



Role Entrapment, Emotional Exhaustion, and Severe Perceived Stress in a Nursing Administrator with Maternal Responsibilities: A Mixed-Method Single-Case Study

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Abstract

Background: Even though the number of women in leadership roles in nursing academia is rising, they are still disproportionately responsible for household and caregiving duties. The coexistence of professional, maternal, and household roles may generate cumulative stress exposure. There is still a dearth of empirical data that combines time-use analysis with validated stress measurement in nursing administrators.. The purpose of this study is to investigate the lived experience and perceived stress level of a working mother who works in academic administration at a nursing college. **Design:** Mixed-method single-case study. **Materials & Methods:** A 44-year-old nursing administrator completed a 24-hour structured activity schedule and participated in reflective narrative reporting. Perceived stress was assessed using the 10-item Perceived Stress Scale (PSS-10). Qualitative data were analyzed thematically. Quantitative results were compared with published normative values. **Results:** The participant reported 5.5 hours of sleep per day and participated in about 18 hours of role-related activity. Severe perceived stress was indicated by the PSS-10 score of 34/40. The score matched a Z-value of +3.07 (>99th percentile) when compared to normative female population data (Mean = 13.7; SD = 6.6). Thematic analysis identified persistent role compression, emotional exhaustion, relational strain, identity erosion, and chronic sleep restriction. **Conclusion:** This case illustrates the extreme stress vulnerability that arises from cumulative professional and domestic demands. It is advisable to reform government and institutional policies and implement targeted stress management interventions in nursing leaders in order to effectively balance their maternal roles.

Keywords: Perceived Stress; Maternal Responsibilities; Relational Spillover; Sleep deprivation; Working Mother

INTRODUCTION

It is commonly acknowledged that increased female participation in higher education and professional leadership is a sign of social advancement. Women are becoming more prevalent in administrative and supervisory positions in nursing academia, supporting faculty leadership, curriculum development, and institutional governance. Despite this progress, working mothers still bear a disproportionate amount of household responsibility due to the persistence of traditional gender norms surrounding domestic work and caregiving. Research indicates that even when both partners have full-time jobs, working women still do a lot more unpaid household chores than their male counterparts. [1,2].

Work-family conflict, which is characterized as a type of inter-role tension in which engagement in one role interferes with performance in another, frequently arises from the coexistence of professional and domestic roles [3]. Both strain-based conflict (stress transfer between roles) and time-based conflict (competing time demands) have been linked to psychological distress, emotional exhaustion, and a decline in well-being [4,5]. Within nursing leadership contexts, administrative responsibilities further intensify cognitive load, emotional regulation demands, and decision-making pressure. Emotional labor-the requirement to regulate affect in professional interactions has been linked to elevated stress and burnout among healthcare professionals [6].

Chronic exposure to overlapping role demands may precipitate sustained physiological and psychological strain. Research demonstrates that prolonged work-family conflict is associated with increased risk of anxiety symptoms, depressive features, and occupational burnout [7,8,9]. Lack of sleep exacerbates these effects. To maintain optimal health and cognitive functioning, adults should get at least seven hours of sleep every night. Prolonged sleep deprivation has been linked to poor emotional regulation and increased susceptibility to stress [10,11].

In-depth case analyses combining time-use documentation with validated psychometric measurement are still scarce, despite survey-based studies measuring stress levels among nurses. Such integration enhances understanding of how stress accumulates across daily cycles rather than appearing as isolated symptoms. Therefore, this study aims to examine the lived experience of a nursing administrator who is also a mother, integrating qualitative narrative data with standardized measurement of perceived stress using the PSS-10.

MATERIALS & METHODS

A mixed-method single-case design was used to integrate qualitative experiential data with quantitative psychometric assessment. This design allows for contextualized understanding while maintaining measurement rigor. The participant was a 44-year-old married female serving in an administrative position within a college of nursing. She resided in a nuclear family structure with a working spouse and two

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children aged 12 and 5 years. Data were collected through structured documentation of a 24-hour activity schedule and reflective narrative statements describing emotional and psychological experiences. The Perceived Stress Scale (PSS-10) was administered using standardized scoring procedures. Items were rated on a 0 - 4 Likert scale, with reverse scoring applied to items 4, 5, 7, and 8.

Qualitative data were analyzed using thematic analysis. Quantitative PSS-10 scores were calculated and interpreted according to established classification thresholds. Norm-referenced comparison was performed using published female population norms.

RESULTS

Daily Role Distribution and Time Compression

The analysis of the participant's 24-hour schedule shows continuous involvement in different roles throughout the day. Her routine covers morning, working hours, evening, and even late night, with very little time for rest. In the early morning, she spends around four hours on household work and childcare. This is followed by more than eight hours of professional administrative duties. After returning home, she again becomes involved in domestic tasks without delay. These include cooking, helping with homework, cleaning, prayer, laundry, and preparing for the next day. Overall, she remains active for nearly 18 hours a day. However, her sleep is limited to only about 5.5 hours. There is no fixed time for relaxation or recovery. This pattern shows that multiple roles are tightly packed into her daily life. As a result, she has very little time for mental rest or relaxation, which may increase stress over time.

Perceived Stress Scale (PSS-10) Findings

The participant's score on the Perceived Stress Scale (PSS-10) is 34, which shows a very high level of stress. According to general standards, this score is much higher than normal. When compared with average scores of adult women, the difference is clear. Her score is far above the mean and falls in the extreme range. This means that only a small number of people have such high stress levels. This result suggests that she is facing serious psychological strain. It is not just her personal feeling, but something that can be measured using a standard tool. The high score also supports the qualitative findings. The participant described feeling emotionally overloaded, and this is reflected in the result. Therefore, her stress can be understood as both real and measurable.

THEMATIC FINDINGS

Thematic analysis of the 24-hour activity schedule and narrative reflections revealed five interrelated domains that characterize the participant's lived experience: (1) Persistent Role Compression and Boundary Erosion, (2) Emotional Overload and Psychological Vulnerability, (3) Relational Spillover and Interpersonal Strain, (4) Identity Depletion and Self-Suppression, and (5) Chronic Sleep Restriction and Physiological Exhaustion.

1. Persistent Role Compression and Boundary Erosion

The participant's daily routine shows a continuous shift between different roles without proper breaks. She moves from

one responsibility to another throughout the day. In the morning, her time is mainly spent on household tasks and childcare. Soon after, she begins her professional work, which includes administrative duties. After completing her work, she returns home and continues with domestic responsibilities late into the night. There is no clear separation between work and personal life. Importantly, no fixed time is set aside for relaxation or self-care. She does not appear to have any structured periods for rest, leisure, or mental recovery. This pattern suggests a highly demanding routine with limited opportunity for psychological relief.

The participant explicitly described the challenge of balancing multiple roles, stating that managing administrative responsibilities alongside maternal and household duties was very difficult.

She stated that "...it is very difficult for a working mother to balance her administrative work in the office along with her responsibilities as a housewife and a mother. I feel that almost every working woman is facing this same problem..."

This shows ongoing role compression, where multiple responsibilities are packed into a limited amount of time without enough rest or recovery. There are no clear boundaries between work and home life, which indicates that the roles are overlapping rather than being properly balanced.

2. Emotional Overload and Psychological Vulnerability

Narrative excerpts indicated significant emotional strain. The participant reported *"...i cried alone for so many days, felt helpless and found no way to escape from these multiple tasks..."* Also she said *"...sometimes I feel living as working mother along with maternal and housewife role is a punishment..."*. These statements suggest profound emotional fatigue and perceived entrapment.

In addition, the participant showed a desire to take a break from her responsibilities, saying that she sometimes felt like *"running away to an isolated place."* This suggests emotional overload rather than just temporary stress. The seriousness of these feelings is also supported by her high score on the PSS-10 (34/40), which indicates a high level of perceived stress.

3. Relational Spillover and Interpersonal Strain

Stress caused by multiple role demands seemed to affect her personal relationships. The participant reported frequent conflicts with her spouse and feeling irritable with her children. She also mentioned that even small behaviors made her annoyed, which suggests a reduced level of emotional tolerance.

This pattern shows strain-based spillover, where stress from one area of life affects how a person functions in another. The participant also said that she felt unsupported, mentioning that *"...nobody is there to feel or show sympathy..."* This lack of emotional support may further increase her stress levels.

4. Identity Depletion and Self-Suppression

Repeated statements such as having *"...no time for professional development..."* and *"...no time to think about myself..."* show

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a loss of personal identity beyond daily roles. The participant's experience suggests that her personal goals and self-reflection are often postponed in order to meet external responsibilities. This loss of personal identity may lead to long-term dissatisfaction and reduced inner motivation. The participant also mentioned that she is "...expecting my children to grow fast and assist me in day-to-day activities...". This shows mental fatigue and a tendency to look forward to future relief from her current responsibilities.

5. Chronic Sleep Restriction and Physiological Exhaustion

The participant reported approximately 5.5 hours of sleep per night, substantially below recommended adult sleep duration. Sleep deprivation was explicitly acknowledged, with the participant stating "I wish to sleep little more but 10 minutes

of extra sleep will imbalance the whole day time management..."

The long hours of daily activity, along with very little rest, can lead to physical tiredness. Over time, this physical exhaustion may also affect emotional control. As a result, the person may find it harder to manage stress and feelings. In addition, getting less sleep on a regular basis can have negative effects. Short sleep duration is known to reduce concentration and thinking ability. It can also lower a person's ability to cope with emotional challenges. Overall, lack of proper rest and sleep may weaken both physical and mental well-being. This makes it more difficult for the individual to handle daily demands effectively.

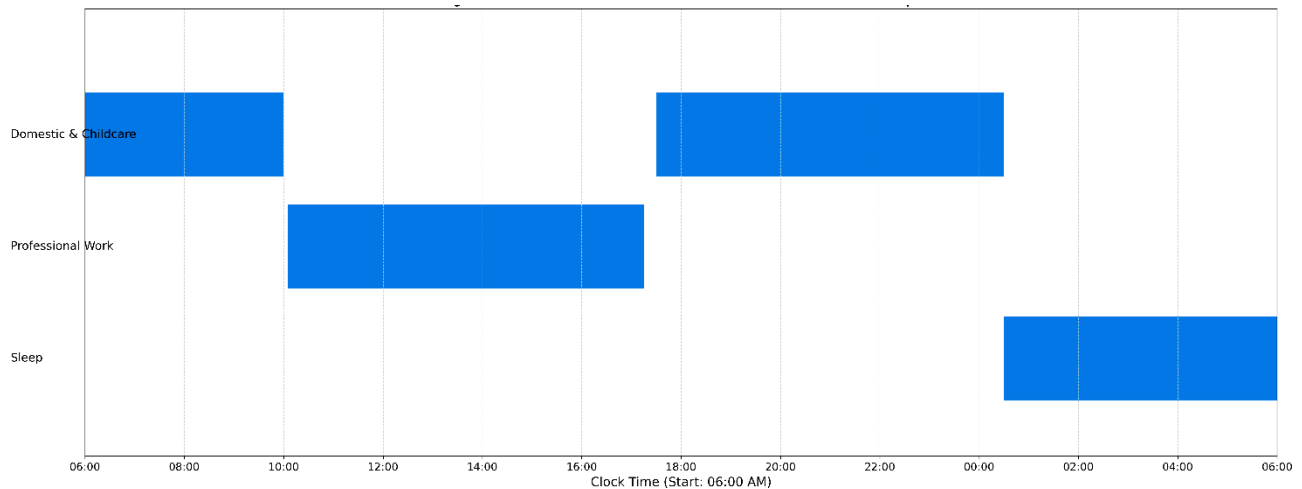


Figure -1 24 Hours' Time Use Analysis of a Working Mother

DISCUSSION

Severe Perceived Stress and Psychometric Validation

The participant's score on the Perceived Stress Scale (PSS-10) is 34, which shows a very high level of stress. This score is much higher than the average for adult women. It is also placed in the extreme percentile range, which means very few people have such high stress levels. This result suggests that the participant is experiencing serious psychological strain. It is not just a personal feeling, but something that can be clearly measured. The quantitative data supports what was found in the qualitative data. The participant's experiences of emotional overload are reflected in the high stress score. Overall, the findings show that her stress is both real and significant, as confirmed by a standard psychological tool.

High scores on the PSS are often linked with greater psychological problems. These may include anxiety, emotional tiredness, and even symptoms of depression. People with higher stress levels usually find it harder to cope with daily challenges. Research on healthcare workers has shown similar results. Individuals with high perceived stress scores are more likely to experience burnout and lower overall well-being. This suggests that stress at this level is not normal or harmless. In this case, the participant's stress should be taken seriously. It is not just routine work pressure, but something that may affect her mental health. The results from the stress scale also match

the participant's personal experiences. The qualitative findings describe emotional overload, which is supported by the high score. The alignment between the psychometric score and the qualitative description of distress strengthens the credibility of the mixed-method findings and illustrates the value of integrating quantitative measurement with experiential narratives [12,13,14].

Work-Family Conflict as a Structural Stressor

The findings of this case study show that work-family conflict plays an important role in increasing psychological stress. The participant reported a constant overlap between her professional duties and household responsibilities. This situation reflects both time-based and strain-based conflict. Time-based conflict happens when time spent on one role reduces the time available for another. On the other hand, strain-based conflict occurs when stress from one area affects performance in another. In this case, both types of conflict were clearly present. Previous studies have also supported these findings. Research shows that work-family conflict is strongly linked with higher stress levels, emotional exhaustion, and lower job satisfaction, especially among healthcare professionals. Nursing administrators often carry a heavy workload at their workplace while also managing family responsibilities at home. Over time, this combination of roles can lead to continuous stress, especially when there are no clear

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boundaries between work and personal life. Studies in occupational health further suggest that women in leadership roles in healthcare may face more pressure. This is often due to social expectations that they should also manage caregiving duties. As a result, they may experience greater role overload compared to men [15,16]. The participant's experience therefore reflects a broader structural challenge faced by many working women in healthcare leadership positions, rather than an isolated personal difficulty.

Emotional Labor and Relational Spillover

Another important theme emerging from the qualitative analysis is emotional labor. Emotional labour refers to the process of controlling and managing one's emotions in order to meet professional expectations. This is especially important in service-based professions like nursing. In administrative leadership roles, individuals are often required to maintain emotional control, handle conflicts, and communicate with empathy when dealing with staff, students, and patients. However, doing this for a long time can have negative effects.

Research shows that continuous emotional labour may lead to emotional exhaustion, particularly when there is no proper time for rest and recovery. Over time, this can result in psychological tiredness. The impact is not limited to the workplace. Emotional exhaustion can also affect family life. It may lead to irritability, less patience, and even conflicts at home. Such spillover effects are commonly reported among healthcare professionals who are involved in emotionally demanding roles [17,18].

In this case, the participant reported feeling irritable with her children and having disagreements with her spouse. However, this may not mean that there are serious problems in the relationship. Instead, it could be a result of emotional tiredness caused by continuous control of emotions at work. The participant also mentioned that she does not receive enough sympathy or emotional support from her family. This is an important concern. Social support is known to help reduce the negative effects of stress. When such support is lacking, the impact of work-related stress can become more severe. As a result, the individual may find it more difficult to cope with both personal and professional responsibilities.

Sleep Restriction as a Stress Amplifier

The participant reported sleeping for about 5.5 hours each night. This is lower than the recommended 7 to 8 hours needed for healthy adults. Such a reduced sleep duration may have negative effects on overall well-being. Lack of proper sleep is known to affect both the mind and body. It can lead to difficulty in controlling emotions and may cause increased irritability. In addition, it can reduce concentration and lead to mental tiredness. Over time, poor sleep can also increase levels of stress and psychological discomfort. Therefore, inadequate sleep may play an important role in worsening the participant's emotional and mental health.

Research in behavioral health shows that not getting enough sleep can affect important mental functions. It may reduce a person's ability to think clearly and control emotions. As a result, individuals become more vulnerable to stress and may

react more strongly to daily challenges. Among healthcare professionals, similar patterns have been observed. Chronic lack of sleep is often linked with irritability, poor work performance, and a higher risk of burnout. This highlights the serious impact of sleep deprivation in demanding professions. In this case, the participant's limited sleep appears to be part of her daily routine. Even after completing work, she continues with household responsibilities, which reduces her rest time. This ongoing pattern suggests that sleep deprivation is not occasional but continuous. Therefore, lack of sleep may increase the negative effects of work stress and work-family conflict. It acts as an additional factor that worsens both physical and emotional strain [19,20,21].

Identity Erosion and Long-Term Psychological Risk

The participant's narrative also showed a gradual loss of personal identity. She described neglecting her own needs and delaying her professional growth. These experiences are often seen in people who face continuous role overload. When individuals have too many responsibilities, they may not get time to focus on themselves. As a result, their personal goals and ambitions are often postponed. Over time, this can affect their sense of self. This situation may lead to feelings of being stuck or not progressing in life. It can also cause frustration and a sense of reduced control over one's own choices.

Psychological research suggests that ignoring personal goals and self-care for a long time can be harmful. It may increase the risk of burnout and symptoms of depression. When individuals do not get time for themselves, their mental well-being may slowly decline. In addition, if a person starts to feel that life is unfair or too difficult, it can make the situation worse. Such thoughts may increase stress and reduce the ability to cope with challenges. If this pattern continues without any support or change, it can lead to serious outcomes. These may include low job satisfaction, poor work performance, and worsening mental health. [22].

Implications for Nursing Leadership and Organizational Policy

This case study shows the importance of institutional awareness about the pressures faced by nursing administrators. These professionals often have to manage both leadership roles at work and major caregiving responsibilities at home. This combination can create a high level of stress. Healthcare institutions should recognize that administrative positions may involve substantial emotional labor and workload demands that extend beyond standard working hours.

Certain organizational changes can help reduce stress among nursing leaders. These may include flexible work schedules, sharing of workload, proper delegation of tasks, and access to mental health support services. Such measures can make work more manageable and reduce pressure. In addition, regular stress assessment can be useful. Tools like the Perceived Stress Scale (PSS-10) can help identify individuals who are experiencing high levels of stress. Early identification is important. It allows timely support and intervention before the situation becomes worse. This can help prevent stress from developing into burnout or other mental health problems [23].

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The integration of quantitative stress assessment with qualitative narrative in this study demonstrates the value of mixed-method approaches in understanding the complex interplay between occupational roles, personal life demands, and psychological well-being among healthcare professionals.

CONCLUSION

This case study highlights severe perceived stress in a nursing administrator balancing maternal and domestic responsibilities. The convergence of prolonged daily role engagement, emotional exhaustion, relational strain, identity erosion, and a PSS-10 score significantly above normative levels underscores the need for targeted interventions. Nursing institutions should

consider routine stress screening, flexible administrative structures, and supportive policies for working mothers in leadership positions.

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CONFLICT OF INTEREST

The authors declare that there is no conflict of interest.

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