Occupational Stress Management of Nurses

in Elderly Homes

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The purpose of this thesis is to describe what do nurses do to manage occupational stress in elderly homes in Finland. During academic studies in ethical decision-making, experienced nurses shared experiences that nurses go though during nursing care and management in elderly homes. The researchers of this study, who are student nurses, were motivated to look further on the topic about what do nurses do to manage occupational stress in their professional activities.

The research question of this study is: What do nurses do to manage occupational stress?

The research was carried out in Leena koti in Vantaa municipality and four nurses were interviewed. The research was conducted using qualitative research method, and semi-structured interview. The findings were interpreted using inductive data analysis method.

Findings presented that nurses manage occupational stress by using person-oriented interventions and organization-oriented interventions. Person-oriented interventions include physical activities such as walking the dog and going to the gym, relaxing or recreational activities such as eating, going to the forest or somewhere outside the workplace, spiritual aspect such as praying and professional growth such as attending to continuing professional education. Organization-oriented interventions are teamwork and communication.

Future researchers can study and identify different occupational stressors and management in other settings such as hospitals and health stations. One of the respondents said that asking yourself if nursing is really for you because the nature of work of nurses is really stressful and that nursing is not for everybody. Future researchers can explore on the reasons why nurses decided to be nurses.

Key words: Nurses, Elderly Home, Stress Management

Contents

1   INTRODUCTION

Research has shown that elderly population is increasing in Finland and the only respect that can be offered is good nursing care in elderly homes (OECD, 2013), however, this increases a high level demand on professional nurses to offer good quality nursing care environment. Nursing profession has become a worldwide point of interest in different age categories that means different ages for young and old (OECD 2013).

According to Kirkcaldy and Martin, Nurses are exposed on daily basis to stress-related problems, resulting to absence from work, fatigue and frequent sick leaves (Kircaldy and Martin, 2000). Nurses have to deal with not only clients but with their families as well. However the workload for nurses includes own personal home affairs and professional affairs to maintain their workload never ends. Thus, with all this in mind our thesis will filter through qualitative research method to describe ways how nurses manage occupational stress and afford a smile on their faces in every shift.

This study describes what do nurses do to manage occupational stress in elderly homes. The finding can educate other nurses joining the profession and can also be useful to the employers towards their staff. The elderly care system in Finland is monitored by Valvira board (National supervisory Authority for welfare and Health 2008). It maintains and promotes health through effective management and supervision. This research is relevant to the nurses working in elderly homes to describe and express their feelings and how they balance Valvira's expectations and clients' needs, with end up with results of safe clients and happy health nurse present on every shift (Valvira 2008).

During the busy shifts, nursing research findings revealed that physical activities, relaxing activities, continuous education and spirituality are personal oriented interventions and that team work and communication collectively grouped as organization oriented interventions are used by nurses to manage occupational stress.

2   THEORIES AND CONCEPTS

2.1   Occupational Stress

Occupational Stress, also known as work-related stress, is the response workers may have, if they find that their knowledge and skills cannot cope with the pressures and demands from their work. It can occur in many different work circumstances. Occupational stress can not only compromise an employee's health but influence the business performance as well (WHO N.D.).

According to Michie's theory (2002), the management of occupational stress can be generally divided into two types, which are individual stress management and organizational stress management. Author also exemplifies some typical individual ways of managing stress from work (e.g. training), the ultimate aim is to change individual skills and resources and help the individual change their situation.
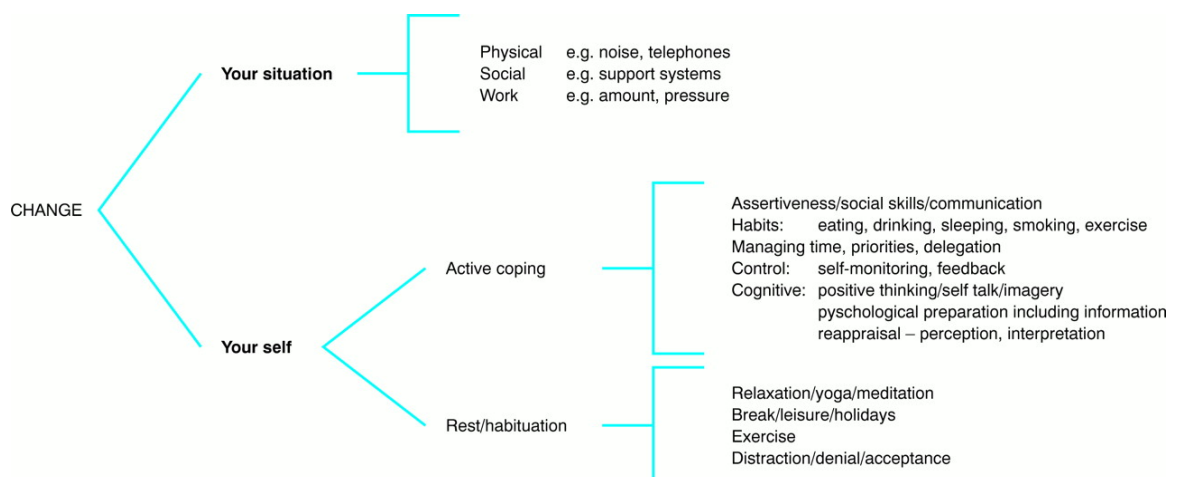
Figure 1 Techniques for managing stress individually (Michie, 2002)

Meanwhile, Michie (2002) highlights the importance of involving organizational level interventions in the prevention and management of occupational stress. The drawback of this approach is that it only focuses on helping those workers who are experiencing stress. The types of organizational interventions can be diverse, varying from structural, for example, work schedules to psychological social support.

Work-related stress or occupational stress has been significantly recognized as a major contributing factor to poor quality of work life and poses a remarkable risk for chronic

diseases among employees. According to Finnish Institute of Occupational Health, in Finland alone, 25 % of employees experience work stress. This is comparable to the average of other EU countries, which is 22% (FIOH 2014). In particular, one study suggested that nurses, who are part of the majority working class, are more prone to stress-related problems with higher rates of absenteeism, turnover and burnout. Moreover, nurses also have higher rates of physical and psychiatric admissions and mortality (Clegg 2001; Kirkcaldy & Martin 2000). Also Nurses are exposed daily to serious stressors such as conflict with physician, racism and discrimination, high workload and dealing with patients, families, their patients' diagnosis, prognosis and more so, death (French, Lenton, Walters, & Eyles 2000).

Aside from physical illness, suicide rate grew tremendously among the working class. This is further discussed in Hazards. Hazards is an independent, union-friendly magazine based in England. Two of their excerpts are:

'Most of us have seen someone reduced to tears by work stresses. But crying can be just the start of it. Some workers get so distressed they opt for suicide' (Hazards February 2008)

'It is the thoroughly modern way to die at work. Major occupational diseases of the twenty first century will be heart attacks, suicide and strokes' (Hazards August 2003).

2.2   Stress Management

Stress management generally indicates that techniques and programs designed to assist people of dealing with stress in their lives. Stress management analyzes specific stressors and takes positive actions to alleviate and reduce stress related effects. Stress management includes all types of activities, which can help reduce tension exists in the minds and bodies of workers, for instance, sports and relaxation techniques. Most stress management are based on job related stress and workplace issues (O'Toole, 2011).

American Psychological Association (2010) clearly states the importance of physical exercises. Evidence based statistics provided by this organization shows that physical exercises not only improve overall body function of people but also relieve peoples'

stress and reduce their depression. More than 70% of people who do physical exercises report that they feel less stressed and manage to maintain a good mood.

It has been well documented that people avail themselves of religious rituals and spirituality in managing their life. For believers, religious and spirituality create a sense of peace, provide insights, and gain perspective. Prayers and meditations are common techniques for believers to cultivate their spirituality. According to Mills, Reiss and Dombeck's (2008) findings: religious rituals (e.g. prayers) has been widely accepted and practiced as a method of reducing stress.

Brown (2009) claims the importance of continuing professional development in managing stress. Author's theory highlights that constant engagement in career development provides more opportunities for workers to accumulate relevant high-level vocational expertise. This empowers those workers disposition to attend to other perspectives, which includes handling emotions in a better way and building and sustaining a relationship with others more efficiently. In other words, professional development can be invested as a kind of management in dealing with occupational stress.

A healthy team environment is crucial. It helps to build up a creative and dynamic team with space for further developing. Under healthy team environment, all members of the team are likely to face work-related problems (which can cause stress) together and share the responsibility of solving them (Finch 2012). Finch (2012) also mentions that breaks created by a healthy team environment such as training, educative sessions and group meetings provide respite for workers and help them to refresh, and avoid burnout due to occupational stress.

Communication is one of the basic needs of human being to convey feelings and ideas. With appropriate communication skills, exchange of feelings and ideas and establishment of interpersonal relationship can be achieved while poor communications skill can lead to conflicts and cause stress in the work place (Giga & Noblet & Faragher & Coop 2003; Michie 2002). Michie (2002) categorizes communication as a stress management intervention on both individual and organizational level. In order to reduce stress from communication related conflicts, efficient verbal and non-verbal communication skills are recommended, for preventing staff resignations and absenteeism.

Successful management and prevention of stress will depend on the organizational culture. A culture of transparency and understating is the foundation of building a stress-free workplace. Establishment of this kind of organizational culture requires leadership and role model from the top executive level. Leaders can design, develop and implement a stress coping policy that embraces organizational culture throughout the organization. Then, stress issues can be detected and solved (Michie 2002).

2.3   Nurses in Elderly Homes

In Finland, it is legislated to have a license to practice as a nurse. According to National Supervisory Authority for Welfare and Health (Valvira 2008), nurses should receive their tertiary degrees from a university of applied science and have a thorough nursing knowledge to be qualified to independently and responsibly deliver nursing care in a professional manner. Nurses' duties include treating the sick, promoting population's health, preventing sickness, treating and rehabilitating. Simultaneously, Nurses are also required to have an ability to tolerate stress (Finnish nurse association 2015)

Elderly Home, can be interchanged with nursing home. MedlinePlus (2015) refers it as places for clients whose conditions do not require for hospitalization but are not suitable to stay at home. Most elderly homes provide nursing aides and services from skilled registered nurses 24 hours everyday. Some of elderly homes follow hospital settings, delivering multi-disciplinary services (e.g. physio-therapy and occupational therapy) and providing specialized cares (e.g. dementia).

According to the World Health Organization (2015), globally, over a billion people does not have access to quality health services because there is a huge shortage of competent health workers worldwide. WHO gave a figure of approximately 4.3 million health workers are still needed. Health workforce crisis has significant implications to the health and well being of millions of people.

However, this does not imply that increasing the numbers of workers will be enough to solve this problem. Health workers must also be equipped with skills, competencies and clinical experiences that are also lacking to the present health workforce and so, scaling up educational programs are also produce (World Health Organization 2015).

Up to the present, the World Health Organization are still working in meeting the needs of the 21st century population.

According to the Ministry of Social Affairs and Health (2011), the aim of this national strategy is to treat everyone equally, to give everybody the opportunity to participate and to support everyone's well-being and functionality. With this, it requires a competent social protection system that aids citizens in coping with risks in life. ' Everyone has the right to social wellbeing, participation and best health possible'.

Also, with this strategy, it extends the beginning and end of working life, reducing employment rates, disabilities and absenteeism. In all, this strategy aims to lengthen working careers by three years in year 2020. In line with this, it promotes and improves good working condition at work by doing ways which makes employees feel good while working which yields to healthy and productive employees. Standard operating procedures at work must be collaborated by management and policy to have an understanding but its execution is solely done by the employer. Employers must treat their employees equally and set of standards must be stipulated and implemented. Furthermore, employees have a big responsibility in professional competence and also working ability (Ministry of Social Affairs and Health).

3   PURPOSE OF THE STUDY AND RESEARCH QUESTION

The purpose of this study is to describe nurses' stress management. The research question of this study is what do nurses do to manage occupational stress?

4   METHODOLOGY

   4.1   QUALITATIVE RESEARCH

Qualitative research has been chosen as the study method for this paper. In this qualitative research, stress management used by nurses are described.

The researchers and interviewers play a role as "the research tool" due to the close and equal bond between the researcher and participants (nurses working in the elderly home). In many cases, people who do researches are often a part of these studies. The pitfalls of this issue are that being too familiar with the surroundings may lead to oversight, and, more likely, to miss some valuable information. Considering that this issue also applies to this thesis project, the researchers are fully aware of the role they play. Researchers will conduct interviews in a less formal manner, while, still carefully examining the interview settings and challenge their own surmises (suppositions) and strive to lead to rich data acquisition. (Holloway & Wheeler 2010, 5)

In qualitative research, data are important. Interview concluded data display the reality of nursing life. These data also provide useful information that assists researcher in producing new understanding. Based on these data, researchers can revise existed theories or reveal the essence of phenomena (occupational stress management) (Creswell 2009).

4.2 DATA COLLECTION

In order to gather as much data as possible, this research uses semi-structured focus group interview wherein the research question is used to the respondents. The merits of conducting an interview in semi-structured framework includes allowing for the researchers to have control in the collection of data and prompting participants to provide additional information when researchers want (Creswell 2009).

A semi-structured interview was chosen as a data collection method for this qualitative research. A semi-structure interview is developed and processed based on the predetermined research question--what do nurses do to manage work related stress?, which can provide raw qualitative data. During the interview, interviewees also added more relevant information, examples and personal experiences to elaborate their statement (Cohen & Crabtree 2006). This kind of interview model assists interviewers in identifying other possible ways of seeing and understanding of nursing stress management.

In the beginning, the researchers made an initial inquiry to randomly selected elderly homes from the internet for possible site of study. Out of the many elderly homes

inquired, Leena Koti gave a positive response by welcoming the researchers to conduct the interview whenever the researchers are ready to do so.

4.3   RESEARCH ENVIRONMENT

Leena koti is a healthcare provider located in Vantaa, Great Helsinki Metropolitan. This facility has around 50 years history of good reputation in local community and also has a close partnership with Vantaa City Government. Leena Koti currently has more than 180 client beds in 7 different wards. Services provided by this elderly home includes, low level mental care, alcohol withdrawal programs, low level and high level care for old people, respite services, a wide range of social service (volunteering, city government sponsored programs). Due to its good service quality and comprehensive service coverage, the beds of this home care are constantly in demand. There is a multi-disciplinary team with around 100 staff working for this healthcare provider. Leena koti is also an educative facility for school, providing 100 learning places each year.

4.4   PARTICIPANTS

Due to the fact that it is quite challenging to gather all nurses in one sitting, the supervisor of Leena Koti invited the participants to where this interview had been conducted and also, the supervisor set a time for the group interview.

During the interview, there were four multi-cultural participants, aged from 28 – 50 years old. They are registered and practical nurses. Also, the participants are regular employees of the chosen elderly home for at least 2 years. All of them do morning and afternoon shifts providing care to the same patients of the same department.

4.5   THE INTERVIEW

The interview was conducted on the 24th of March 2015. The interview was held at a scheduled time in an office where no interruptions occurred. During the interview,

there were no other irrelevant people present and confidentiality was well preserved. The interview began by making acquaintance and having a cup of coffee and snacks, which were provided by the interviewees. Three researchers are doing this study and during the interview, two of the researchers presided the interview while the other one was assigned in the recording of the interview. The language used in the interview was majority Finnish but English was also used. In the beginning of the interview, the researchers introduced themselves, the study, the duration of the interview and also gained the consent for the interview from interviewees by signing the consent form. There were four interviewees. The proper interview started with the research question: What do nurses do to manage work related stress? And each of the respondents answered alternately. After answering the main research question, the respondents also shared specific stressors found during work and what they did to manage stress. Examples of the situations given were what they did to manage work related stress from difficult patients, difficult workmates and nature of work. The interview was recorded on an IPAD, which is a method for further review. Hand written notes were also taken in case of equipment failure. The whole session took half an hour.

4.6   INDUCTIVE DATA ANALYSIS

Data analysis of this research is conducted by an inductive approach. A general inductive approach is commonly used in health and social science research and evaluation and is also one of the most common methods used in qualitative research. It, literally, means: to reason (find) out solutions to problems by logical thought processes. This is the process to develop generalizations from specific observations, which helps researchers integrate information to develop a theory or description that helps explicate processes under observation (Thomas 2006).

The reason, why data of this research is conducted in an inductive way, is that it has been proven to have the following strengths:

The observations used in the inductive process need not be personal observations. They may be (and often are) the findings and conclusions from other studies. By doing so, researchers can avoid involving their subjective presumptions into the research and, hereby, jeopardize research accountability (Thomas 2006).

In order to provide most accurate findings out of data, researchers strive to achieve three major purposes, when analyzing gathered data. They are to:

"(a) Condense raw textual data into a brief, summary format; (b) establish clear links between the evaluation or research objectives and the summary findings derived from the raw data; and (c) develop a framework of the underlying structure of experiences or processes that are evident in the raw data (Thames, 2006)."

After interview was conducted at the Leena koti, the analysis of retrieved data starts with listening from interview recorded. All the participants' answers were transcribed word by word. The transcribed materials were printed out and thoroughly read by the three researchers. Next, researchers reduced and split the information into sentences and words. At this point, data clustering and classification were conducted.

The method researchers performed during the data process phase is according to: 'Inductive coding begins with close readings of text and consideration of the multiple meanings that are inherent in the text. The evaluator then identifies text segments that contain meaningful units and creates a label for a new category to which the text segment is assigned. Additional text segments are added to the categories to which they are relevant. At some stage, the evaluator may develop an initial description of the meaning of a category and write a memo about the category (e.g., associations, links, and implications). The category may also be linked to other categories in various relationships, such as a network, a hierarchy of categories, or a causal sequence.' (Thomas, 2006)
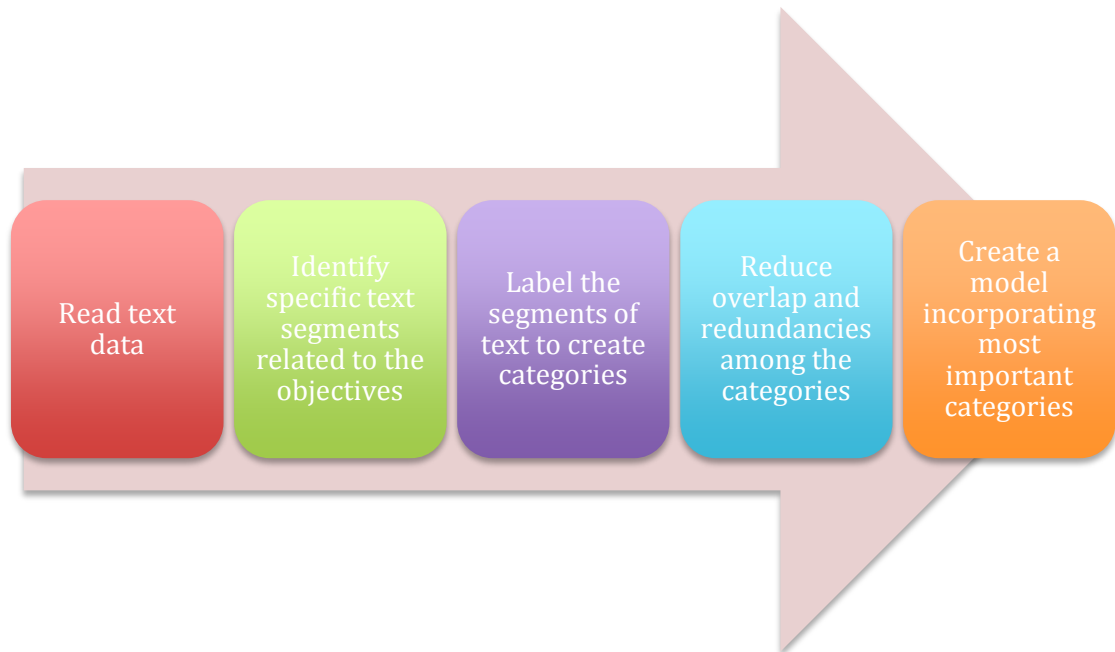
Figure 2. Inductive Analysis (Thomas, 2006)

After the transcribed data were read, segments formed were reviewed in relation to the themes and main categories. For example, the raw texts related to the physical activities were put in the main category 'person-focused interventions'. After identifying each text's designated category, they were checked for overlapping and consequently, two main categories were formed. The categories were then analysed and discussed.

5   FINDINGS

In applying the inductive data analysis for this study, two main categories were formed and these are: (1) Person-oriented interventions, (2) Organization-oriented interventions

5.1   PERSON ORIENTED INTERVENTIONS

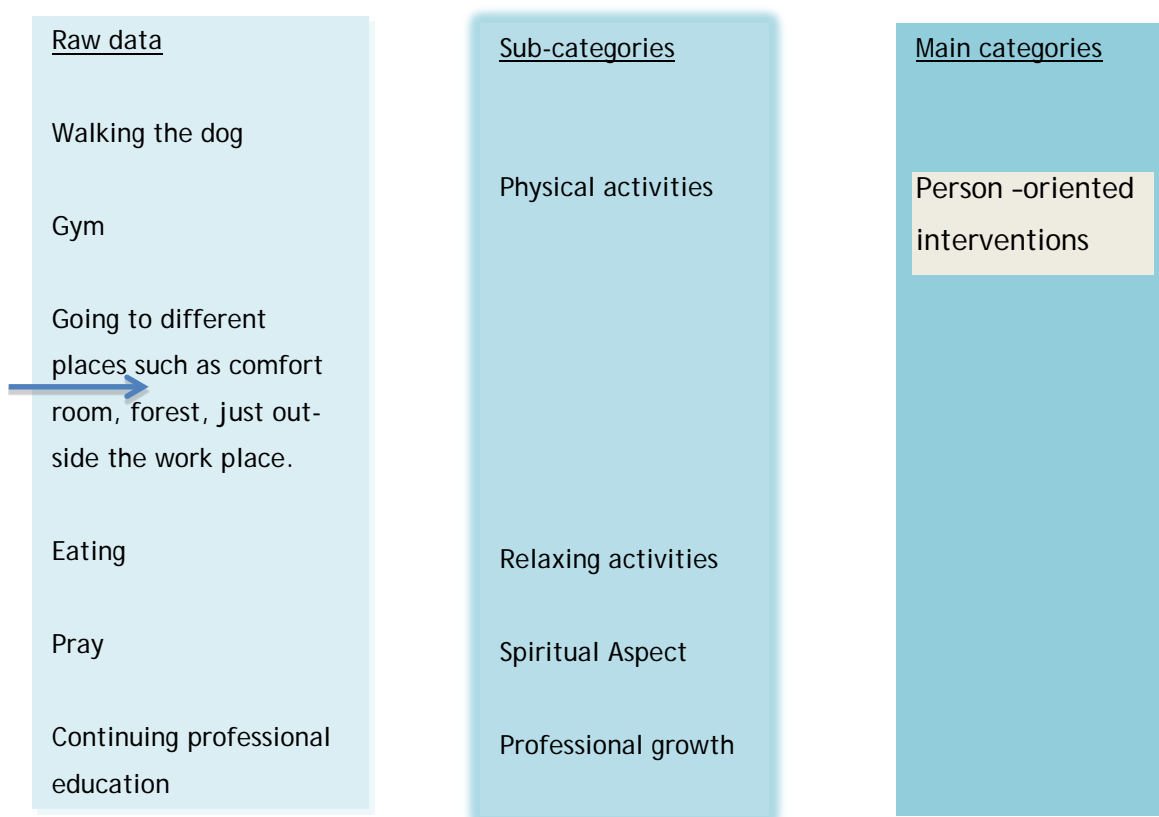| Raw data	Sub-categories	Main categories
Walking the dog		
Gym	Physical activities	Person –oriented interventions
Going to different places such as comfort room, forest, just outside the work place.		
Eating	Relaxing activities	
Pray	Spiritual Aspect	
Continuing professional education	Professional growth	

Figure 3. Process forming the main category 'person- oriented interventions'

Respondents answered the question specifically by saying what they do to manage occupational stress. The raw data above represents the answers the respondents gave and it formed subcategories (physical activities, relaxing activities and professional growth) and main category as person-oriented interventions.

5.1.1 PHYSICAL ACTIVITIES

Majority of the nurses' answers are what they do to manage stress after work and mostly, they go for a walk, go to the gym and bring their dogs outside.

> *'Työn jälkeen, yleensä menen lenkille koiran kanssa. Se antaa erilainen fiilis ja antaa minulle aika itselleni ajatella erilaisesta asiasta kun työstä'*
>
> *(After work, most of the time I go for a walk with my dog. It gives me a different atmosphere or vibe to think about other things than work)*

> *'Jos ehdin vielä, käyn kuntosalissa työn jälkeen. Kuntosali poistaa työmieliä. Aina käyn kuntosalissa jos haluaisin ajatella jostain tai jos en halua ajatella mitään'*
>
> *(If I still have time, I go to the gym after work. The gym takes away everything about work and I always go there if I would like to think about something or if I don't want to think at all)*

5.1.2 RECREATIONAL AND RELAXING ACTIVITIES

Comments from nurses indicate that during the working hours short breaks play an important role for many nurses. Nurses use different way to refresh themselves to put their stress under control, for example, going out door and having fresh air, and washing face with water.

> *' Syön'*
>
> *(I eat)*

> *'Työn jälkeen, on ihana sitten mennä rentoutus paikkaan kuten saunaan, metsään ostoskeskukseen ja tietysti kotiin' Niitä antavat erilainen ilmapiiri joka auttaa minua levätä.*
>
> *(After work, it's wonderful to go somewhere relaxing such as sauna, forest, shops and of course, home. This gives me a feeling of relaxation)*

Periaatteessa, meidän työ on rankka siksi meidän pitää löytää keinoja joita voi helpottaa meidän työelämän stressia. Tauolla, voi mennä ulos ja saada raikas ilmä.'
(Basically, our work is really hard that is why we need to find ways that can help us lessen the work-stress. During break time, we can go outside and get some fresh air)

'Voisi olla että tauolla, menee wc:hen pesee kasvot, tuntuu paremmalta sen jälkeen'
(It can be that during break, go to the washroom and wash face, it feels a lot better after)

5.1.3   CONTINUING PROFESSIONAL EDUCATION

Some nurses choose to continue and improve their academic pursuit.

'Jos on tosi väsynyt, koulutus voi auttaa mutta aika harvinainen tässä tarjotaan sitä mutta uskonkin että jos on vaan aktiivisesti pyydetään, kyllä saadan'
If you are really tired, continuing professional education can help but it's rare that we are offered such but I believe that if we just actively ask for it, we can have it.

5.1.4   SPIRITUAL ASPECT

One nurse answered that praying help him manage occupational stress.

'Rukoilen'
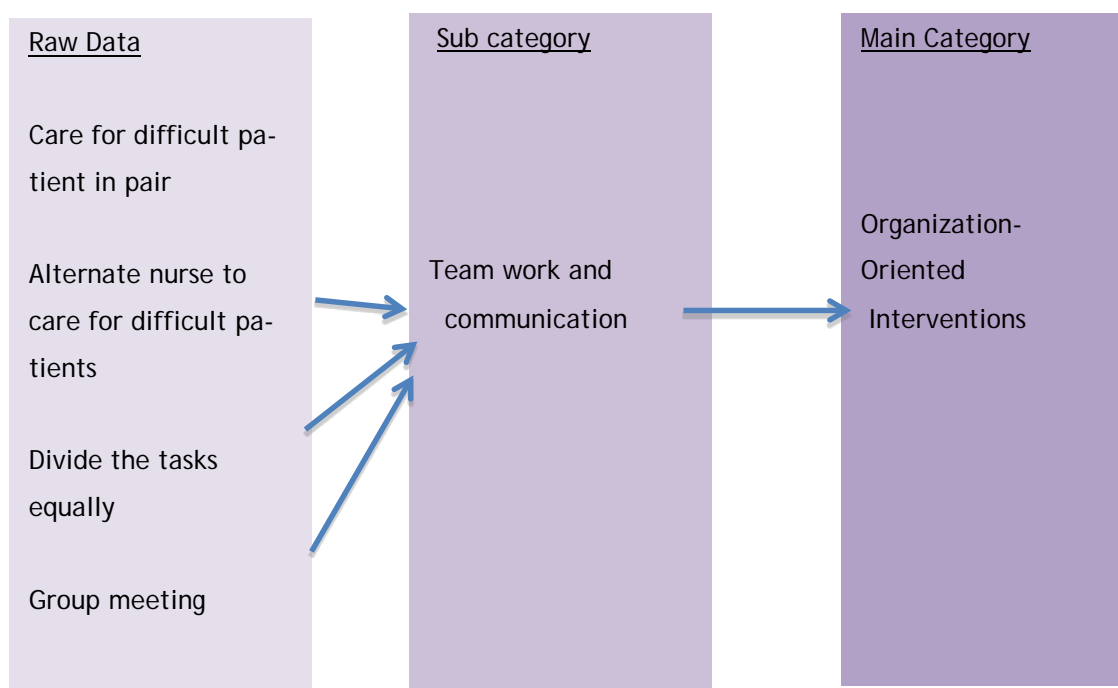*(I pray)*

5.2   ORGANIZATION ORIENTED INTERVENTIONS

Raw Data	Sub category	Main Category
Care for difficult pa-tient in pair		
Alternate nurse to care for difficult pa-tients	Team work and communication	Organization-Oriented Interventions
Divide the tasks equally		
Group meeting		

Figure 4 Process forming the main category 'Organization – oriented

   Interventions'

Another main category formed from the raw data gathered from the respondents is organization-oriented interventions. Under this are subcategories teamwork and com-munication.

Nurses use different methods and strategies in the team to put stress from workplace under control. Through working as a pair, switching clients, requesting assistance from colleagues, and planning equal workload at the start of work, nurses work as team members to maintain stress level at a controllable level.

5.2.1   TEAM WORK

The concept of always being a team member is implanted in nurses' mind.

> *'Käydä tutustumaan sellaista asukasta koska ehkä siinä on syy miksi hän on vaikea ja voidaan löytää jotain avulias ratkaisu ongelmaan. Tämä auttaa asukasta ja helpottaa meidän töitä'*
> *(Explore the possible reasons why the residents treat us difficult and as a group we can find solutions that can be helpful both to the resident and to nurses*

> *' Otan aina joku mukaan vaikealle asukkaalle koska se ei auta mitään jos yritän olla yksin.'*
> *(I always bring somebody with me because it won't help anything if I'll be alone)*

> *'Joskus, asukas reagoi erilaisella tavalla erilaisille hoitajille. Tehdään niin että jos esim. en pysty käsitelemään sellaisen asukkaan kanssa, annan sitä toiselle hoitajalle koska ehkä asukas saa yhteyttä toisen hoitajan kanssa'*
> *(Sometimes, residents react differently to different nurses and so if I can't handle a certain resident, I will give him to another nurse because maybe the resident will cooperate to the second nurse.)*

> *'Yksi keinokin on vuorotellaan vaikean asukkaan hoitamisessa koska joskus jos on joka työvuoro hoidan sama vaikea asukas, stressi nousee enemmän*
> One solution is also to alternate caring for a difficult resident because if you take the difficult resident at all times, stress rises

> *'Työn alussa, jaetaan asukasta niin että tehtävä on jaettu tasapainosesti'*
> On the start of the shift, we divide the things needed to do equally

5.2.2   COMMUNICATION

In addition, nurses from Leena koti also have regular group meeting.   Nurses can share and exchanges experience during meetings. This gives nurses a sense of belonging (to a team). They also build a harmonious bond with other nurses and change coping strategies towards working issues.

> *Ollaan onnekkaita täällä koska harvinaista että joku on semmosta joka ei tee mitään mutta aina jos tuntuu oudulta tai tuntuu että jotain ei ole järjestyssä, sanotaan suoraan jota saadan 'tervellinen työsuhde''*
> *(We are lucky because it is quite rare that we have somebody who does not do anything but always if something feels to be weird or something is not done properly, we say it straight to the person and with this we get the healthy 'working relationship')*

> *'Jos on huonossa tilanteessa että emme käsitele sellaisen hoitajan kanssa, sanotaan esimiehelle ja hän voi hoitaa sitä asiasta'*
> *(In bad situations wherein we can not handle to be with such nurse, we say it to our supervisor and he can take care of it)*

> *'Pidetään tiimipalaveri joka tiistai ja jutellaan yleisistä ja tärkeistä asioista joka voi helpottaa meidän töitä. Muista aina että ei tarvi olla yksin käsitellä jostain työasiasta, ollaan tiimi tässä ja tiiminä, ratkaisetaan.*
> *(We always have group meetings every Tuesday and we talk about general and important things that can make our work easy. Always remember that you don't have to be alone to handle work issues, we are a team and as a team we solve it)*

6   DISCUSSION

6.1   FINDINGS

According to Michie's theory (2002) we can use techniques of stress management, which are individual stress management and organization stress management. Her theory supports the findings of this study. Our findings show that nurses manage occupational stress by using person-oriented interventions and organization-oriented interventions.

Person-oriented interventions include physical activities such as walking the dog and going to the gym, and going to the forest or somewhere outside the workplace. Also, we have eating as part of the relaxing activity, spiritual aspect such as praying and professional growth such as attending to continuing professional education

The respondents' answers are also mentioned on the literature presented on the concepts such as physical exercise is considered essential in maintaining mental health and reduces stress. Many studies have shown that exercise reduces fatigue, improves alertness and concentration and also, enhances cognition. Also, doing leisure and relaxation activities such as going to the forest or somewhere else rather than work is claimed to be beneficial in managing stress and also reduces depression. It provides people a chance to balance work and personal life and it also gives a person, a sense of control of his own time, which is a vital consideration, when one is overwhelmed by obligations (American Psychological Association 2013).

Moreover, one of the respondents also mentioned about continuing professional education. According to Brown (2009), continuing professional education and career development are also ways to manage occupational stress. This gives employees the chance to grow and give perception of opportunity to further their career prospect.

Furthermore, spirituality and stress reduction has been mentioned. According to Mills, Reiss and Dombeck's (2008) religious rituals such as praying has been widely accepted and practised as a method for reducing stress.

Another main category formed form the study is organization-oriented interventions. These are interventions which needs teamwork and communication. Examples under

this group are caring for difficult patients in pair, alternately caring for difficult patients, dividing the tasks equally and also conducting group meetings.

From the concepts of this study, 'An effective team environment helps to relieve stress levels of individual employees. Problem solving is shared. Team environments boost problem-solving capacity. Solutions are likely to be much more creative and dynamic – as are successes. And team members share in the successes, failures. Rewards, reputations, compensation are interdependent' (Finch 2012).

Nurses also use effective communicative skills to solve interpersonal issue with other peer colleagues, who reduce the stress existing among co-workers and achieve healthy stress-free 'working relationship'. Also, timely report to the leader who is in charge, is another effective communication method. Leaders can use his position authority to deliver timely interventions and, therefore, solve tension between subordinates, which release possible nurses' stress from work relationship (Michie 2002).

As a whole, the respondents' description of what they do to manage occupational stress are supported by the concepts mentioned from the theoretical background but also are not limited to specific examples mentioned by the respondents. This means that nurses, as individuals, also have their own preference on what to do with managing occupational stress but more or less falls on one of the main categories formed.

During the interview, the researchers also gathered other points that are worth mentioning. One of the respondents also talked about asking oneself if this kind of profession is really for you because the nature of work of nurses is really stressful and that nursing is not for everybody. It goes beyond giving medications and referral to physicians and to other members of the interdisciplinary team, this profession is also about caring and giving a tender, loving care. Future researchers can study about the reasons why students study nursing and why nurses pursue their career as nurses under pressure.

6.2   ETHICAL CONSIDERATION

Ethical factors were incorporated throughout the whole research process. Permission to conduct this study was obtained from Laurea AMK thesis teachers and the head nurse of Leena koti. The rights of those who are involved in this study are protected. The data collection was carried out by a semi-structured interview. Respondents had participated in the interview voluntarily and had been fully informed about the aims and objectives of this study. A written form of agreement was presented and signed by interviewees before interview was conducted.

Confidentiality and anonymity were also well preserved throughout the study, which included that not disclosing the identification of the informants, protecting privacy and respecting informants' autonomy.

The issue of beneficence was carried out in this research, which is one of the most fundamental ethical principles in nursing researches. Researchers protect those involved participants from any potential risks that might cause harm to them (e.g. the risk of leaking data from interview to non-related personal). No complaints from relevant authorities were received. Thus beneficence was well protected by researchers.

6.3   TRUSTWORTHINESS AND CREDIBILITY

The trustworthiness and credibility aspect of this study have been effectively maintained in following manners:
The confidentiality of interview had been ensured so that data from interviewees were true, valuable and in-deep. Falsification, fabrication and misinterpretation of data have been avoided so that the accuracy of data has not been compromised. Works of other researchers and authors used in this thesis are all referenced according to Laurea reference system.

According to Talbot's theory (1995), researchers put transferability into consideration as well, researchers clearly narrate procedures of this research, which allows those

who conduct follow up researches to examines and determine the applicability of findings of this study thesis. This helps fellow researchers to transfer this study to another sitting

7   CONCLUSION AND SUGGESTED FUTURE STUDIES

In this study, the purpose of this thesis was to describe what do nurses in elderly home do to manage occupational stress. Researchers interviewed four nurses at Leena Koti. The recorded information generated raw data from a semi-structured interview. Raw data were translated, analyzed and interpreted based on an inductive data analysis.

Researchers have reviewed from published articles supporting the idea that the stress management plays a major role in coping with events appraised as stressful at the interviewed elderly home. Based on the data, several aspects of nurses' stress management have been studied, and as described above, the scripts show that the stress management used by nurses in Leena koti can be categorized into person-oriented interventions and organization-oriented interventions. Person-oriented interventions include: Physical activities, Recreation/Relaxing activities, Relief from Spiritual aspect and Professional growth. Meanwhile, organization- oriented interventions are teamwork and team communication.

The role of stress management has been crucial for all registered nurses working in elderly home (Hughes 2008), the findings of this thesis give a current and descriptive information that might be very useful for future research. During the interview one of the respondents commented that "asking oneself if this kind of profession is really for you because the nature of work of nurses is really stressful and that nursing is not for everybody," which points out the importance of the nature of being a nurse to be sensitive to working stress. Moreover, future researchers can study and identify different occupational stressors in other Finnish elderly homes.

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Figures

Figure 1 Techniques for managing stress individually (Michie 2002)

Figure 2 Inductive Analysis (Thomas 2006)

Figure 3 Process forming the main category 'person-oriented interventions'

Figure 4 Process forming the main category ' organization-oriented interventions'

Appendix

1 : Letter for approval of interview

Leenakoti
Vanhusten Kotiapusäätiö
Eteläinen Rastitie 12, 01360
VANTAA

Date 25 March 2015

Dear Manager,

LETTER FOR APPROVAL OF INTERVIEW

We are student nurses from Laurea University of Applied Sciences and we are currently working on our thesis entitled Occupational Stress Management of Nurses in Elderly Homes. In line with this, we would like to ask permission from you to conduct a group interview with your staff (Nurses and Practical Nurses).

The main purpose of our study is to describe what do nurses do to manage occupational stress in elderly homes. Also, this study can be used as a future basis for future studies concerning occupational stress and its management. You can also set the most appropriate time for the said interview to avoid us from interfering with the working routine of your staff.

We, hereby, promise that any details gathered from the interview will be treated in a confidential manner.

Warm regards,

Yours sincerely,

Ndungu, Lucy lucymolive@gmail.com Puh. 0453159904

Lim, Rica Camille ricacamillelim@gmail.com Puh. 0407711025

Zhou, Jie Jay7days@outlook.com Puh. 0465248001

2 : INFORMED CONSENT FOR THE PARTICIPANTS

Dear Nurses,

We are student nurses from Laurea University of Applied Sciences and we are currently working on our thesis entitled Occupational Stress Management of Nurses in Elderly Homes.

The main purpose of our study is to describe what do nurses do to manage occupational stress in elderly homes. Also, this study can be used as a future basis for future studies concerning occupational stress and its management.

During this study, you will be asked to answer this question as to describe your work-stress management. This interview was designed to be approximately a half hour in length. However, please feel free to expand on the topic or talk about related ideas. Also, if there are any questions you feel you cannot answer or that you do not feel comfortable answering, feel free to indicate this and we will move on to the next question.

All the information will be kept confidential. Only the researchers and faculty supervisor mentioned below will have access to this information. This interview is designed to learn first-hand information about this topic.

Thanks for your cooperation in advance.

Participant's Agreement:

I am aware that my participation in this interview is voluntary. If, for any reason, at any time, I wish to stop the interview, I may do so without having to give an explanation. I understand the intent and purpose of this research.

I am aware that the data will be used for a thesis paper. I have the right to review, comment on, and/or withdraw information prior to the paper's submission. The data gathered in this study are confidential and anonymous with respect to my personal identity.

I have read the above form, and, with the understanding that I can withdraw at any time, and for whatever reason, I consent to participate in today's interview.

_____   _____
Participant's signature   Date

Warmly regards,

Yours sincerely,

Ndungu, Lucy lucymolive@gmail.com Puh. 0449807308

Lim, Rica Camille ricacamillelim@gmail.com Puh. 0407711025

Zhou, Jie Jay7days@outlook.com Puh. 0465248001

Tutor of the Project:

Sari Haapa - sari.haapa@laurea.fi, tel. +358 46 856 7535

Appendix 3 : Survey Question

Research question: What do nurses do to manage occupational stress?

Implementation Plan:

1. Initial inquiry of possible research place through phone calls and email
2. Send a letter for approval to the nurse supervisor which includes an introduction about the researchers, brief summary about the thesis, the question to be asked from the interviewees, a copy of the consent form to be signed by the interviewees at the beginning of the interview and the date of interview.
3. When an approval is received from the nurse supervisor of the research place, researchers will come on the agreed date of interview in the research place.
4. Make a courtesy call to the nurse supervisor
5. The nurse supervisor will gather the interviewees in the designated room
6. Establishment of rapport. Researchers will give introduction to the interviewees about themselves and about the research while also serving coffee. Also, in this stage, the consent form will be given to them.
7. Conduction of Interview by the research question: What do nurses do to manage occupational stress?
8. Open Discussion for the researchers and interviewees
9. Closing off the Interview
10. Data Analysis