

Recognising and Managing Clinical Nurses' Frustration

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The letter focuses on a recent study in the Malaysian Journal of Nursing that illuminates nurses' accounts of workplace frustrations. We read the article "The experiences of nurse's frustrations in clinical settings" by Garces-Cabanas and Dano (2022) with mixed emotions. This important facet of nursing illustrates a concerted attempt to uncover and address the story of work-related difficulties experienced by the younger generation, sometimes known as millennial nurses, in the nursing profession. We are cognisant that nurses face several challenges and expectations at work. The article goes into great length on the frustrating experiences nurses encounter and how they are managed.

Several of Garces-Cabanas and Dano's research suggestions seem intriguing to us. First, Garces-Cabanas and Dano reported that the nurses in the study were meeting and exceeding expectations while carrying out their responsibilities. We believed this aspect represented the emotional labour of nursing work. Delgado and colleagues (2017) suggest that emotional labour seems to manifest in all realms of the nursing profession. The experience of emotional labour concerning interpersonal interactions is also evident across clinical areas, health contexts, and genders. Second, their insights regarding the need for nurse leaders to be cautious in situations that contribute to frustration are particularly salient. Nurse leaders can make an enormous difference in fostering a positive work environment. This is accomplished through strengthening the meaning of work; enabling nurses to engage in work-related decisions; establishing confidence in nurses' abilities to perform at a high level; and providing autonomy to staff members. These initiatives are hoped to contribute to ongoing efforts to enhance excellence in patient care quality (Mudallal *et*

al., 2017). Third, we believe that the stigma attached to nurses is still a significant area of concern. For example, the cultural notion that nurses should just "manage" their jobs and that failure to do so implies that they are not "cut out for nursing" is a form of stigma (Ross *et al.*, 2018). Thus, we agree that it is critical for nurse leaders to recognise and not stigmatise nurses experiencing frustration. Nurse leaders must consider giving emotional support through robust and supportive teamwork that empowers nurses to manage the emotional demands of their jobs and avoid burnout (Dall'Ora *et al.*, 2020). Of equal importance, both nurse leaders and nurses themselves must never forget that "To take care of others, nurses first need to take care of themselves." Practising nursing in a toxic work environment that is saturated with frustration can jeopardise the nurse-patient relationship, leading to poor outcomes (Taştan, 2017). Furthermore, while Garces-Cabanas and Dano call for a sustained reorganisation of how nursing concerns are addressed now and in the future, which we entirely agree with, we believe more substantial and robust efforts are needed. To achieve a supportive and sustainable work environment, it is pivotal to appreciate the value of open communication within the healthcare team. For example, a recent study by Geuens *et al.*, (2021) recommends that training team members to communicate their needs and expectations effectively could foster open communication, collaborative problem solving, shared trust, and the establishment of shared objectives, leading to a reduction in work-related stress.

In conclusion, this important paper provides insight into nurses' accounts of the difficulties they have faced and their ability to manage them. Although nurses are meeting their professional commitment to providing safe and high-quality patient care, it highlights that there

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are still segments of uncertainty within the profession that must be sensitively examined and strengthened. We gained an understanding of the numerous experiences and activities that can lead to a sense of being frustrated. All of these indicate the emotional nature of nursing work. As a result, nurse leaders must not only reflect on their significant empowering role in fostering a positive work environment, but they must also consider providing emotional support to their staff through the development of a strong and supportive team

environment. It is also particularly critical to recognise the value of open communication among members of the healthcare workforce. Nurses can definitely benefit from these fundamental aspects, which can help protect them from unresolved work-related frustrating issues, allow the situation to improve, and help them become more emotionally and professionally resilient.

Note: No hospital data were collected in the writing of the paper, which is entirely based on the authors' reflections on the subject.

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