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Living Under Pressure: A Phenomenological Study of ICU Nurses' Stress, Coping and Resilience

Roan Jade Dalida
https://orcid.org/0009-0000-4106-0411
St. Bernadette of Lourdes College
djade@sblc.edu.ph

ABSTRACT –

While many studies discussed stress and burnout in ICU nurses, few focus on their personal stories and lived experiences. There is a need to better understand how nurses experience, manage, and make sense of stress in their daily work. This study used Husserlian phenomenology to explore nurses' lived experiences. Ten ICU nurses were purposely selected. Data were collected through synchronous, text-based interviews, with the researcher serving as the primary instrument. The data were analyzed using Braun and Clarke's thematic analysis. Findings showed that ICU nurses experience constant, multifaceted stress, mainly due to heavy workloads, high patient acuity, staffing shortages, and the need for quick decisions. Nurses described feeling overthinking, anxiety, emotional exhaustion, and physical fatigue, showing how stress affects them mentally, emotionally, and physically. Relationships and communication with colleagues, patients, and families also played a big role, sometimes reducing stress, but at times making it more challenging. To cope, nurses used strategies such as prioritizing tasks, taking short breaks, seeking support from others, and engaging in spiritual practices. Over time, many nurses developed resilience, adaptability, and professional growth, making these experiences part of who they are as professionals. In conclusion, stress in ICU nursing is continuous and ever-changing, affecting nurses' well-being, coping ability, and professional growth. The study highlighted the importance of stronger support systems, better communication, and stress management programs to help ICU nurses maintain their well-being. Future efforts may focus on creating supportive workplace environments that promote resilience.

Keywords: *Stress, ICU nurses, high stress experiences, coping strategies, Professional growth*

INTRODUCTION

Nursing in the Intensive Care Unit (ICU) is one of the most demanding areas in healthcare. The unpredictable environment, high patient acuity, and frequent exposure to life-and-death situations place nurses under constant psychological and emotional stress (Klatt, M., et al..2025). ICU working conditions are strongly linked to burnout, moral distress, compassion fatigue, and emotional exhaustion. Heavy workloads, staffing shortages, and repeated exposure to patient suffering contribute to increasing stress levels, affecting both nurse well-being and patient care. This highlights the importance of supporting healthcare workers, as emphasized in SDG 3: Good Health and Well-being (Li, L. Z., et al, 2024). Despite existing studies, research on ICU nurses' lived experiences remains limited. Stress in ICU settings is a global phenomenon, making it important to understand how nurses experience and manage it in their

daily work (Mathew et al. al, 2025). In the UAE, cultural diversity and workplace demands further shape these experiences, with many nurses reporting moral distress related to end-of-life care (Ahmad, A. et al, 2025). This study aimed to inspire a deeper interest in exploring nurses' lived realities and in giving voice to their often unspoken struggles.

Statement of the Problem

The study aimed to explore the lived experiences of high stress among nurses working in the ICU. Specifically, it sought to answer the following questions:

1. What are the intrapersonal, interpersonal, and extrapersonal stressors experienced by nurses working in the ICU?
2. How do ICU nurses cope with and respond to these stressors?
3. How do experiences of ICU nurses align with the Betty Neuman Systems Model in terms of lines of defense and resilience?

Scope and Delimitations

This study explored the lived experiences of nurses working in the ICU, particularly in high-stress environments. There were several limitations in this study. 1. The sample size was small, as is typical for phenomenological research, which may limit the breadth of perspectives. 2. The study was context-specific, focusing on ICU nurses, which may affect the transferability of findings to other members of the healthcare system. 3. The research relies on participants' personal reflections and interpretations of their experiences, which were influenced by memory, mood, or willingness to share sensitive information; subjectivity was inherent.

Review of Related Literature

Because of the responsibilities to care for critically ill patients that require constant monitoring, immediate interventions, and high-tech medical equipment, patients are being tagged to be frequently emotionally, mentally, and physically stressed. Nursing stress often comes with heavy workloads, long shifts, demanding workplace environments, and emotionally demanding colleagues and families (Dall'Ora et al, 2022). Due to frequent stress exposure, nurses eventually developed coping mechanisms that helped them to cope with and manage stress and further maintain professional functioning. Resilience and coping strategies are considered important for maintaining mental and emotional health amid constant stress (Manjula, M., & Srivastava, A., 2022). Studies showed that prolonged exposure to stress may bring serious chronic effects on physical, emotional, and psychological well-being. Burnout is the most commonly mentioned effect, leading to emotional exhaustion, depersonalization, and decreased professional accomplishment. It was reported that burnout remains highly prevalent among nurses working in stressful healthcare environments (Sun, X et al, 2025)

Theoretical Framework

The **Betty Neuman Systems Model (NSM)** is a holistic framework that explains how individuals respond to stress through the interaction of stressors, lines of defense, and system stability (Hannoodee, S., (2023).

METHODOLOGY

Research Design

Qualitative research design is often used to understand human experiences, behaviors, and social phenomena from the perspectives of those experiencing them (Anyidoho et al., 2026). Within qualitative research, this study employed Husserlian phenomenology, a philosophical and methodological approach that seeks to describe the essence of lived experiences as consciously perceived by individuals (Bakken S.A.,2023)

Research Steps

The research utilized qualitative data-gathering techniques, including synchronous, text-based, semi-structured interviews with 10 ICU nurses who met the inclusion criteria: 1. Registered nurse working in the ICU for more than 3 years.

Data Collection and Sample Selection

The data collection process commenced in April 2026 with synchronous, text-based interviews conducted with purposively selected ICU nurses. The study was conducted after the questionnaire was validated by 3 experts and approved by the ERB of St. Bernadette of Lourdes College.

Data Analysis Methods

Data were analyzed using thematic analysis, which involved coding transcribed interviews and identifying patterns and themes relevant to the research questions. The analysis followed Braun and Clarke's (2020) six-step process.

Research Hypotheses and Validation

To ensure the study's quality and rigor, the researcher adhered to the four criteria of trustworthiness in qualitative research: credibility, transferability, dependability, and confirmability.

Study Limitations and Ethical Considerations

This study followed strict ethical standards to protect the rights and dignity of all participants. Ethical approval was obtained from St. Bernadette of Lourdes College. Participants provided informed consent. Confidentiality and anonymity were ensured through the use of pseudonyms and secure data storage.

RESULTS AND DISCUSSION

The study found that ICU nurses work in a highly demanding environment characterized by continuous pressure, critical decision-making, and significant responsibility for patient outcomes. Stress affected them mentally, emotionally, and physically and was influenced by personal, interpersonal, and organizational factors. While workplace challenges such as staffing shortages, heavy workloads, and communication issues increased stress levels, nurses relied on social support and various coping strategies to manage these difficulties. Over time, they developed resilience and adaptability, transforming stressful experiences into

opportunities for professional growth. The findings support the Betty Neuman Systems Model by demonstrating how coping mechanisms and support systems serve as protective lines of defense that help nurses maintain their well-being and continue to provide quality care.

CONCLUSIONS

ICU nurses experience stress as a constant and unavoidable part of working in a highly demanding environment. This stress is multidimensional, affecting them mentally, emotionally, and physically. Major stressors include heavy workload, high patient acuity, staffing shortages, and emergencies, while workplace relationships can either reduce or increase stress depending on the level of support and communication. Despite these challenges, nurses use coping strategies to manage stress. Over time, they develop resilience, confidence, and stronger coping skills. Overall, stress in the ICU is dynamic, contributing not only to strain but also to professional growth and a stronger nursing identity.

RECOMMENDATIONS

For Practice

Support ICU nurses through **structured stress management**, teamwork, and open communication. Encourage **self-care strategies** such as short breaks, task prioritization, and proper rest to prevent burnout.

For Policy

Healthcare institutions should address **staffing shortages and high patient-to-nurse ratios**. Implement **mental health programs, debriefing sessions, and wellness initiatives** to support nurses and improve retention.

For Future Research

Future studies may use **larger, more diverse samples and explore the effectiveness of interventions such as** mindfulness, resilience training, and debriefing. Long-term studies can examine how stress and coping evolve over time.

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AI DECLARATION STATEMENT

AI tools were used only for grammar and formatting support. All data collection, analysis, and interpretation were conducted solely by the authors.

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