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**Original Article** 

# Newly hired nurses' transitional challenges and coping with caring for schizophrenia patients in a psychiatric training hospital

Reynold Culimay Padagas<sup>1\*</sup>, John Vinnie Panuelos<sup>2</sup>, Kim Franco Odoya<sup>2</sup>, Rhencel Cabardo<sup>2</sup>, Vincent Pierre Louise Castro<sup>2</sup>, Mary Ann Manio<sup>2</sup>, Alexandrae Nabablit<sup>2</sup>, Mikaela Angela Papilla<sup>2</sup>

<sup>1</sup>College of Nursing and Health Sciences, Jose Rizal University, Mandaluyong, Philippines <sup>2</sup>Our Lady of Guadalupe Colleges, Mandaluyong, Philippines

ARTICLE INFO	ABSTRACT
Received 27 April 2020 Accepted 24 July 2020	<b>Background &amp; Aim:</b> This study aimed to explore the transitional challenges of newly hired psychiatric nurses in the care of clients with schizophrenia and the coping mechanisms that they use to overcome their transitional challenges.
Available online at: http://npt.tums.ac.ir	<ul> <li>Methods &amp; Materials: This descriptive-qualitative study interviewed six purposively selected newly hired psychiatric nurses caring for patients with schizophrenia who work for about six months to two years in a Psychiatric Training Hospital in the Philippines. An interview protocol was used to obtain data with strict observance of relevant ethical considerations. In determining</li> </ul>
Key words: transitional challenges; coping mechanisms; psychiatric nurse; qualitative research	<ul> <li>was used to obtain data with site observatic of relevant considerations, in determining the emerging themes and subthemes from the transcribed data with trustworthiness, thematic analysis was employed.</li> <li><b>Results:</b> Two major prior codes were explored, namely, transitional challenges and coping mechanisms. On the one hand, five subthemes emerged under the transitional challenges that include emotional challenges, need for professional growth, nurses' recognition of the inability to patient care management, need support from more experienced colleagues. Experience/feel the shock in the encounter of people with a mental health condition. On the other hand, four subthemes were unearthed under coping mechanisms that include emotional responses, professional coping strategies (i.e., reliance on the adequate support system, establishing the professional nurse-patient relationship, call to professional advancement, and commitment to evidence-based practice), and institutional coping strategies.</li> <li><b>Conclusion:</b> While newly hired nurses experience tremendous transitional challenges, their coping mechanisms continuously emerge and develop. The nursing administration needs to foster sustainable mentoring and resilience programs essential in aiding newly hired nurses' adaptation and adjustment to the professional work environment.</li> </ul>

#### Introduction

Mental health nurses work in challenging and potentially high-stress settings (1), and this is more shuddering among newly hired nurses in psychiatric facilities. When psychiatric nurses are beginning to be involved in the hospital setting and realize that they are not fully equipped and competent when adjusting to and exploring a new environment, they need to be oriented and upskilled. Nursing and hospital orientation program should be improved and empowered to prepare newly hired nurses or novice nurses for the psychiatric setting (1).

The transitional process involves challenges that newly hired nurses need to endure and overcome. The transition category for this study is the situational transition (2) based on the Transitions Theory of Meleis. Situational transition is defined as a transition in various educational and professional roles, which includes the new graduate registered nurses' transition and mastery of the professional roles (2). Transforming from student nurse to registered nurse is intertwined with many challenges in terms of the environment, student nurses are used to (2). New graduate nurses, as "people in transition," need the assistance of the facilitator to minimize potential risks, guide professional development, and contribute to nursing role mastery (2). The awareness of problems

<sup>\*</sup>Corresponding Author: Reynold Culimay Padagas, College of Nursing and Health Sciences, Jose Rizal University, Mandaluyong, Philippines. E-mail: reynold.padagas@gmail.com

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such as lacking a sense of security, professional competency, and having little understanding of mental illness is needed to help nurses in providing appropriate care for clients (3).

Insufficient professional skills and knowledge, ability to cope with stress and emotions, and utilize support from colleagues and team, and a lack of positive expectations about the future and emotional preparation for the job, are among the many direct or indirect difficult situations nurses (4). encounter Understanding their limitations, psychiatric nurses learn to adapt to their new work using various coping mechanisms, and these mechanisms speak about their resilience and adaptation. For instance, some psychiatric nurses used problem-focused coping to deal with patients with aggressive behaviors. The nurses managed the aggressive behavior by talking to the patient calmly, lovingly, and by leaving the patient alone (5). In a study, results show that self-respect and endurance (controllability and positive thinking) had significant positive relationships with resilience, and nurses with high level of resilience had lower levels of depression and exhaustion (emotional exhaustion and desensitization) (6). According to another study, a complex interplay between interpersonal, intrapersonal, and organizational factors influence transition (7).

In this regard, the study focused on uncovering the transitional challenges and coping mechanisms of newly hired psychiatric nurses caring for schizophrenia patients in a psychiatric facility in the Philippines.

## Methods

## Design

This study employed descriptivequalitative design because it does not intend to penetrate the data in any interpretive depth and opts to present comprehensive summaries of phenomena (8). Moreover, the design tends to be eclectic and based on the premises of the naturalistic inquiry (8).

## Participants

The study involved six newly hired psychiatric nurses with six months to two years of clinical experience in a Psychiatric Training Hospital (PTH). Six participants (9) are already enough to reach data saturation. The recommended number of participants range in a number of five to twenty-five (10) or at least six for a qualitative study (11). Only the novice to advance beginner nurses (12) were identified having experience as from the first day of their job as a nurse to 2 years of experience in the field; hence, purposive sampling was used.

## Data collection

An interview protocol was used because it serves to remind the researchers to relay essential bits of information to the interviewees (13). The interview protocol focused on specific questions, such as "Describe your transitional stage as a newly hired psychiatric nurse" and "What coping mechanisms do you use in coping with your challenges related to your transition?". The researchers conducted a simulation on how to facilitate face-to-face interviews prior to actual interviews.

The interviews were audiotaped, and the recorded conversations were transcribed. The researchers referred back the transcribed data to the participants for triangulation purposes. The researchers were peer debriefed regarding data analysis by an expert with rich experience in psychiatric nursing and qualitative research. Each interview lasted for at least 30 to 45 minutes. The study was conducted in 2018.

## Data analysis

In this study, thematic analysis was conducted after transcriptions were made through the process of coding in six phases to create and establish meaningful patterns. The phases included familiarization of data, generating initial codes, searching for themes among codes, reviewing themes, defining and naming themes, and producing the final report (9). The researchers analyzed with a research mentor who guided the researchers to ensure the empirical process of conducting the analysis. The coding and thematic analysis were done manually for better appreciation of the patterns and themes as the researchers fostered their creativity and established a sense of ownership in the analysis. Data saturation was reached as themes emerged repetitively, and this led to the formulation of major themes and subthemes based form the prior codes.

The following table shows a sample of the thematic coding and analysis done in treating the data:

Table 1. Sample thematic coding a	and analysis of selected transcripts

Responses	Initial codes	Final theme
"Most of us just started working here in just a few weeks or months. As a beginner in the psychiatric ward, I find a lot of flaws in terms of applying nursing care to my patients. I see the need to improve my skill set. I also need to grow professionally." (P3)	<ul> <li>New to the work environment</li> <li>Flawed nursing practice</li> <li>Need to improve skills</li> <li>Need to grow</li> </ul>	Nurses' recognition of the inability to patient care management
"I thought that senior nurses should work closely with their juniors. Like me, I am new to the facility. I needed to seek help, especially when it is my first time managing a patient with such a condition. I talk to other nurses about what to do, but I feel ignored." (P2)	<ul> <li>Senior nurses to work with new nurses</li> <li>Need to seek help</li> <li>Talk to another nurse</li> <li>Felt ignored when asking help</li> </ul>	Need support from more experienced colleagues
"I participate in research undertaking to hone my skills because whatever I do; it has to be based on the science and art of nursing practice. Research is important." (P3)	<ul> <li>Participation in research</li> <li>Practice-based in science and art of nursing</li> <li>Importance of research</li> </ul>	Commitment to evidence-seeking practices
"When patients trust you as his or her care provider, it will be very easy to handle him or her. I make sure that every time I engage with my patients, I establish rapport with them. It is the key to a successful therapeutic relationship. It is not easy at first, but it has to be established because it is really the key to caring for them." (P2)	<ul> <li>Trust as a foundation of care</li> <li>Establishing rapport</li> <li>Therapeutic relationship</li> </ul>	Establishing therapeutic, professional nurse-patient relationship

### Ethical considerations

The study was approved by the OLGC Research Evaluation Panel and thus was granted approval bv the Evaluation Committee of the PTH headed by the director of the nursing service. Informed consent was obtained from the research participants using the World Health Organization The (WHO) template. participants were secured that all personal information gathered from them would remain anonymous. To protect their

identities, the researchers assigned pseudonyms to the hospital as "Psychiatric Training Hospital or PTH", and to the participants as "P1, P2, P3, P4, P5, and P6".

### Trustworthiness

The study secured that this research was accurately measured and is reflective of the social reality of the participants (14). The triangulation process involved the presentation of the final report to the participants and sought their feedback whether the results indeed surfaced their transitional challenges and coping mechanisms.

The feedback of the participants ensured the trustworthiness of the findings transcribed from this study.

### Results

# *1. Demographic characteristics of the participants*

The participants of this study were six psychiatric nurses of PTH, namely, P1, 27year old male with one year and six months clinical experience; P2, 26-year old male with one year and two months clinical experience; P3, a 23-year old female nurse with nine months of clinical experience; P4, a 28-year old female nurse with two years clinical experience; P5, 29-year old male nurse with two years clinical experience; and P6, 27-year old female nurse with one-year clinical experience.

### 2. Transitional challenges

"Transitional challenges" refers to the overall experiences of the newly hired psychiatric nurses relative to their transitional stage. The subthemes include emotional challenges, need for professional growth, and nurses' recognition of the inability to patient care management, need support from more experienced colleagues; and experience/feel the shock in the encounter of people with a mental health condition.

### 2.1 Emotional challenges

The emotional challenges of the newly hired psychiatric nurses included financial incapacity, psychological/emotional challenges related to fear, confusion, fright, and stress when taking care of their patients. Most of the participants cited that tantrum, aggression, a large number of patients, controlling temper, and the unpredictable response of their patients contribute to their concerns. While some participants perceive the profession as difficult, they reported that they appreciate working despite the difficulty. However, some expressed regret in choosing the profession because of the assumed limited opportunity, and also of their lack of exposure/training and good foundation regarding psychiatric nursing.

"I am a little bit frustrated about being a psychiatric nurse. I lack proper training and foundation in caring for patients with mental illnesses like those with schizophrenia."(P1)

"Caring for patients with unpredictable behavioral responses is indeed a concern. I find it challenging." (P2)

*"It is very difficult at first, but I learned to appreciate my job." (P4)* 

### 2.2. Need for professional growth

The participants emphasized the need for professional growth and being adept and updated through seminars, research, and lectures. The knowledge and skills in the care of patients with schizophrenia must be improved.

Having the competencies means a more systematic approach in caring for their patients, and being honed of therapeutic skills can help nurses in handling schizophrenic patients manifesting maladaptive patterns of behaviors; hence, the delivery of more efficient, appropriate, and effective nursing care management.

"Most of us just started working here in just a few weeks or months. As a beginner in the psychiatric ward, I find a lot of flaws in terms of applying nursing care to my patients. I see the need to improve my skill set. I also need to grow professionally." (P3)

"...I lack proper training and foundation in caring for patients with mental illnesses like those with schizophrenia."(P1)

## 2.3. Nurses' recognition of the inability to patient care management

This subtheme pertains to the nurses' inability to patient care management. These included avoidance, manipulative behaviors, intimidation, aggression, and extreme suspiciousness during nurse and patient interactions. Establishing trust and rapport appeared to be necessary to make both patients and nurses safe in their professional working relationships.

"I have encountered patients with different behaviors, and the ones that were difficult to manage were those who were avoidant, aggressive, and overly suspicious. I felt like I am not as therapeutic as I could." (P5)

# 2.4. Need support from more experienced colleagues

This subtheme encompasses the challenges that the newly hired psychiatric nurses experienced towards their co-workers in the psychiatric facility. The subcategories are related to interpersonal or collaboration, especially between and among nurses and their seniors.

"I thought that senior nurses should work closely with their juniors. Like me, I am new to the facility. I needed to seek help, especially when it is my first time managing a patient with such a condition. I talk to other nurses about what to do, but I feel ignored." (P2)

# 2.5. *Experience/feel the shock in the encounter of mental patients*

This subtheme pertains to the challenges of newly hired psychiatric nurses as they changed their environment of practice. Most of the participants revealed their feelings of shock and surprise during their first weeks of being exposed to the psychiatric facility. They also mentioned that their exposure during their related learning experience when they were students was far different from the actual world of work in the facility.

"Being exposed to a new work environment creates a feeling of shock and surprise. I remember one instance where a patient suddenly had temper tantrums. I did not know what to do."(P4)

## 3. Coping mechanisms

"Coping mechanisms" pertains to the coping strategies used by newly hired psychiatric nurses in a new clinical work environment. This involves subthemes such as emotional expressions; professional coping, which also involves the availability of support systems; professional advancement; evidence-seeking practices; and establishing therapeutic, professional nurse-patient relationships.

## 3.1. Emotional expressions

The emotional expressions refer to what the newly hired psychiatric nurses personally use to overcome their challenges during their stage of transition. Four subthemes emerged: emotional expression, destressing activities, individual resilience, acceptance, confidence, and autonomy in carrying workload and repression. Emotional expressions are necessary for the newly hired psychiatric nurses because these can help them accept and deal with their anxieties and fears; hence, it enables them to increase their ability to care for their patients. Meanwhile, destressing activities serve as an outlet to release work-induced stress encountered daily by doing leisure activities/hobbies such as eating, physical exercises, attending masses, biking, and going to a movie that supports them emotionally, mentally, spiritually physically. Individual resilience shows its capacity to obstacles withstand and work-related stresses. Confidence and autonomy in carrying workload is an essential subtheme of coping mechanisms identified among the participants. Most of the participants felt relief when they establish confidence in their capacity to care for their patients with schizophrenia. According to some of them, the confidence to perform their jobs is ignited by their passion for caring. When they are confident, they become autonomous and provide care to their patients regardless of any unwanted circumstances. Acceptance is another personal coping exhibited by the participants. It shows the positive responses and level of satisfaction of the newly hired nurses in providing care for the overall wellbeing of their patients.

"I have circles of friends to talk to every time I feel too much pressure, stress, or anxiety at work." (P6)

"According to my professor before, resilience is essential when you work in a psychiatric facility. It is the capacity to bounce back when faced with adversities." (P3)

"This is the job that I choose. I have to do what is due to my patients." (P2)

"When I know what to do, I do the task very well. I think I am more empowered when4 I know I am prepared. I have a higher level of self-esteem. I know I can do it all by myself without seeking help from my peers." (P5)

"As soon as I am done with my duty, I go home and chooses to devoid of any discussions about how it has been in the facility during my work shift."(P4)

### 3.2. Professional coping strategies

Professional coping strategies pertain to strategies used by newly hired psychiatric nurses and are related to research and education practices. This has four subthemes: the availability of support systems, professional advancement, evidence-seeking practices, and establishing a therapeutic, professional nurse-patient relationship.

### 3.2.1. Reliance on adequate support system

Having effective and efficient communication with other healthcare providers helps them to get better in providing proper care for clients with schizophrenia. Having a sound support system, such as a caring administrator and conurses, enables nurses to remain steadfast in their responsibilities.

"Our chief nurse and the whole administration are supportive of our professional thrusts." (P1)

"I value conviviality in my work. I find it easier to work when colleagues support and mentor each other in times of need." (P5)

### 3.2.2. Call to professional advancement

Professional advancement includes attending seminars, doing case studies,

researches, and lectures. The participants cited that these activities help them a lot to enhance their knowledge and skills to become better psychiatric nurses.

"Attending training and seminar workshops help us to become more competent." (P3)

*3.2.3. Commitment to evidence-seeking practices* 

Evidence-seeking practices are employed by the participants, such as doing researches or making reflection papers. Using internet websites such as Google is beneficial to the participants if they have encountered patients/patient's manifestations that are new to them.

*"I research to answer my concerns." (P4)* 

"I participate in research undertaking to hone my skills because whatever I do, it has to be based on the science and art of nursing practice. Research is important." (P3)

# 3.2.4 Establishing therapeutic, professional nurse-patient relationship

The participants viewed that when the therapeutic relationship is founded on trust and rapport, the care for patients, regardless of their situations and diagnoses, will be effortless.

"When patients trust you as his or her care provider, it will be very easy to handle him or her. I make sure that every time I engage with my patients, I establish rapport with them. It is the key to a successful therapeutic relationship. It is not easy at first, but it has to be established because it is the key to caring for them." (P2)

### 3.3. Institutional coping strategies

Coping in their new environment or to the facility is crucial and needed during the transition of the newly hired psychiatric nurses. This includes compliance with hospital policies. The participants revealed that the newly hired psychiatric nurses must understand institutional regulations and policies that guide their professional responsibilities. Proper orientation to such regulations and policies in the institutions can prevent unwanted stresses at work.

"Being oriented to the policies is already a coping mechanism for me. Adherence to institutional policies is paramount." (P6)

## Discussion

Generally, the findings showed that the challenges experienced by nurses during their transitory stage at work include emotional challenges, need for professional growth, nurses' recognition of the inability to patient care management, need support from more experienced colleagues, and experience/feel of shock in the encounter of mental patients. Meanwhile, the coping mechanisms that emerged after the thematic analysis revealed emotional responses, professional coping (i.e., reliance on the adequate support system, establishing the professional nurse-patient relationship, call professional advancement. to and commitment to evidence-based nursing practice), and institutional coping strategies.

qualified nurses often feel Newly overwhelmed by the challenges of the work environment and struggle to transition (15). Several stressors have been identified, and these stressors can be about consumer, family, and staff relationships, environment, and organization (16). The findings of the study support that newly qualified mental health nurses experience fear during their adaptation period, especially when they perceive mental healthcare users as dangerous and the working environment as risky, with little concern for their safety (15). The working environment of the nurses must be safe for them and their patients.

During the transition, nurses require opportunities to develop both competence and confidence in their ability to practice independently (15). New nurses in a mental health environment learn from accepting responsibility, taking on challenges, and making adjustments to develop confidence as mental healthcare professionals (15). Efforts to cope could be cognitive and behavioral (17). All stakeholders should take proactive measures to alleviate challenges among nursing staff (18) as work correlates to stress (19).

Emotional challenges in newly hired psychiatric nurses are attributed to the challenging and potentially high-stress setting (16). Considering the behavioral exhibited by patterns patients with schizophrenia, newly hired nurses need to be more prepared in the care of their patients. Psychiatric nursing requires nurses to adapt despite the wide range of stressful events, evolving from the care of violent, aggressive patients, recurrent relapse to poor prognosis of mental disorders (20). In a study, psychiatric nurses also had moderate levels of work-related stress and depression and exhibiting different coping mechanisms (20).

The limited exposure during their baccalaureate degree was cited to be contributory to their current flawed practice. This implies that the knowledge and skill required of mental health nurses to provide physical health care need to be increased (21). From their experiences, some have forgotten that the patients also need adequate physical care; hence, the improvements of the nursing education (22) curriculum are vital to prepare future nurses.

The current study also highlights that institutions should employ expert nurses who can guide mental health nurses to provide physical health care (21) in this regard. In a study, it has been proposed that institutions should employ expert nurses who can guide mental health nurses to provide physical health care (21).

The participants of the current study revealed their therapeutic practices to establish therapeutic relationships. These relationships are powerfully influenced by individual and organizational factors (23). Necessarily, caring nurse-patient relationships in mental health settings are critical components in helping patients recover (24).

Senior nurses, the more experienced ones, need to extend assistance to newly hired nurses to meet desired therapeutic ends. Imparting the skills and experiences of senior nurses to novice nurses and their presence alongside other nurses on work-shifts can be useful in promoting vigilance (25).

Despite the challenges, the participants are committed to their jobs. The motivation to pursue a career in psychiatric nursing, especially for the new psychiatric nurses, is rooted in the provision of high quality, meaningful placements (26). Providing care to patients with psychiatric disorders and working in a challenging environment lead to many problems among psychiatric nurses (27).Addressing stigma and more exceptional education and support for nurses to pursue a mental health career (26) must also be enforced. It is the moral and professional responsibility of the institution to protect them (27).

In terms of coping mechanisms, these are essential (28) to psychiatric nurses. These enable newly hired nurses to counteract their transitional challenges. Implementing programs aimed at teaching nurses how to deal with stress at work and improving their coping mechanisms and problem-solving skills are recommended (20). Administrative and collegial supports are also vital among newly hired psychiatric nurses. These are critical because support from supervisors and working environments can reduce job stress and negative emotions toward patients (29). To keep newly hired psychiatric nurses committed and motivated, there is a need to satisfy their various motivations to stay despite the challenges. A recent study suggested that the government and hospital administrators should consider ways to improve income, reduce work hours, and promote the psychiatric nursing specialty in ways that increase the public's respect for it, increase awareness of medical liability insurance coverage, and protect nurses from patients' violence (30).

Moreover, in the current study, the results imply the resilience of the newly hired psychiatric nurses as a manifestation of their coping mechanisms. Newly hired psychiatric nurses revealed the temporality of their challenges, which speaks much of their resilience as they care for their patients. Resilience has positive correlations with hardiness, self-esteem, life and job satisfaction, and negative correlations with depression and burnout (FOSTER). Through a resilience program, improvement in coping self-efficacy and capacity to regulate thoughts and emotions (FOSTER) is most likely to develop.

### Implications of the Study

The findings of this study reverberate the importance of preparing nurses to work in mental health facilities. Like any other field of nursing practice, psychiatric and mental health nursing, as a highly specialized field of nursing, requires the right preparations in terms of knowledge, skills, and attitudes. Adequate and reasonable training and exposure to mental health facilities where they can observe and practice during their baccalaureate degree must be warranted to help them adjust to the actual world of work should they desire to practice mental health nursing. Good training and exposure during their RLE can best prepare them to minimize their concerns relative to their transitory stage. Secondly, the findings also emphasize the need to equip nurses continuously to become more competent and compassionate in psychiatric and mental health nursing. The need for newly hired nurses for continuous growth and development is crucial to overcome their emerging challenges, especially during the transitory stage of their careers. Lastly, the results of the study highlight the reliance on adequate support systems in the workplace for newly hired nurses to overcome challenging situations. A mentoring program may be institutionalized and facilitated were more experienced nurses' guide and assist newly hired nurses in delivering quality patient care. Likewise, a sustainable resilience program may also be established to help newly hired nurses confront their challenges with endurance.

### Conclusion

Caring for patients with mental disorders has never been easy for newly hired nurses. The concern can pose a significant effect on patient care when not properly addressed. newly hired psychiatric The nurses significantly underscored essential themes on transitional challenges and coping mechanisms. Their capacity to use available such as healthy resources emotional expressions, destressing activities, individual resilience, acceptance, confidence, and autonomy, among other measures, aid them in dealing with their transitional challenges. Their desire for professional growth and development to ensure the delivery of quality patient care is outstanding, a grand gesture of flexible, adaptive, and acclimatized members of the healthcare team. Their keen observance of evidence-based nursing practice is viewed to influence quality patient care.

In light of the previous results, it is suggested that psychiatric facilities should establish a sustainable mentoring and resilience program for nurses, given the tremendous challenges that they encounter at work. The program must also be sustainable to support nurses in coping with their challenges, be it personal or professional. Adequate training and seminar workshops that are evidence-based should be facilitated regularly to ensure that the nurses enhance their competencies in the care of mentallychallenged patients.

Meanwhile, while the study provides interesting findings using the minimum acceptable number of participants in a descriptive-qualitative study, it is recommended that other qualitative research designs will be conducted to explore other constructs influential to the adaptation of newly hired nurses in a psychiatric facility and to generate meaningful findings contributory to the pool of knowledge available in the literature.

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## **Conflict of interest**

The authors confirm no conflict of interest in the conduct of the study.

## References

1. Mani ZA, Abutaleb M. Communication skills of novice nurses at psychiatric Hospital in Saudi Arabia. J Nurs Care. 2017;6(407):2167-1168. DOI: 10.4172/2167-1168.1000407

2. Meleis AI. Transitions theory: Middle range and situation specific theories in nursing research and practice. Springer publishing company; 2010 Feb 17.

3. Hung BJ, Huang XY, Cheng JF, Wei SJ, Lin MJ. The working experiences of novice psychiatric nurses in T aiwanese culture: a phenomenological study. Journal of Psychiatric and Mental Health Nursing. 2014 Aug;21(6):536-43. DOI: 10.1111/jpm.12121.

4. Çam O, Büyükbayram A. Nurses' Resilience and Effective Factors. Journal of Psychiatric Nursing/Psikiyatri Hemsireleri Dernegi. 2017 Jun 1;8(2):118-26.

5. Varghese A, Khakha DC, Chadda RK. Pattern and type of aggressive behavior in patients with severe mental illness as perceived by the caregivers and the coping strategies used by them in a tertiary care hospital. Archives of psychiatric nursing. 2016 Feb 1;30(1):62-9.

6. Gito M, Ihara H, Ogata H. The relationship of resilience, hardiness, depression and burnout among Japanese psychiatric hospital nurses. Journal of Nursing Education and Practice. 2013 Apr 15;3(11).

7. Dwyer PA, Revell SM. Multilevel influences on new graduate nurse transition: A literature review. Journal for Nurses in Professional Development. 2016 May 1;32(3):112-21. doi:10.1097/nnd.0000000000265

8. Polit DF, Beck CT. Essentials of nursing research, 7th ed. Lippincott Williams & Wilkins; 2009.

 Braun V, Clarke V. Using thematic analysis in psychology. Qualitative research in psychology. 2006 Jan1;3(2):77-101.

https://doi.org/10.1191/1478088706qp063oa

10. Creswell, JW. Qualitative inquiry and research design: Choosing among five traditions. Thousand Oaks, CA: Sage Publications; 1998.

11. Morse, JM. Designing funded qualitative research. In Denizin, N. K. & Lincoln, Y. S., Handbook of qualitative research, 2<sup>nd</sup> ed. Thousand Oaks, CA: Sage; 1994.

12. Benner P. From novice to expert. Menlo Park. 1984.

13. Patton, MQ. Qualitative Research & Amp; Evaluation Methods: Integrating Theory and Practice (4th ed.). USA: Sage Publications, Inc.2015

14. Maher C, Hadfield M, Hutchings M, de Eyto A. Ensuring rigor in qualitative data analysis: A design research approach to coding combining NVivo with traditional material methods. International Journal of Qualitative Methods. 2018 Jul 9;17(1):1609406918786362.

15. Mabala J, van der Wath A, Moagi M. Newly qualified nurses' perceptions of working at mental health facilities: A qualitative study. Journal of psychiatric and mental health nursing. 2019 Jun;26(5-6):175-84. doi:10.1111/jpm.12525.

16. Foster K, Roche M, Delgado C, Cuzzillo C, Giandinoto JA, Furness T. Resilience and mental health nursing: An integrative review of international literature. International journal of mental health nursing. 2019 Feb;28(1):71-85.

17. Song Y, Ebenezar M, Haastrup K. Coping mechanisms of mental health nurses in work related stress situations: Literature Review. 2018. Availale from:

https://www.theseus.fi/bitstream/handle/10024/161

218/Moteka\_Ebenezar\_Haastrup\_Kolade\_YuZhen \_Song\_Pdf.pdf?sequence=2&isAllowed=y

18. Haslinda A, Tyng CL. Job stress and coping mechanisms among nursing staff in a Malaysian private hospital. International Journal of Academic Research in Business and Social Sciences. 2016 May;6(5):471-87.

19. Sari DH, Erwina I. Relationship between Job Stress and Coping Mechanism in Psychiatric Nurse in National Mental Health Hospital. Elevate: The International Journal of Nursing Education, Practice and Research. 2018 Jul 1;1(1):76-9.

20. Hasan AA, Elsayed S, Tumah H. Occupational stress, coping strategies, and psychological-related outcomes of nurses working in psychiatric hospitals. Perspectives in psychiatric care. 2018 Oct;54(4):514-22. doi:10.1111/ppc.12262

21. Çelik Ince S, Partlak Günüşen N, Serçe Ö. The opinions of Turkish mental health nurses on physical health care for individuals with mental illness: a qualitative study. Journal of Psychiatric and Mental Health Nursing. 2018 May;25(4):245-57. doi:10.1111/jpm.12456

22. Harrison CA, Hauck Y, Ashby R. Breaking down the stigma of mental health nursing: A qualitative study reflecting opinions from western australian nurses. Journal of Psychiatric and Mental Health Nursing. 2017 Sep;24(7):513-22. doi:10.1111/jpm.12392.

23. Pazargadi M, Fereidooni Moghadam M, Fallahi Khoshknab M, Alijani Renani H, Molazem Z. The therapeutic relationship in the shadow: Nurses' experiences of barriers to the nurse–patient relationship in the psychiatric ward. Issues in Mental Health Nursing. 2015 Jul 3;36(7):551-7. doi:10.3109/01612840.2015.1014585

24. Valente SM. Managing professional and nurse–patient relationship boundaries in mental health. Journal of psychosocial nursing and mental health services. 2017 Jan 31;55(1):45-51. doi:10.3928/02793695-20170119-09

25. Vahidi M, Ebrahimi H, Areshtanab HN, Jafarabadi MA, West S, Foong A, Cleary M. Providing a safe environment in a psychiatric ward: Nurses and vigilance in Iran. Issues in mental health nursing. 2019 Jan 2;40(1):65-72. doi:10.1080/01612840.2018.1463326

26. Penman J, Martinez L, Papoulis D, Cronin K. Voices from the Field: Regional Nurses Speak About Motivations, Careers and How to Entice Others to Pursue Mental Health Nursing. Int J Nurs Educ Scholarsh. 2018;15(1):/j/ijnes.2018.15.issue-1/ijnes-2017-0056/ijnes-2017-0056.xml. Published 2018 30 January. doi:10.1515/ijnes-2017-0056

27. Zarea K, Fereidooni-Moghadam M, Baraz S, Tahery N. Challenges encountered by nurses working in acute psychiatric wards: A qualitative study in Iran. Issues in Mental Health Nursing. 2018 Mar4;39(3):244-50.

doi:10.1080/01612840.2017.1377327

28. Tsaras K, Daglas A, Mitsi D, Papathanasiou IV, Tzavella F, Zyga S, Fradelos EC. A crosssectional study for the impact of coping strategies on mental health disorders among psychiatric nurses. Health psychology research. 2018 May 8;6(1). doi:10.4081/hpr.2018.7466

29. Matsumoto Y, Yoshioka SI. Factors Influencing Psychiatric Nurses' Job Satisfaction Levels: Focusing on Their Frequency of Experiencing Negative Emotions Toward Patients and Support at Their Workplaces. Yonago Acta Medica. 2019;62(4):293-304.

doi:10.33160/yam.2019.11.006

30. Zhou H, Jiang F, Rakofsky J, Hu L, Liu T, Wu S, Liu H, Liu Y, Tang YL. Job satisfaction and associated factors among psychiatric nurses in tertiary psychiatric hospitals: Results from a nationwide cross-sectional study. Journal of Advanced Nursing. 2019 Dec;75(12):3619-30. doi:10.1111/jan.1420.