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INTERVENTIONS FOR OCCUPATIONAL STRESS MANAGEMENT AMONG NURSES: A systematic literature review

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ABSTRACT

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Occupational stress in nursing is an endemic problem. It contributes to decrease of efficiency among nurses due to health problems. Documenting the effective interventions was essential for a successful health promotion of the nurses. The goal of the study was to identify interventions to manage the occupational stress among the nurses. The study aimed to promote the health of nurses and offer nursing students opportunities to learn interventions for stress management. The study applied a systematic literature process and analysed data through comparative and content analysis. It adapted two frame works of health promotion to explain stress management activities and compared the findings with the reviewed findings.

The theoretical framework discussed the crucial activities that need to be considered in health promotion adapted from Ewles et al. (2003) as well as the approaches to the activities. The following interventions are included in the framework: preventive health services, community based work, health education programmes, economic and regulatory activities, environmental health issues and healthy public policy.

The study identified seven groups of interventions: Psycho-educational, holistic wellness programme, organized conditions and job characteristics, Cognitive Behavioural Intervention (CBI), specific management behaviours, use of job-demand scale and competency approach. The features of these interventions are discussed in themes in themes. The interventions showed similarities with theory but some findings indicated variance. Some characteristics of the interventions displayed relations. The interventions can be prompted individually or in groups of nurses or by the administrators.

Key words: nurses, nursing, occupational stress, stress management

ABBREVIATIONS

CBI	Cognitive –Behavioural Intervention
CINAHL	Cumulative Index to Nursing and Allied Health literature
Ebrary	Electronic library
ECOWA	European working conditions observatory
Eurofound´s Conditions	European Foundation for Improvement of Living and Working
HEP	Health workforce Educational and Production
JDC(S)	Job- demand control support
Kela	Social insurance institution of Finland
Kuntosali	A Finnish word for physical fitness places
Ovid	Database Guidelines
OHC	Occupational health centres
Työterveyshuolto	A Finnish word for Occupational Health Centres
WHO	World Health Organization

ABSTRACT

ABBREVIATIONS

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1 INTRODUCTION

Occupational stress is a common subject in nursing literature. Therefore, it is recognised as a vital problem for health care sectors. It is considered because of its relationship with various diseases and interaction with job resources. In addition, it is seen as a process in which job characteristics have harmful effects on individual`s health and wellbeing. The sources of stressors can be identified internally or externally. According to WHO (2011), stress arise from a wide range of work circumstances and becomes worse due to lack of support, low skill discretions, high job demands and organizational conditions. (Hallin et al. 2007.)

The previous research has revealed great necessity of identifying and eliminating as well as monitoring health risks associated with work place. In some theories such as Wilson et al.(2009) work place are recognized as a key setting that address health because virtuous working environments increase output. (Pisanti et al. 2011; Kravits et al. 2007; Verhaeghe et al. 2008; Lewis et al. 2009 and Mc elligott et al. 2007).

According to Potter et al. (2005), nursing profession focuses on the health and wellbeing of individuals, communities and families. It has led to great recognition of nurses as the crucial people of the society. Despite the important role of nurses, some questions still require some answers. For example: Are all nurses healthy and do they practice self-care or promote self-behaviours? It is recognized that nurses spend a bigger percentage of their waking time at work place resulting to negative influence of health. The negative influence that has been reported associated to nursing occupation is mostly inheritance of physical, psychological and emotional problems. (Pisanti et al. 2010; Kravits et al. 2007 & Verhaeghe et al.2008.)

Stress management is an important act to eradicate occupational burnouts, physical and psychological illness. The Oxford University Press (2011) defines it as the act of developing emotional and physical changes to control and reduce

stress. It involves identifying the source of stress and the effects of stress on health and personal skills. In previous research, stress management interventions have been seen to rapidly reduce stress symptoms. The identification of interventions for stress management is therefore important. (Kravits et al. 2007.)

The goal of the study was to identify interventions to manage the occupational stress among the nurses. The aim of the study was to promote the health of nurses and offer nursing students opportunities to learn interventions for stress management. The literature review process is chosen as it suited the phenomenon and the researcher needed to obtain information from a wider perspective. The review enabled identification of interventions that would also be a beneficial to everyone involved in the health promotion of the nursing community while addressing the needs and risks involved.

2 OCCUPATIONAL STRESS AMONG NURSES

Assembling of the evidence from literature identified occupational stress as a common subject in nursing literature. It was considered because of its relationship with various diseases and interaction with job resources. Various studies revealed that the nursing profession is challenging due to occupational stress and burnouts. Factors such as low skill discretions, high job demands, low support from supervisors, organizational conditions among were recognized to have significance to occupational stress. In addition, repeated challenges with people's needs, problems and suffering are also recognized as contributing factors. Researchers raised concern about stress among nurses. (Kwak et al. 2010; Wang et al. 2009; Pisanti et al. 2011; Kravits et al. 2010; Verhaeghe et al. 2008 & Lewis et al. 2010.)

A study revealed that challenges faced by the nurses are due to unbalance in their daily work. It was discussed that nurses work under stressful environments However, they are expected to provide holistic and good quality care to the patient. This proved unbalance between motivation and work. It was also revealed that patients remain under the risk of prolonged illness whereas the risks are associated with poor quality of care and directed to individual nurses. (Hallin & Danielson 2007.)

In the Finnish Social and Health Policy, there is a plan known as Socially Sustainable Finland 2020 containing policies directed to occupational health. It aims at "encouraging employees to prolong their working age by improving their will, abilities as well as their opportunities to work". There are several actions required to be implemented to attain good and healthy working environments. The policy revealed that balancing human resources with work requirements can encourage the maintenance of work ability. In order to maintain ability to work, the following crucial aspects should be addressed; individual wellbeing, competencies and work place improvement. (Ministry of Social Affairs and Health 2011.)

3 THEORETICAL APPROACH

3.1 Health promotion

According to the WHO (2011), health promotion is defined as "the process of enabling people to increase control over, and to improve, their health as well as beyond individual behaviour to a wide range of social and environmental interventions." Health promoters are encouraged to establish the aims and objectives of their activities and also ensure compliance with choice of clients. The aims and objectives of health promotion should center on actions directed to clients. (Ewles & Simnet 2003, 30-31).

This particular study employed the Ewles and Simnet (2003: 30-31) frame work to promote the health of nurses. In health promotion, management skills are crucial to the implementation of plans for intervention. According to Oxford University Press (2011), definition of management in general terms is the ability to be effective and efficient at work. Efficiency is about achieving results compared with other ways that lead to achievement. (Eby & Brown 2005.)
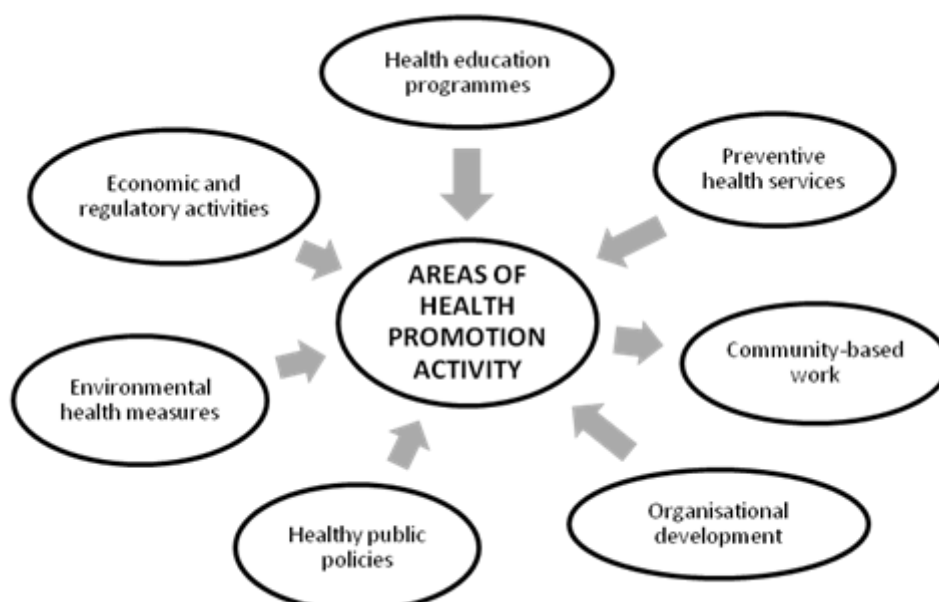
GRAPH 1. Frame work for health promotion activities. (Adapted from Ewles & Simnet 2003, 30).

The figure illustrates a programme consisting interventions for health promotion. In this study, graph 1 identifies activities of health promotion that can be implemented in the area of health promotion (occupational stress management) among nurses.

3.1.1 Preventive health services

Health promoters lead in carrying out the interventions where as individuals need to be aware and be ready for the interventions. They need to recognize the benefits and usefulness of the programme. Healths promoters also need to encourage client-led interventions that encourage making of own choices. (Gillam et al. 2007, 87.)

Figure 1 suggests health services such as occupational health care services. Finland is a good example of the countries that offer the services "työterveyshuolto". According to European Working Conditions Observatory (ECOWA), "Finland is known for active interventions in occupational health" The occupational health centres take care of health of the employees. Organizations signs agreement with these centres and introduces their clients to these centres. Nurses are required to attend pre-assessment and periodical assessment at the occupational health centres (ECOWA 2008.)

The Occupational Health Centres (OHC) monitor nurses health. Therefore, individual nurses are encouraged to discuss problematic issues arising from their work. Nurses approach the OHC first and report their health issues. OHC are recognized as the appropriate places for nurses to discuss their feeling and conditions of health that relates to work. The health care workers therefore can gain enough information that can assist to carry out interventions. (Gillam et al. 2007, 87.)

In Finland, there is another example; the Finnish Social Institution (Kela) provides reimbursement for the cost of medicines prescribed by doctors for treatment of illness. Nurses with illness acquire permission to discontinue with work and undergo treatments. It is the role of individual nurses to be aware of these

possibilities and seek help instead of continuous strains that can results to complicated conditions. Kela 2010.)

3.1.2 Community based work

In this section, the community works together with people in activities such as campaigns and other activities to motivate individuals and have impact to their health. This community work can include everybody in matters of organizational change and ensure compliance; the health promoter is required to be persuasive and stresses risks to clients. For example, the tobacco free campaigns that aims to prevent kids from smoking. Group of kids work together in campaigning and the affected group are supported with the process to quit smoking (Gillam et al. 2007, 87.)

Nurses that have experienced occupational stress and have been treated can form groups and campaign against occupational stress can encourage other nurses undergoing such problems to seek interventions. It can also encourage openness as it would reveal facts and easy approach. (Ewles & Simnet 2003,30.) Health care sectors can provide support to such activities.

3.1.3 Organisational development

The organizations supporting nursing staff can implement policies to promote the health of the staff. Currently work organisation is constantly modifying to meet different demands such as technology and workplace modernization. It is recognized that that some nurses perceive stress when trying to gaps all their work as well as learning to acquire technology skills.

Nurses who perceive stress due to technology development can report the issues not necessarily to employers but to the right authorities as it can sometimes be sensitive. There are some organizations that take care of workers well-being where nurses can report issues that influence their performance. A good example is, The European Foundation for the Improvement of Living and Working

Conditions (Eurofound's) that deals with development. The organization supports jobs separation into the following categories: active, passive, high and low strain to reduce intensification of work which can be stressful. It emphasizes work autonomy and work intensity as crucial factors and raises a concern to workers regarding their pace of work and job content. (Eurofound's, 2010.)

3.1.4 Health education programmes

Voluntary health education programmes providing prearranged opportunities to people to change conducts and promote health. The programmes can embolden people to join voluntarily. For example, The Health Workforce Education and Production (HEP) team tries to develop and support the implementation of policies and strategies that aim to increase the relevance, quality and capacity of the health workforce through education and training. (WHO 2011; Ewles & Simnet 2003, 30-31.)

HEP also act as a tool in the strengthening of institutions and faculties to educate and train a skilled health workforce; promote investments to improve educational infrastructure as well as devising mechanisms for improving access to educational materials and technologies. Moreover, it has enhanced national capacities to respond to the health needs of countries through quality education and training, and well-regulated practice Nurses experiencing occupational stress due to changes can chose to further their educations as it would increase their knowledge and skills. (WHO 2011.)

3.1.5 Economic and regulatory activities

The frame work refers to political and educational activities directed to policy makers, politicians and planners. The activities involve implementation of legislative changes and also press voluntary codes of practice. A current example is the American Cancer Society and a coalition of medical, public health and education which aim to offer a chance to tobacco producers by raising revenue for education and save lives and health care costs. At the same time, it could close an excuse of cigarette brands from flooding. The vote could acquire a chance and

raise cigarette taxes, fund education and tobacco prevention (Campaign for tobacco- free kids 2011.) The OHC can obtain similar example and refer nurses for services such as rehabilitation, further educational institutions not necessarily related to their occupations but to improve on their well-being at work. (Ewles & Simnet 2003, 30.)

3.1.6 Environmental health issues

Provision of healthy environment which is conducive to health is an important issue for health promotion. There are guidelines that emphasize working environment to recognize the cause disease and encourages better management of our environment. A number of researchers have identified environment to have negative effect on health. It is commonly due to exposures to physical, chemical and biological risk factors. Nurses have the right to work in an appropriate environment. In cases with problematic occupational conditions, nurses are required to request for changes. (WHO 2011.)

3.1.7 Healthy public policy

The framework refers to development of changes in condition of living by implication of policies for example, equal leisure opportunities. Individuals hold various interests and talents. People may lack knowledge and skills to practice or have the ability to reach to the healthy living conditions due to financial issues. Establishment of different leisure activities that suit individuals can be a motivating factor. This can balance the strain at work and provide nursing staff the opportunity to promote health. (Ewles & Simnet 2003, 30.)

3.2 Health promotion approach
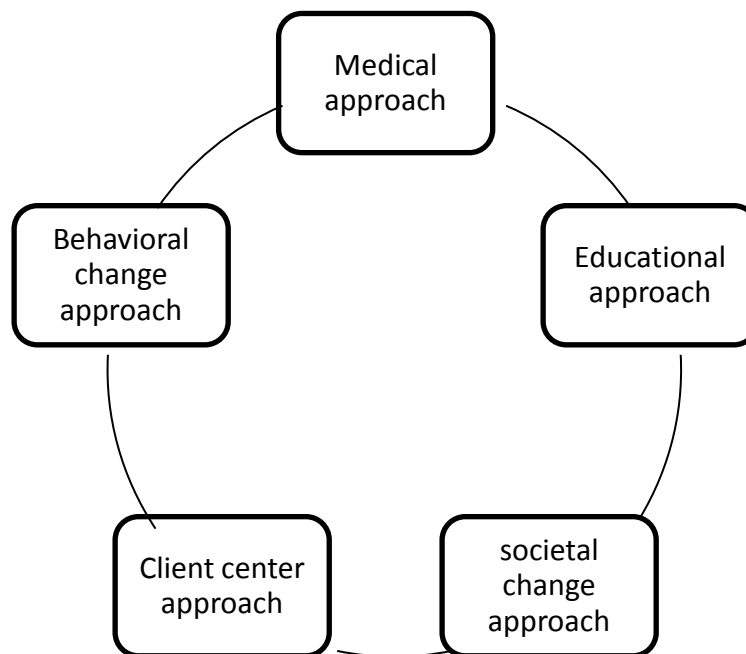
Graph 2. Health approaches frame work. (Ewles & Simnet 2003 43-44)

Figure 2 elaborates further possibilities that can be effective. The medical approach signifies the freedom from ailment and ill health. Nurses can approach medical treatment procedures in case of susceptibility of occupational stress. Nurses require compliance with preventive procedure. (Ewles & Simnet 2003, 43-44.)

Behavioral change in the chain aims at the individual being free from diseases by use of attitude to encourage acceptance of healthy life styles. The important value in the change of behavior is to observe health values as recognized by health. (Ewles & Simnet 2003, 43-44)

The educational approach aims at benefaction of individuals with knowledge and understanding to facilitate to well-informed decisions. For example, the risk factors on health. It observes individuals rights contrariwise clients benefit in issues, choices are empowered by own identity. Therefore, health promoters need to identify educational content. (Ewles and Simnet 2003, 43-44)

4 RESEARCH TASKS

The goal of this study was to identify interventions to manage the occupational stress among the nurses. The study aimed to promote the health of nurses and offer nursing students opportunities to learn interventions for stress management. There is a limited balance of stress management approaches that are appropriate for health promotion practices; in view of occupational stress intervention. The following question was reviewed in this study through a systematic literature study: What were appropriate interventions for occupational stress management among the nurses?

5 SYSTEMATIC REVIEW OF LITERATURE

This study was a literature review that identified appropriate interventions for occupational stress management among the nurses. This method was chosen as it identified interventions from a wider perspective which has been approached and proved effective.

The method avoids appearance of results from a particular area. Systematic review aims at reaching to the conclusions of specific issues by means of collecting and analysing the findings of the review studies. The review requires prescribed criteria of the review process. This study included explicit and detailed description of review process. (Brown 2008, 198.) The diagram below illustrates the review process.
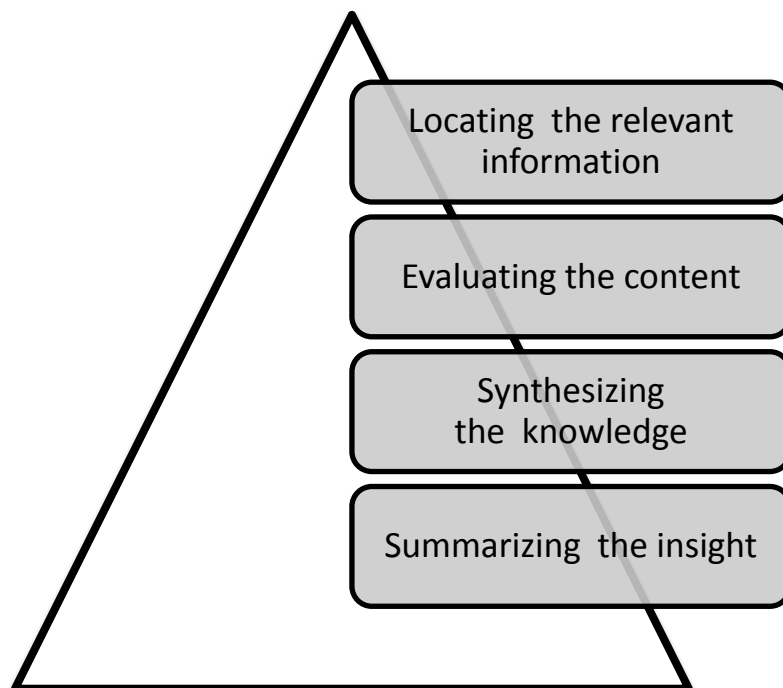
Graph 3. Review process.

5.1 Search strategy

The preliminary search for appropriate stress interventions encountered many studies located in the SCIENCE DIRECT, OVID, EBSCO, SAGE and CINAHL. Key words such as nursing, occupational stress, nurses and stress management were utilized for search. These studies revealed definitions of stress and the cause of stressful working environment among the nurses. The results were obtained in large numerals and therefore, limited by year from 2005 to the current year 2011.

The study also viewed into some bodies that support health promotion activities. Such bodies included WHO (2011); ECOWA (2008) and Kela (2010). Campaign for tobacco- free kids, Eurofound`s, HEP and others provided examples in theoretical background as well as explaining the performance of the health promotion activities.

In the review process, two of the data bases did not produce additional studies. The first 100 abstracts were identified and screened and only 30 of the 100 abstracts revealed interventions for stress management. Most of the articles and books could be obtained from the library services. The study selected only 20 of the articles in the review and left 10 articles because the evaluation provided similarities. Three of the ten studies that were excluded focused on similar interventions directed to organizations and the other seven articles focused on individual interventions.

There were comparative studies between different nursing settings and nationalities. For example, Pisanti et al. (2011) compared job characteristics, organizational conditions, distress and well-being of nurses from two nationalities. The other studies focused on different settings and categories of nurses (registered nurses and practical nurses working in hospitals and health care centres. (Sundin et al. 2008; Lewis et al. 2010; McElligot et al. 2009 & Verhaeghe et al. 2008.)

Table1. The review process of the study.

Author, Year, country	Purpose and method	Findings	intervention
Kravatis et al.2008 USA	To develop and evaluate a psycho-educational program to assist nurses develop stress management plans	Programme was useful in impacting emotional and exhaustions levels.	Psycho-educational Programme to assist self-care
Mc Elligott et al. 2009 USA	To study health promoting lifestyle behaviours of nurses from acute care units by using health promotion model	Holistic care intervention was crucial to support self-care	Holistic wellness programme (use of educational / experimental classes) Individualized unit-based activities
Pisanti et al. 2011 Netherland and Italy	Comparison of job characteristics and organizational conditions as well as reactions of strain among 609 Italian nurses and 873 Dutch nurses through the assessment of Job-Control-Support model and Tripod accident causation model.	Organizational conditions added significance to the prediction of job satisfaction and burn out in the Italian nurses than the Dutch nurses.	Organized conditions and job characteristics
Orly et al. 2011 Israel	Effectiveness of Cognitive interventions to on nurses wellbeing through the use of cognitive-behavioural courses to 20 nurses	The behavioural component of Cognitive behavioural intervention increased nurses ability to modify psychophysiological excitatory reactions related to job stress.	Cognitive behavioural intervention
Verhaeghe et al. 2008 Belgium	The study focused on the negative appraisal of recurrent changes and examined the	There was an evidence for controlling effects for supervisors support; timing and	Specific management behaviours

	job resources and their relations to distress among 7863 registered nurses. The study used a general linear modelling to test controlling effects through self-administered questionnaire.	method control. It was in relation to negative appraisal of change and distress among nurses in the ICU and the non-ICU setting.	
Sundin et al. 2007 Sweden	Develop and psychometrically evaluate a new job demand scale and further analyse the relationship between job demand scale and the dimensions in the job-demand control-support method. A questionnaire was administered to 795 registered nurses and 527 assistant nurses	The results of the scale looked promising but needs further assessment.	Use of job-demand scale.
Lewis et al. 2010 United Kingdom	To identify specific management behaviours associated with interventions for stress management and develop competency framework to be integrated and compared with nursing function. A semi-structured interview	Identification 19 Competencies associated with reduction and prevention of work place stress with both positive and negative impact.	Use of competency approach

5.2 Data analysis

Data analysis consists of data organization, management and evaluation after collection and conclusions drawn that relate to the research question. The process of analysing transforms data into new understandings. The study used concept analysis and constant comparative analysis. Concept analysis is applied to content of document whereby the content of the text is examined for particular concept and categories apparent in the data. (Holloway 2008, 46-50.)

Currently, content analysis is broad and ideas have become less restrictive. The analysis process proceeded beyond surface themes and appearance underlying the phenomena. This study demonstrated the significances by providing examples from the data. The study acquired constant comparative analysis where iterative steps were taken and continuous comparison of sections was done. The data was examined for differences as well as similarities. (Holloway 2008, 46-50.)

Table 2. Illustrates the data analysis process.

Interventions for stress management	Features
Psycho-educational Programme to assist self-care	1. Wellness plan with guided exercises 2. Relaxation techniques (Promotion of physical, emotional, spiritual, mental and social wellbeing.)
Holistic wellness programme (use of educational / experimental classes) Individualized unit-based activities	1. Educational classes to teach holistic care 2. Use of books, journals, conferences and certification programmes 3. Massage programme 4. Gyms
Organized conditions and job characteristics	1. Financial reward 2. Personnel resources 3. Work agreements 4. Material resources 5. Supervisors support
Cognitive behavioural intervention (CBI)	1. Physical element emphasising relaxation through breathing exercises 2. Autogenic training 3. Progressive muscle training
Specific management behaviours	1. Training supervisors. 2. Enhancement of bottom-up communication within the organization. 3. Implementations of autonomous team.

	4. Provision of training possibilities.
Use of job-demand scale	Scale with different dimensions for physical, social, emotional and spiritual.
Use of competency approach	Stress management competency framework with clear specification of behaviours required in the organization.

6 FINDINGS

6.1 Psycho-educational: Programme to assist self-care

Self-care plans aims at promoting the individual`s physical, emotional, spiritual, mental and social wellbeing. Kravits et al. (2010), mentioned that wellness plan with guided exercises and outline various activity would have an impact on individual's wellbeing. The theoretical background identified community based work such as campaigns. The nursing community can campaign   for the use of wellness plan among nurses. It can motivate individuals and even create awareness of the self-care plan. The table below illustrates example of the activities that can be included in the wellness plan.

Table 3.Illustrates components of a wellness plan adapted from Kravits et al 2010

Physical	Emotional	Spiritual	Mental	Social
Yoga or Stretching Biking or Jogging Healthy lifestyle Massage Deep breathing	Deep breathing Talk to friends Hobbies Positive feelings Diary	Saying prayer Going to church Meditation Inspirational reading Reflection	Affirmations Reading Learning Distractions Positive intentions	Family or /Friends Activities Couple time Concerts Personal time

The activities illustrated in the table above can vary from one person to another. In Kravits et al. (2010), the strategies showed variation from one participant to another. Some categories scored higher marks compared to others. It is therefore advisable for nurses to select whatever fits them better.

6.2 Holistic wellness programme

The study mentioned the use of books, journals, conferences and certification programs to teach self-wellness in nursing. Mc Elligott et al. (2009) emphasised the affordability and focusing to nursing practice. Massage was also mentioned as effective intervention on nurses as it revealed reduction of anxiety and increase self-awareness as well as the need self-care. According to Mc Elligott et al. (2009), previous studies revealed limited evidence of effective intervention but massage was recognized to be effective. There was need to develop employees wellness program as well as focusing on removal of environmental barriers. The study also mentioned the offer of benefits such as discounts. (Mc Elligott et al. 2009.)

The theoretical background identified preventive health services where by occupational health centres can integrate the intervention. The health promoters can offer nurses experiencing occupational stress with educational courses and experimental courses. It is the role of the individual nurses to contact the centres. Moreover, institutions providing reimbursement such as Kela can reimburse for the cost of the massage and cost of attending the educational classes. (Ewles & Simnet 2003, 30.)

6.3 Organized conditions and job characteristics

Low support from supervisors was revealed as a stressing factor. It is advisable for managers to use the competency approach behavioural method at work as it can have an impact for the stress management process. However, there is a need for the nurses to implement the method in a stress-free way; nurses' managers are also among the nursing community they as well experience occupational stress. Use of educational approach to all other approaches in the nursing studies would ensure competency among the nurses. Behavioural approach was suggested to enable individuals to free from diseases by use of attitude and adapt to new lifestyles. (Ewles & Simnet 2003, 30.)

6.4 Cognitive behavioural intervention

The participants in the study of Orly et al. (2011) learned to transform from physical over-excitation to relaxation. The findings showed a positive figure with CBI. The study was conducted in a small sample size. However, it was revealed that CBI had beneficial effects on nurse's well-being. The study suggested the need to examine the effect of CBI in larger groups of nurses. It has pointed out that the need to examine the positive psychological effects of CBI on nurses. CBI can also regulate emotional and cognitive stress symptoms at work. (Orly et al. 2011.)

Nurses can be offered opportunities to attend the gymnasiums by considering various factors. For example, variety of activities suit perfectly individual nurses as well as capability the affordability of the cost of the gymnasium. There is need to view the positive impact to nurses such health gain. It was revealed that reduction of occupational stress leads to lowering the cost of treating illnesses associated with stress. The healthy public section by Ewles & Simnet (2003) explained the need of developing changes in living conditions. The establishment of various activities can assist nurses to select from a wide categories or even interchanging the various activities. (Ewles et al. 2003, 30 and Orly et al.2011.)

6.5 Specific management behaviours

This was mostly directed to the administrators. The study emphasized on the training of supervisors in matters such as provision of feedback and supporting coaching of new employees. The need of communication in the organization was seen as crucial therefore bottom up communication was encouraged. Moreover, the provision of training possibilities was encouraged as nurses would acquire new knowledge and skills. (Verhaeghe et al. 2008.)

Nurses experiencing occupational stress can be offered opportunities to undergo rehabilitations or to further their educations. The supervisors can support the employees to be provided with contact to educational institutions or even organise

for the educational programmes close to the work. Nurses can be encouraged to join the programmes voluntarily. (Ewles & Simnet2003 & Verhaeghe et al. 2008.)

6.6 Use of job-demand scale

The use of a scale for measuring specific job demands was also one of the interventions reviewed. A study that aimed at developing psychometrical evaluation of new job demands that grasped specific job demands within health care work. The study revealed strong relationship between Job Demands and Support, Control and model JDC(S). (Sundin et al. 2008.)

It examined the effectiveness of JDC(S) in psychological job demand that is useful to nurses. Sundin et al. 2008 study revealed JDC(S) as one of the most commonly used in occupational stress mode. This study provides a good example of a valid and tangible instrument because it distinguishes specific job demands. The nursing occupation can gain knowledge of possible stressor through JDC(S). (Sundin et al. 2008.)

The results supported the positive outcomes of this study by showing satisfactory psychometric properties and the scale was promising. The JDC (S) was revealed as a good tool to nurses through a client-centre approach. It can ensure respecting the clients rights even encourage working with client's terms as they are the ones to benefit in certain issues. (Sundin et al. 2008 & Ewles et al. 2003, 33.)

6.7 Use of competency approach

The use of competency approach is mentioned as an intervention that involved the use of competency to identify effective behaviours for the management of occupational stress. Pisanti et al. (2011), focused on stress management and leadership. The study emphasized on administrators to recognize their vital role in the management of occupational stress. Moreover the study revealed leadership style to have a link with physical and psychological wellness. (Pisanti et al. 2011.)

The authors of the study suggested the provision of adequate staffing and training possibilities, enhancement of bottom up communication and employment of autonomous groups of employers. (Pisanti et al. 2011). In another study, it was shown that leaders are required to have management frameworks to obtain feedbacks in their work. Feedbacks can deliver strong behaviours that leaders can apply in their work and reduce stress as well as effectively maintain nurses. (Lewis et al. 2010.)

7 VALIDITY AND RELIABILITY

The research process retrieved information from either primary or secondary sources. The primary source contains unrevised data whereas the secondary source is vice-versa. Primary sources are valued more during research process whereas the secondary sources are still valued but considered as summaries of the primary sources. This study collected data from primary sources (qualitative studies) and used the secondary sources (literature books and databases) to ensure reliability and validity. (Burn & Grove 2007, 74-75.)

The authenticity and accuracy of the two sources were determined by developing two strategies (external and internal). The external criticism determined the validity of the data by considering the year of publication and reference. The internal criticism determined the reliability by checking on possible biases. Moreover, proper understandings of the information bearing were ensured considering the fact that the word and meaning change across time and culture. (Grove, 2007, 74-75.)

8 ETHICS OF THE RESEARCH

Ethics the research are crucial for all research studies. The authors are required to avoid violation subject rights or involvement of scientific conducts. In recent research, the following scientific misconduct has been identified; "forging of data, dishonest manipulation study methods with protocol violations, misinterpretation of findings, plagiarism and forgery." This study ensured the absence of scientific misconduct. The study included all the information concerning the data collection process in one of the section. In addition, a qualified librarian assisted in the process before reviewing the materials and permission was granted to carry on the research by a member of the university review board. (Burns et al. 2007, 237.)

9 DISCUSSION OF THE FINDINGS

The findings of the research indicated that the interventions for stress management vary with the nursing settings. Moreover, organizational issues play as key determinants for change. Administrators can encourage the nurses to carry out the interventions. Nevertheless, support can be offered to nurses who attempt to proceeds to the steps of the interventions.

In most of the studies, the interventions showed similarities.The educational approach such as psycho-educational program and art therapy that involved relaxation training as intervention was encouraged. The programmes proved to be successful for nurses working under stressful areas. Another example is the program on wellness plan. Documents were used as strategy to practice positive Self-Care (SC). The studies also revealed theoretical domains to be useful as a guide of positive self-care practice. (Kravits et al. 2010.)

The physical, emotional, spiritual, mental and social activities were identified to provide nurses the energy to enhance their profession and practice. One study assured positive results through the combination of psycho-educational intervention and discussion of specific risk factors. There were interrelations in some of the findings. Researchers emphasized on behavioural change approach. Most of the studies recommended the administrators to recognize their vital role in the management of occupational stress. However, the study revealed leadership style to have a link with physical and psychological wellness. (Pisanti et al. 2011.)

The authors of the studies suggested provision of adequate staffing and training possibilities, enhancement of bottom up communication and implementation of autonomous teams as an effective intervention for stress management (Pisanti et al. 2011). The other study showed that leaders are required to have management frameworks to provide feedbacks in their work. Feedback is crucial due to provision of clear behaviours that leaders can apply in their work and reduce stress and effectively maintain nurses. (Lewis et al. 2010.)

Cognitive-Behavioural Intervention (CBI) is identified by Orly et al. (2011) through a study that investigates effects of CBI on mode state of nurses and stress perceived. CBI focuses on physical element that emphasise relaxation through breathing as well balanced perspectives of events. This study focuses on mood as a factor that can influence personality resources. CBI focused on cognitive elements and provided information about possible reactions to stress. (Orly et al. 2011.)

CBI had beneficial effects on nurse's well-being. This particular study supported the need to examine the effect of CBI in larger groups of nurses. It has pointed out the need to examine the positive psychological effects of CBI on nurses. CBI can also control emotional and cognitive stress symptoms at work. (Orly et al. 2011.)

Some interventions have been realized as effective but others could not succeed with the process of stress management. Most of the studies recognized factors such as contributed to occupational stress but did not specify approaches to those problems. However, some studies revealed the need to address actual issues with suitable and possible interventions. (Pisanti et al. 2011; Kravits et al. 2010; Verhaeghe et al. 2008 & Lewis et al. 2010.)

 The CBI process requires all the individuals concerned to be involved while ensuring compliance. There is need to recognize these groups of people that would help in the stress management. The theoretical framework of this study revealed the need of identifying a problem and persons as well as bodies concerned with the problem. (Orly et al. 2011.)

In the previous study, the challenges encountered by the nurses were identified as the cause of unbalance in their daily work. This proved unbalance between motivation and work. The study revealed that patient remains under the risk of prolonged illness whereas the risks are associated with poor quality of care and directed to individual nurses. (Hallin and Danielson 2007).This is also a continuous process that can enlarge with time. There is need to identify motivating factors for nurses.

CBI as identified by Orly et al. 2011), included physical elements that emphasise relaxation and requires breathing as well as balanced perspectives to be motivating factors. In the current health care settings, there are a group of experts such as physiotherapists who are experts in these activities. The existence of physiotherapist can be seen to have led to existence of various gymnasiums. The use of gymnasium can be motivating factors for nurses.

Nurses can be offered opportunities to attend the gymnasiums by considering various factors. For example, there should be a variety of activities to suit all the individual nurses since not all the nurses would be capable to afford the cost of the gymnasium.

ECOWA (2010) is a good example of an organization that looks into job characteristics all round Europe and provide reports concerning many aspects of occupations. For example, it recognizes Finland to have active interventions in occupational health. It created the idea of occupational health services which is very useful in Finland and has enabled many companies to save cost that would be incurred to treat accidents and facilitated to the employment of many workers.

The formation of similar bodies that stand for stress management in nursing, as well as recording reports of new ideas that emerge from researchers such as effective methods and effectiveness of these methods would support the process of stress management. Moreover, it would provide opportunities to nursing institutions to implement the methods to students then encourage the process in field of studies. This can be a useful invention to enact in the early stage before the involvement in the occupational stress. This method has been implemented in other processes and it is recognized as an early intervention approach. (Wilson et al. 2010.)

10 CONCLUSIONS AND DISCUSSION

Stress management in the work place is revealed as an important issue for the nursing profession. Furthermore, strategies were identified most of the studies. The results of studies did not prove the appropriate stress management strategies for specific job demands. There is need to address actual issues with appropriate and potential interventions. Few studies discovered positive results. These findings support nurses to apply the strategies to meet job demands with the positive outcome as well as health promoters provide the opportunity to approach interventions. (Lewis et al. 2010; Mc Elligot et al. 2009 & Verhaeghe et al. 2008.)

Nurses can provide opportunities to approach their managers when they have problems. Management team should introduce methods that would create opportunities for this approach as well as have an appropriate approach to the problem. Most of the studies discussed competency approach, behavioural and psycho-intervention examples of the methods as an important issue for managers. These methods do not need to be specifically used by management they can also be used by nurses in the management of stress.

Health promoters need to be aware of all the aspects required in their area of specialization. For example, occupational stress management interventions are the important aspects of this study. There is need to recognize the reason, approaches, resources and results. Research has been carried out and identified majority of these aspects. There is need to follow- up and analyse the results.

The use of new methods that are recognized in the research would be useful aspects of stress management. As an example, there is need of reviewing more literature to identify such methods to enable recognition and the use of the methods. Management is defined by the Oxford University Press dictionaries (2011) as being effective and efficient at work and efficiency is about achieving results compared with other ways that lead to achievement.

There is need to follow-up among the nurses when they report stress at work in order to succeed with the stress management process. For example, in case of reference of nurses to experts, there is need to follow up the well-being at work, and investigate stressing factors.

This study consumed more time and efforts than anticipated at the beginning. The process of the review revealed the importance of balancing time for all the step of the research. The review process assisted in development of professional skills of carrying out a research. Moreover, the researcher became aware of access to the data for future research. The systematic review was advantageous since findings appeared from a wider perspective. The figure below consists of issues that future researchers can investigate when tackling the same topic.
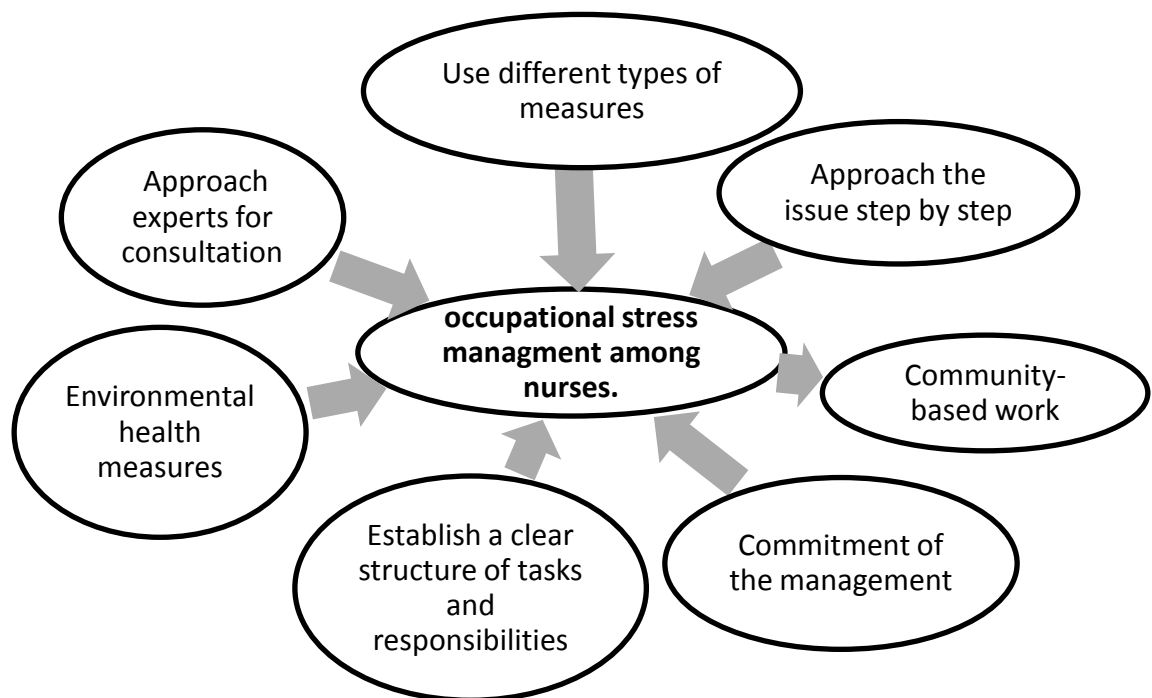
Graph 3. Issues relating to interventions for stress management among nurse.

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