) close ended questions.

Scoring of the questionnaire was five levels of Likert scale; strongly disagree: scoring (1) of nurses answered. Not Agree: scoring (2) of nurses answered. Neutral: scoring (3) of nurses answered. Agree: scoring (4) of nurses answered. Strongly Agree: scoring (5) of nurses answered.

Validity of the study: The validity of the questionnaire instrument was established through (10) a panel of experts whom specified the content clarity, relevancy, and adequacy.

Reliability of the study: To evaluate statistically the reliability of instruments, a pilot study was carried out during the period from 29 till 31/ May / 2022. Non-randomly (purposive) (20) nurses were selected from many Hospitals of Mosul city (this sample was excluded from the original study sample). The Cronbach alpha result is (0.793) by using SPSS version 26.

Data collection:

The data were collected from the selected hospitals of Mosul City. The study connected all wards available in the eight selected hospitals: Al Salam Teaching Hospital, Ibn Sina Teaching Hospital, Al Khansa Teaching Hospital, Cardiac Surgery Center, Oncology and Atomic Medicine Hospital, Ibn Al-Atheer Hospital, Mosul General Hospital, and Al-Jumhuri Teaching Hospital at the period from 2 / June till 28 / July / 2022.

The result:

Table 1: Statistical Results for Socio-demographic Characteristics of the Study Sample

Demographic	Items	Freq.	%	X2	Sign
Age	(21-30)	154	77.0	295.04	0.000
	(31-40)	30	15.0		
	(41-50)	10	5.0		
	(51-60)	6	3.0		
Sex	Male	44	22.0	62.72	0.000
	Female	156	78.0		
Education	Junior Stage	52	26.0	58.40	0.000
	Institute Stage	78	39.0		

	Graduate Stage	64	32.0		
	Master Stage	6	3.0		
General Service	(1-5)	120	60.0	150.56	0.000
	(6-10)	52	26.0		
	(11-15)	18	9.0		
	(16-20)	10	5.0		
Hospital	Al Salam Teaching Hospital	82	41.0	167.68	0.000
	Ibn Sina Teaching Hospital	34	17.0		
	Al Khansa Teaching Hospital	18	9.0		
	Cardiac Surgery Center	22	11.0		
	Oncology and Atomic Medicine Hospital	12	6.0		
	Ibn Al-Atheer Hospital	8	4.0		
	Mosul General Hospital	14	7.0		
	Al-Jumhuri Teaching Hospital	10	5.0		
Working Hours	6 Hours	118	59.0	88.12	0.000
	12 Hours	10	5.0		
	24 Hours	72	36.0		
Total		200	100.0		

Freq.= Frequency, %= Percentage, X^2 = Chi-square, Sign= Significance ≤ 0.05

Table 2: Statistical Results for Social and Cultural Challenges of the Study Sample

Social and Cultural Challenges	Strongly Disagree		Not Agree		Neutral		Agree		Strongly Agree	
	Freq	%	Freq	%	Freq	%	Freq	%	Freq	%
My work in the nursing profession affects my social relationships outside the institution	106	53.0	40	20.0	24	12.0	28	14.0	2	1.0
My work in the nursing profession leads to a dereliction of my duties to my home	72	36.0	80	40.0	4	2.0	24	12.0	20	10.0
My work in the nursing profession exposes me to embarrassing situations	58	29.0	36	18.0	22	11.0	52	26.0	32	16.0
The nature of the profession exposes me to insults from patients and their families	56	28.0	36	18.0	24	12.0	36	18.0	48	24.0
My work in the nursing profession makes it difficult for me to organize my time	64	32.0	50	25.0	60	30.0	26	13.0	0	0.0
Working as a nurse reduces the likelihood of her getting married	88	44.0	54	27.0	38	19.0	20	10.0	0	0.0
The work of a married nurse causes marital problems for her	58	29.0	86	43.0	30	15.0	20	10.0	6	3.0
The nurse's work determines her role in raising her children	134	67.0	32	16.0	18	9.0	14	7.0	2	1.0
The nursing profession should be restricted to women	148	74.0	34	17.0	16	8.0	2	1.0	0	0.0
Working as a nurse increases the risk of disease	30	15.0	36	18.0	58	29.0	42	21.0	34	17.0
The married nurse suffers from social and family problems more than the single nurse	62	31.0	36	18.0	12	6.0	86	43.0	4	2.0
Social values and customs oppose shift work for nurses	2	1.0	56	28.0	62	31.0	70	35.0	10	5.0
Society's real view of the nurse is negative	12	6.0	60	30.0	36	18.0	56	28.0	36	18.0
Nurses' women are less capable and skilled than men	84	42.0	52	26.0	2	1.0	60	30.0	2	1.0
Religious values oppose women's work in the nursing profession	136	68.0	30	15.0	18	9.0	16	8.0	0	0.0
I feel disturbed and uncomfortable when working in the opposite-sex department	58	29.0	64	32.0	52	26.0	26	13.0	0	0.0
The woman nurse's overnight stay in the hospital is contrary to the social and religious	72	36.0	66	33.0	30	15.0	18	9.0	14	7.0
The woman nurse's overnight stay in the hospital is contrary to the social and religious	40	20.0	70	35.0	32	16.0	58	29.0	0	0.0
I do not encourage my children in the future to work in the field of nursing	112	56.0	20	10.0	6	3.0	42	21.0	20	10.0

Freq.= Frequency, %= Percentage

Table 3: Statistical Results for Psychological Challenges of the Study Sample

Psychological Challenges	Strongly Disagree		Not Agree		Neutral		Agree		Strongly Agree	
	Freq	%	Freq	%	Freq	%	Freq	%	Freq	%
My nursing job makes me moody	68	34.0	24	12.0	30	15.0	78	39.0	0	0.0
Shift work affects my psychological stability	60	30.0	50	25.0	20	10.0	54	27.0	16	8.0
My work in nursing makes me very afraid of what	88	44.0	50	25.0	32	16.0	26	13.0	4	2.0

people will say										
I am very afraid of any professional mistake	22	11.0	38	19.0	26	13.0	96	48.0	18	9.0
My obsessiveness and suspicion increased because of my work in nursing	82	41.0	44	22.0	22	11.0	50	25.0	2	1.0
I am ashamed of my nursing job	142	71.0	44	22.0	14	7.0	0	0.0	0	0.0
My relations with my co-workers are not good	82	41.0	92	46.0	4	2.0	22	11.0	0	0.0
The single nurse is more productive than the married one	62	31.0	80	40.0	24	12.0	18	9.0	16	8.0
The new nurse is more productive than her old friend	16	8.0	90	45.0	32	16.0	40	20.0	22	11.0
I am exposed to harassment from colleagues at work	84	42.0	44	22.0	56	28.0	14	7.0	2	1.0
Patients' families' dealing with women nurses is not based on respect	52	26.0	86	43.0	14	7.0	32	16.0	16	8.0
I am not convinced that women work in nursing	58	29.0	102	51.0	22	11.0	18	9.0	0	0.0

Freq.= Frequency, %= Percentage

Table 4: Statistical Results for Economic Challenges of the Study Sample

Economic Challenges	Strongly Disagree		Not Agree		Neutral		Agree		Strongly Agree	
	Freq	%	Freq	%	Freq	%	Freq	%	Freq	%
The opportunity for women to work in hospitals is less than the opportunity for men to work	48	24.0	66	33.0	44	22.0	22	11.0	20	10.0
My income from my work is not proportional to my effort	36	18.0	38	19.0	12	6.0	86	43.0	28	14.0
Nurses' salaries are low and not commensurate with the nature of the work	2	1.0	2	1.0	82	41.0	56	28.0	58	29.0
The financial and administrative advantages of nurses in private hospitals are better than their counterparts in government hospitals	32	16.0	70	35.0	14	7.0	50	25.0	34	17.0
Nurses in private hospitals are more diligent and giving	96	48.0	26	13.0	24	12.0	26	13.0	28	14.0
The work of nurses in government hospitals is much easier than in private hospitals	64	32.0	98	49.0	14	7.0	24	12.0	0	0.0
The retirement system must include nurses in private hospitals	26	13.0	72	36.0	50	25.0	52	26.0	0	0.0
It is this urgent need that makes me work in nursing	72	36.0	66	33.0	18	9.0	44	22.0	0	0.0
The lack of suitable job opportunities is what prompted me to work in nursing	66	33.0	38	19.0	18	9.0	74	37.0	4	2.0
The best job opportunity is in another field if the return is the same	48	24.0	78	39.0	24	12.0	26	13.0	24	12.0
I prefer working in health centers and clinics rather than working in hospitals	88	44.0	44	22.0	18	9.0	44	22.0	6	3.0

Freq.= Frequency, %= Percentage

Table 5: Statistical Results for Administrative Challenges of the Study Sample

Administrative Challenges	Strongly Disagree		Not Agree		Neutral		Agree		Strongly Agree	
	Freq	%	Freq	%	Freq	%	Freq	%	Freq	%
Men nurses receive more promotions and grades than women nurses	126	63.0	32	16.0	6	3.0	28	14.0	8	4.0
Administrative officials are harsher on women nurses	60	30.0	98	49.0	30	15.0	12	6.0	0	0.0
I prefer that the professional and administrative person responsible for me be a woman	54	27.0	86	43.0	40	20.0	18	9.0	2	1.0
Management does not understand the nature of women and their role at work	72	36.0	52	26.0	56	28.0	20	10.0	0	0.0
I prefer my morning shift instead of shifts	54	27.0	20	10.0	46	23.0	42	21.0	38	19.0
My best work is in the women's departments and not in the men's departments	22	11.0	84	42.0	46	23.0	46	23.0	2	1.0
It is better for me to work in one department than to move between departments	16	8.0	56	28.0	32	16.0	60	30.0	36	18.0
Shift schedules are often set arbitrarily	62	31.0	56	28.0	54	27.0	26	13.0	2	1.0
The administration does not understand women's situations when problems arise	66	33.0	72	36.0	24	12.0	24	12.0	14	7.0
The way the administration deals with nurses is characterized by authority	68	34.0	84	42.0	30	15.0	16	8.0	2	1.0
The administration does not make nurses feel job secure	26	13.0	98	49.0	44	22.0	28	14.0	4	2.0
I feel that the administration exploits the nurses to the greatest extent possible	26	13.0	108	54.0	26	13.0	20	10.0	20	10.0
Private hospitals are stricter with nurses in enforcing	60	30.0	50	25.0	64	32.0	26	13.0	0	0.0

laws and regulations than government hospitals										
The administration distinguishes between one nurse and another for professional reasons	64	32.0	44	22.0	20	10.0	32	16.0	40	20.0
The administration is biased toward those who are socially loyal to it	26	13.0	100	50.0	14	7.0	34	17.0	26	13.0
The administration contributes to building positive relationships in the hospital	30	15.0	46	23.0	48	24.0	52	26.0	24	12.0

Freq.= Frequency, %= Percentage

Table 6: Statistical Results for all Challenges Parts of the Study Sample

Challenges	Estimate	Freq.	%	X2	Sign
Social and Cultural Challenges	Not Agree	122	61.0	90.76	0.000
	Neutral	66	33.0		
	Agree	12	6.0		
Psychological Challenges	Not Agree	104	52.0	51.64	0.000
	Neutral	74	37.0		
	Agree	22	11.0		
Economic Challenges	Not Agree	22	11.0	122.92	0.000
	Neutral	140	70.0		
	Agree	38	19.0		
Administrative Challenges	Not Agree	140	70.0	226.72	0.000
	Neutral	34	17.0		
	Agree	24	12.0		
	Strongly Agree	2	1.0		
Total		200	100.0		

Freq.= Frequency, %= Percentage, X² = Chi-square, Sign= Significance ≤ 0.05

Table 7: Statistical Correlation Relationship between Sample Demographic variables with all Challenges Parts

	Social and Cultural Challenges		Psychological Challenges		Economic Challenges		Administrative Challenges	
	P.value	Sign	P.value	Sign	P.value	Sign	P.value	Sign
Age	0.950	NS	0.076	NS	0.530	NS	0.005	NS
Gender	0.523	NS	0.322	NS	0.270	NS	0.428	NS
Education	0.081	NS	0.466	NS	0.340	NS	0.320	NS
General Service	0.571	NS	0.353	NS	0.599	NS	0.130	NS
Hospital	0.041	S	0.173	NS	0.129	NS	0.236	NS
Working Hours	0.637	NS	0.454	NS	0.386	NS	0.046	S

Sign = Significance ≤ 0.05

Discussion:

The socio-demographic characteristics of the study sample

Table (1) 77.0% (154) of the sample was between the ages of 21 and 30 years, according to the statistical results for the research sample's sociodemographic characteristics. The chi-square value was 295.04, and the p-value was 0.000. Of them, 76.0% (156) were female, with a strong significant p-value (0.000) and a chi-square (62.72). The Institute Stage was the educational level of 39.0% (78) of them, with a high significant p-value of 0.000 and a chi-square of 58.40. A strong significant p-value of 0.000 and a chi-square of 150.56 indicate that 60.0% (120) of them had been in the general service for 1–5 years. Al Salam Teaching Hospital employed 41.0% (82) of them, with a strong significant p-value (0.000) and chi-square (167.68). 59.0% (118) of them put in six hours of labor, with a high significant p-value of 0.000 and a chi-square of 88.12. These findings are in conflict with those of AL-Moutiwy, A. & AL-Wily, M. (2023) [8], who showed that 60% (36) of the sample was between the ages of 24 and 27, 63.3% (38) of the sample was female, 50% (30) of the sample was at the Bachler stage of education, 83.3% (50) of the sample had been employed generally for 1–5 years, 90% (54) of the sample had been in the current unit for 1–5 years, and 73.3% (44) of the sample lacked training courses relevant to

the study topic [8].

The social and cultural challenges of the study sample

Table (2) shows statistical results for the social and cultural challenges of the study sample most of the nurses' results for social and cultural challenges questions were at strongly disagree level and not agree level except for the working as a nurse increases the risk of disease that 29.0% (58) of them at a neutral level, the married nurse suffers from social and family problems more than the single nurse that 43.0 % (86) of them at an agreed level this study same with Abdullah *et al.*, (2018) [9] that explain the social values and customs oppose shift work for nurses that 35.0% (70) of them at the agreed level only [9].

The psychological challenges of the study sample

Table (3) displays the research sample's psychological problems' statistical findings. With the exception of nursing job makes me moody, which had 39.0% (78) of the nurses at an agreed level and the fear of making a professional error, which had 48.0% (96) at an agreed level, the majority of the nurses' responses to psychological difficulties questions were at the strongly disagree and not agree level. According to Tran Thi, H. (2019) [10], which offers data about the mean score of the SC subscale's questions, these findings concur.

"The clinical teacher considers students' feelings" was the item with the highest score ($M = 3.26$). Students assigned a "strongly agreed" rating to this question, as shown by the formula (*) above. The second-highest item, "The clinical teacher helps the student who is having trouble with the work," was item 19a ($M = 3.25$). This statement received an extremely high "agree" rating score" ^[10].

The economic challenges of the study sample

Table (4) presents the statistical results for the economic challenges of the study sample most of the nurses' results for the economic challenges questions were at the strongly disagree level and not agree level except the income from my work is not proportional to my effort that 43.0% (86) of them at an agreed level, nurses' salaries are low and not commensurate with the nature of the work that 41.0% (82) of them at a neutral level, and the lack of suitable job opportunities is what prompted me to work in nursing that 37.0% (74) of them at an agreed level. These results disagreed with Hussein, Z. & Saadoon, N. (2021) ^[11] that demonstrate it is related to the effort exerted and the economic cost to the worker, and it includes salaries, incentives, and retirement. It also includes obstacles that pay to work in this field. According to the mean score study, the findings indicate that most (53.2%) of nurses had economic challenges ^[11].

The administrative challenges of the study sample

Table (5) demonstrates the statistical findings for the research sample's administrative issues. Regarding the administrative problems questions, the majority of nurses' responses were at the strongly disagree and not agreed level, with the exception of the statement that the administration helps to foster positive relationships in the hospital, which was only agreed with by 26.0% (52) of them. These results contradict those of Ambika B. & Koirala P. (2017) ^[12], who explain in their findings that the multigenerational workforce, the business of health care, ethics, competition for health care professionals, nursing shortage, and staff absenteeism are some of the factors that challenge the role of nurse administrators in today's dynamic healthcare environment ^[12].

The challenges parts of the study sample

Table (6) presents the statistical results for all challenges parts of the study sample, that the social and cultural challenges were 61.0% (122) of the nurses' sample results at not agreed level with chi-square (90.76) and high significant p.value (0.000). The psychological challenges were 52.0% (104) of the nurses' sample results at the not agreed level with chi-square (51.64) and high significant p.value (0.000). The economic challenges were 70.0% (140) of the nurses' sample results at the neutral level with chi-square (122.92) and high significant p.value (0.000). The administrative challenges were 70.0% (140) of the nurses' sample results at the not agreed level with chi-square (226.72) and high significant p.value (0.000). These results disagreed with Hussein, Z. & Saadoon, N. (2021) ^[13] Nurses do not face social obstacles, notwithstanding others who describe them in terms of social issues. Nurses have difficulties in the areas of psychology, economics, administration, professionalism, and policy. In order to improve nurses' personalities and talents, it is necessary to pay attention to their competences and skills through internal and external training programs. Stressing that nurses' roles in healthcare facilities are just as vital as

those of physicians and other staff ^[13].

The correlation relationship between sample demographic variables with all challenges parts

Table (7) shows the statistical correlation relationship between sample demographic variables with all challenges parts, there is a nonsignificant correlation relationship between sample demographic variables with all challenges parts at $p.value \leq 0.05$, except for the social and cultural challenges there is a nonsignificant correlation relationship with hospitals name at p.value (0.041), also the administrative challenges there is nonsignificant correlation relationship with working hours at p.value (0.046) only. These results disagree with study Mustafa and Intisar (2015) ^[13] that demonstrate the stated that there are no significant differences between job stress with all parts of the demographic data maternal status ^[13].

Conclusion:

According to the results of the present study, the researcher concludes the following:

1. The challenges associated with nurses' work in Mosul City Hospitals. The social and cultural challenges of the nurses' sample results at a not agreed level. The psychological challenges of the nurses' sample results at the not agreed level. The economic challenges of the nurses' sample results at the neutral level. The administrative challenges of the nurses' sample results at the not agreed level.
2. There is no significant relationship between the socio-demographic variables and the nurses' challenges associated with their work in Mosul City Hospitals at $p.value \leq 0.05$, except for the social and cultural challenges there is a nonsignificant correlation relationship with hospital names at p.value (0.041), also the administrative challenges there are nonsignificant correlation relationship with working hours at p.value (0.046) only

Recommendations:

1. Nineveh Health Directorate has to reduce all obstacles for all challenges associated with nurses' work.
2. Training courses and workshops about dealing with challenges associated with nurses' work such as social and cultural challenges, psychological challenges, economic challenges, and administrative challenges.
3. Another study by other researchers about dealing with challenges associated with nurses' work

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