

# Depression Among New Graduate Nurses Working in ICU and Medical-Surgical Units

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## Purpose

- Raise awareness of depression rates in new grad nurses
- Compare depression rates between ICU & Med/Surg unit new grad nurses
- Determine the need for support of new grad nurses during their first 1-2 years as an RN

## Background

- Incidence of depression among new grad nurses related to specific hospital units is unknown
- Depression afflicts 9.4% of the U.S. adult population but is treatable
  - Adverse effects of depression include fatigue, agitation, psychomotor disturbances, trouble concentrating, substance abuse, suicidal ideation, etc.
- Nurses have double the rate of depression within the general population
  - 35% of nurses experience moderate depression and 21% major depression
- Nurses who are depressed use more sick days, have lower productivity, higher rates of medication errors, and offer a lower quality of care

## Setting & Sample

- Two 300-bed hospital ICU & Med/Surg units in Los Angeles & San Francisco
- 108 new grad nurses from California BSN programs
  - 54 from ICU and 54 from Med/Surg units
  - Stratified random sampling
- Inclusion criteria
  - Ages 20-40 years
  - Currently and continuously working for the last 1-2 years
  - Working on night shift
- Exclusion criteria
  - Personal or family history of depression
  - Personal tragedy within the last 2 years
  - Receiving an average of less than six hours of sleep per night

## Measure

### PATIENT HEALTH QUESTIONNAIRE-9 (PHQ-9)

Over the last 2 weeks, how often have you been bothered by any of the following problems? (Use "✓" to indicate your answer)

|   | Not at all | Several days | More than half the days | Nearly every day |
|---|------------|--------------|-------------------------|------------------|
| 1. Little interest or pleasure in doing things  | 0          | 1            | 2                       | 3                |
| 2. Feeling down, depressed, or hopeless   | 0          | 1            | 2                       | 3                |
| 3. Trouble falling or staying asleep, or sleeping too much  | 0          | 1            | 2                       | 3                |
| 4. Feeling tired or having little energy  | 0          | 1            | 2                       | 3                |
| 5. Poor appetite or overeating  | 0          | 1            | 2                       | 3                |
| 6. Feeling bad about yourself — or that you are a failure or have let yourself or your family down  | 0          | 1            | 2                       | 3                |
| 7. Trouble concentrating on things, such as reading the newspaper or watching television  | 0          | 1            | 2                       | 3                |
| 8. Moving or speaking so slowly that other people could have noticed? Or the opposite — being so fidgety or restless that you have been moving around a lot more than usual | 0          | 1            | 2                       | 3                |
| 9. Thoughts that you would be better off dead or of hurting yourself in some way  | 0          | 1            | 2                       | 3                |

FOR OFFICE CODING 0 + \_\_\_\_\_ + \_\_\_\_\_ + \_\_\_\_\_ =Total Score: \_\_\_\_\_

If you checked off **any** problems, how **difficult** have these problems made it for you to do your work, take care of things at home, or get along with other people?

| Not difficult at all     | Somewhat difficult       | Very difficult           | Extremely difficult      |
|--------------------------|--------------------------|--------------------------|--------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

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## Methods

### Procedure:

- Obtain IRB approval from university and hospitals
- Nursing Directors contacted at each hospital with a request to recruit participants
- Each participant mailed a consent form with PHQ-9 questionnaire
- Participants' identity protected by assigned case numbers
- Participants complete PHQ-9 questionnaire at home and return via mail
- Each participant receives a gift card in gratitude for participation

## Analysis

- Hypothesis: New grad nurses working in ICUs have higher rates of depression than those working on Med/Surg units
- Comparison of two intact groups, ICU vs. Med/Surg new grad nurses
- Ordinal data.
- Chi Square Test of Independence
  - Determines relationship between two groups
  - Evaluates groups independence from each other
  - Determines frequency in percentages of depression occurrence between two groups
- To assure statistical significance; p value of 0.05

## Conclusion

- New grad nurses depression rates are not known
- This research has not yet been conducted

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## References

- Alpert, P. T. (2014). Depression Makes the Golden Years Not So Golden. *Home Health Care Management & Practice*, 26(3), 182-185. doi:10.1177/1084822313514852
- Chiang, Y., & Chang, Y. (2012). Stress, depression, and intention to leave among nurses in different medical units: Implications for healthcare management/nursing practice. *Health Policy*, 108(2/3), 149-157. doi:10.1016/j.healthpol.2012.08.027
- Chopra, S. S., Sotile, W. M., & Sotile, M. O. (2004). Physician Burnout. *JAMA: Journal Of The American Medical Association*, 291(5), 633. doi:10.1001/jama.291.5.633.
- Gärtner, F., Nieuwenhuijsen, K., van Dijk, F., & Sluiter, J. (2010). The impact of common mental disorders on the work functioning of nurses and allied health professionals: a systematic review. *International Journal Of Nursing Studies*, 47(8), 1047-1061. doi: 10.1016/j.ijnurstu.2010.03.013
- Kroenke, K., Spitzer, R. L., & Williams, J. B. (2001). The Phq-9. *Journal of General Internal Medicine*, 16(9), 606-613. doi: [10.1046/j.1525-1497.2001.016009606.x](https://doi.org/10.1046/j.1525-1497.2001.016009606.x)
- Letvak, S., Ruhm, C., & McCoy, T. (2012). Depression in hospital-employed nurses. *Clinical Nurse Specialist: The Journal For Advanced Nursing Practice*, 26(3), 177-182. doi: 10.1097/NUR.0b013e3182503ef0
- Welsh, D. (2009). Predictors of depressive symptoms in female medical-surgical hospital nurses. *Issues In Mental Health Nursing*, 30(5), 320-326. doi: 10.1080/01612840902754537