



Managing Stress: A Guide for Healthcare Professionals

Contact Hours: 2

First Published: January 6, 2012

Course Revised: March 31, 2018

Course Expires: March 31, 2021

Copyright© 2015 by RN.com
All Rights Reserved

Reproduction and distribution of these materials is prohibited without an
RN.com content licensing agreement.

Acknowledgments

RN.com acknowledges the valuable contributions of...

Elizabeth Sheldon MSN, RN, CPNP, PCNS, CPHON

Conflict of Interest and Commercial Support

RN.com strives to present content in a fair and unbiased manner at all times and has a full and fair disclosure policy that requires course faculty to declare any real or apparent commercial affiliation related to the content of this presentation. Note: Conflict of interest is defined by ANCC as a situation in which an individual has an opportunity to affect educational content about products or services of a commercial interest with which he/she has a financial relationship.

The author of this course does not have any conflict of interest to declare.

The planners of the educational activity have no conflicts of interest to disclose.

There is no commercial support being used for this course.

Purpose

The purpose of *Stress Relief for the Healthcare Professional* is to provide up-to-date information about stress, the stress response, stress prevention, and stress management. The course presents research and recommendations specific to the healthcare setting and proven techniques to prevent and relieve stress.

Healthcare professionals can use the information to manage their own stress more effectively and prevent burnout. Stress and burnout are reported by 25-33% of nurses and contribute to job dissatisfaction, turnover, and poorer quality of patient care provided (Deible, et al., 2015). Healthcare professionals are at risk for burnout because of the rapidly changing healthcare environment and the physical and psychological stressors that they face in their work that require adequate coping skills. Healthcare professionals can also use the information to assist patients and their families in managing stress more effectively.

Learning Objectives

After successful completion of this course, you will be able to:

- Explain the physiological response to stress and the physical effects of sustained stress.
- Identify physical, behavioral, emotional, and cognitive signs and symptoms of the stress response.
- Identify implications of gender, age, generation, and workplace upon stress and stress responses.
- Describe organizational and worker-focused strategies to improve stress management in the healthcare setting.
- Identify general categories of stress prevention and relief strategies and give examples within each category.

What is Stress?

Stress is “an automatic physical response to any stimulus that requires you to adjust to change” (Benson & Casey, 2013, p.2).

Since the healthcare environment requires healthcare professionals to adjust to change continuously, stress permeates the life of the healthcare professional.

Threats and perceived threats function as stressors and set off the stress response.

The Physical Response to Stress

The body responds to stressors first with a signal from the motor cortex in the brain via nerve pathways which tenses and tightens muscles. The hypothalamus in the brain releases adrenocorticotropic hormone (ACTH) into the bloodstream which targets the adrenal glands and the sympathetic nervous system, causing secretion of epinephrine (adrenaline), norepinephrine, and cortisol (Benson & Casey, 2013).

The adrenals secrete norepinephrine (noradrenalin) and cortisol, causing the heart rate and respiratory rate to increase. Senses sharpen, muscles tighten, glucose, and fats are released into the bloodstream. Non-essential functions such as digestion, tissue growth and repair, and sexual arousal are inhibited, to direct energy toward responding to the threat. Blood clots more readily as a protection against bleeding from injury in the “fight” and immune system activity increases.

The sympathetic nervous system also releases epinephrine and norepinephrine at nerve endings throughout the body. As a result, the respiratory rate, blood pressure, and heart rate are again stimulated, and peripheral blood vessels and bronchioles constrict. Symptoms such as jaw clenching, neck and shoulder tightness, headaches can be related to this response.

The hypothalamus, pituitary, and adrenals are known as the HPA axis. The HPA axis regulates hormonal activities in the body and acts as a feedback loop to turn off the stress response when stress hormones reach high levels (Benson & Casey, 2013). The release of stress hormones can have lasting effects. Cortisol secretion decreases the numbers of natural killer cells in the immune system, making the person more vulnerable to infections, while catecholamines increase pro-inflammatory cytokines which have been associated with cardiovascular disease, diabetes mellitus, inflammatory and autoimmune diseases, and depression (Mayor, 2015).

Restoring Calm after Stress

The parasympathetic nervous system calms the body and restores homeostasis after the threat passes. However, some threats, such as ongoing worries, concerns, and conflicts linger, and no release occurs, so that the physical effects of stress persist and increase.

Persistent stress has damaging effects, including depletion of the immune system, and can lead to many disease conditions.

Test Yourself

In response to triggering the sympathetic nervous system, physical symptoms of stress appear.

- A. True
- B. False

Effects of Prolonged Stress

When the stress response continues unrelieved, harmful effects ensue (Benson & Casey, 2013). Research findings show relationships between prolonged stress and many health problems, including:

Allergic skin reactions	Infectious diseases, such as colds or Herpes
Anxiety and Nervousness	Infertility
Arthritis	Insomnia and Fatigue
Constipation	Irritable bowel syndrome
Cough	Menopausal symptoms, such as hot flashes
Depression	“Morning sickness,” the nausea and vomiting of pregnancy
Diabetes	Pain of any sort, including backaches, headaches, abdominal pain, and chronic pain caused by many conditions
Dizziness	Postoperative swelling
Gum Disease	Premenstrual syndrome
Headaches	Side effects of AIDS
Heart problems, such as angina, heart attack, arrhythmias, and palpitations	Side effects of cancer and cancer treatments
Heartburn	Slow wound healing
Hypertension	Ulcers

Stress and Disease

Stress is implicated in the development of heart disease and stroke, the number one and number four causes of death in the U.S. (CDC, 2017; CDC, 2018). High levels of stress may speed the aging process and stress can create a greater risk for heart attack than the risk associated with hypertension, abdominal obesity, or diabetes. (Benson & Casey, 2013). Also, hypertension, cancer, immune disorders, asthma, gastrointestinal disorders, depression and anxiety have been correlated with chronic stress. Stress relief measures may have positive impact in the management of these conditions (Benson & Casey, 2013; NCCIH, 2016).

- Cardiovascular disease, including hypertension: relaxation techniques may have short-term effects on high blood pressure
- Gastrointestinal disorders, including irritable bowel syndrome and peptic ulcers: mindfulness training and cognitive-behavioral therapy may decrease symptoms
- Anxiety and Depression: relaxation techniques may have some benefit, however those diagnosed with generalized anxiety or depression may benefit more from cognitive-behavioral techniques
- Immune function: the relaxation response can temporarily turn off genes in charge of the inflammatory response.
- Asthma: attacks can be exacerbated during the stress response; a small study adding yoga and stress management, decreased medication use, and improved exercise tolerance

The degree of stress each gender experiences affects their physical and mental health, with women being more affected by stress than men. The sequelae of a higher incidence of stress in women includes a higher rate of morbidity despite a longer life expectancy (Mayor, 2015). Women have more missed days of work due to illness, higher incidence of hospital admissions, and higher health care costs, even after removing reproductive care (Mayor, 2015).

Think About It

You are heading into a patient's room when your manager comes down the hall. You think she sees you, but she doesn't acknowledge you or say, "Good Morning." Now you are wondering if she thinks you're not doing a very good job, or if she might be planning to deny your vacation request.

What do you usually do if you perceive that someone has a negative opinion about you? Have your approaches been helpful in the past? Before reading the suggestions below, think about how you can avoid stress in this situation.

- Are you jumping to conclusions or feeling insecure for other reasons? Maybe she's just preoccupied. You could have said "Good Morning" first.
- What's her usual pattern – does she usually let you know if there's a problem, or if she thinks you've done a good job?
- Let go of this worry and make a plan to address her about it directly if you think there is a need. When should you expect to get approval for your vacation request?
- If other incidents occur that give you a continuing impression that your manager has a negative assessment of your work, you should plan to share your perceptions with her.

Stress at the Cellular Level

The study of stress at the cellular level is in its infancy. Early findings show that when chronic stress continuously activates cellular responses, a transition occurs that reduces the buffering capacity at the cellular level, creating increased health risks (McVicar, Ravalier, & Greenwood, 2014).

Psychosocial job stress was shown to adversely affect the level of some immunological biomarkers in female nurses (Yoon, Lee, & Kang, 2014).

Relaxation techniques temporarily alter the function of specific genes in beneficial ways (Benson & Casey, 2013):

- Inhibition of genes which activate chronic inflammatory responses and contribute to heart disease, inflammatory bowel disease, immune response, and other conditions.
- Activation of genes which regulate use of energy, release of insulin, maintenance of telomeres which protect against cell aging and death, and enhanced function of mitochondria which may help the body combat oxidative stress that harms cells.

Test Yourself

Recent research findings indicate that specific genes are:

- A. Created by the stress response.
- B. Altered in beneficial ways by relaxation.**
- C. Targeted by stress-relieving medications.

Good and Bad Stress?

Stress may not always be harmful to our bodies, and in fact sometimes can be beneficial. If you come across a situation that puts you in physical danger, a surge of epinephrine can help you escape from or respond to a natural disaster or a traumatic event in ways you did not see possible (Benson & Casey, 2013). Even daily tasks like meeting a deadline for an assignment, working on a difficult task or balancing a busy schedule can benefit from the stress response by

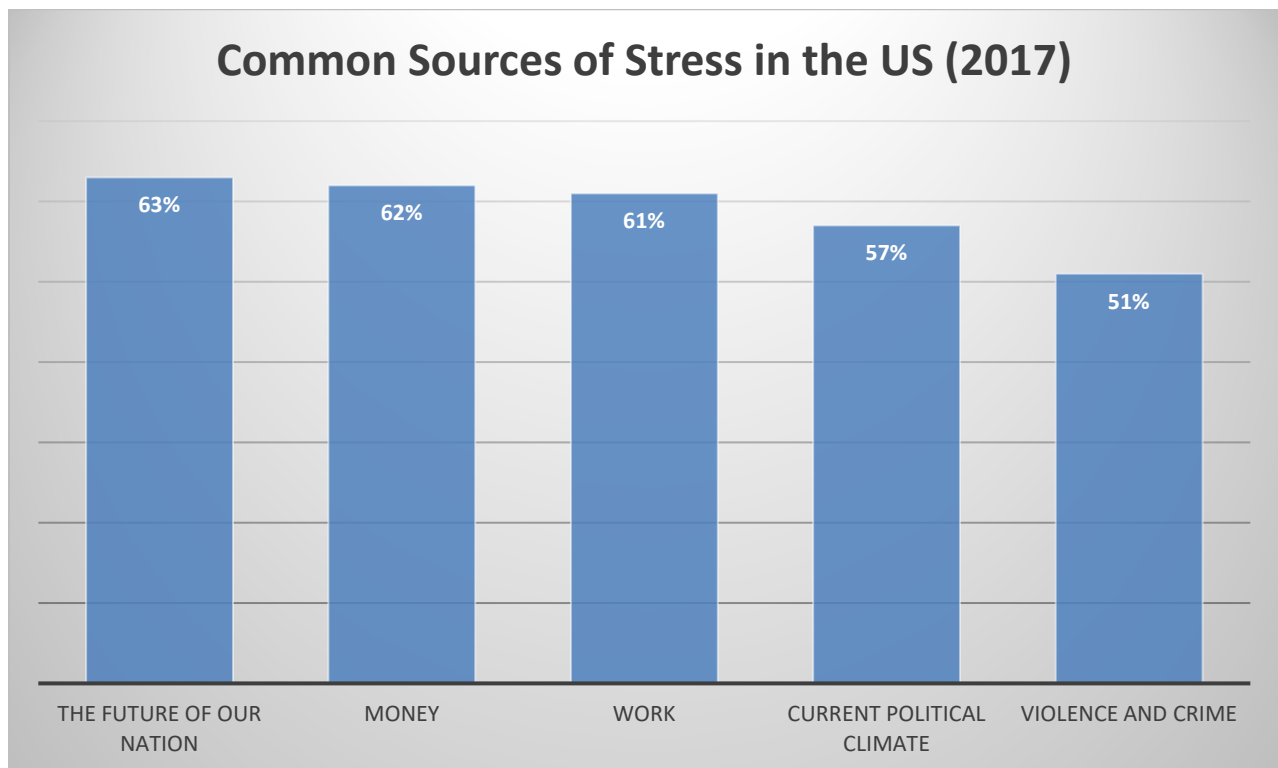
increasing performance and efficiency, though there is a balance that may be tipped between good and bad stress (Benson & Casey, 2013).

Chronic or excessive amounts of stress can wear us down and decrease our ability to cope. If we cross this line into chronic stress, our performance significantly declines. This line is different for everyone, and some people seem more vulnerable to stress, while others may thrive in a similar situation.

Characteristics of people who are more adaptable to stressful situations include: those who engage in regular exercise, have a social support network, have a sense of control and commitment to overcoming stressful situations, and see the stressful event as a challenge instead of a threat. These people also report fewer illnesses and fewer missed days of work (Benson & Casey, 2013).

Top Stressors

The American Psychological Association (APA) conducts an annual *Stress in America*TM survey. The 2017 survey identified top stressors among U.S. adults:



(adapted from APA, 2017)

Test Yourself

The 2017 APA survey found that the largest percentage of respondents were stressed by issues related to:

- A. The future of our nation**
- B. Money
- C. Violence and Crime

The Cost of Stress

The World Health Organization has called stress the “Health Epidemic of the 21st Century.” Estimates of the cost to American businesses approach \$300 billion per year (Fink, 2016). Costs included financial effects of reductions in operating effectiveness, poor decision-making, medical expenses, absenteeism, and attrition resulting from stress.

Within the healthcare arena, costs might run even higher than in other sectors, considering the many sources of stress, the increased expense of replacing staff, and the high cost of medical errors.

Think About It

You believe that the new staffing plan is impossible. You used to have three RNs scheduled for the number of high acuity patients you have this evening. You feel really defeated and cannot understand how you can be expected to care for the patients with only one other RN.

How have you addressed staffing situations in the past? Were these approaches effective? Before reading the suggestions below, think about how you can avoid stress in this situation:

- Detach yourself from the emotional component. Analyze the situation: what are the needs of the patients?
- What is your professional role in this situation? Your professional responsibility is to provide safe and effective care. Is it an unreasonable expectation that you and your fellow RN will provide care safely and effectively with whatever LPN or UAP (Unlicensed Assistive Personal) assistance you have available? If you cannot make a workable, safe plan with the staff currently on the unit, collaborate with your supervisor. Ask for exactly what you need in terms of the work to be performed (i.e., not “another RN” but “a safe way to monitor these three post-operative patients”). Perhaps the supervisor will float staff to your unit, suggest moving patients, or make other suggestions. But your first action is to determine exactly what you need.

- Whatever plan you put into effect, reflect on the results. Share your perceptions of the effectiveness of the plan with your supervisor. What, of anything, will you do differently next time?

Different Stressors, Different Responses: Gender and Stress

Men and women differ both in the major sources of stress in their lives and in their responses to stress (Mayor, 2015). Social and cultural conditioning and hormonal and other physical differences between males and females lead to different responses to stress. Women are more likely to engage in nurturing behavior, “tend to befriend.” Men often respond with aggression and hostility, (Benson & Casey, 2013).

Since 2007, The American Psychological Association has conducted an annual *Stress in America* Survey. The most recent survey in 2017, revealed that women report a higher level of stress compared to men, which has been a consistent result over previous surveys; however this survey demonstrated the gap is widening. The average woman’s stress level increased, while the average man’s stress level decreased in 2017.

Results from the 2014 APA survey:

- Women reported more signs and symptoms of stress compared to men, including:
 - Having a lack of interest, motivation or energy
 - Feeling overwhelmed
 - Experiencing fatigue
 - Being unable to control the important things in their lives very or fairly often
 - Being unable to cope with all the things that they had to do
- Women appeared to be more aware than men of the impact stress can have on their lives and physical and mental health.
- Women were more likely than men to say that a psychologist can help a great deal or a lot with stress management.
- Women were more likely than men to admit that they engage in unhealthy behaviors when dealing with stress, such as eating too much, eating unhealthy foods, or skipping meals.

Women and Stress

Research findings suggest that women are more likely than men to experience ongoing stress and a feeling of lack of control. Women reported that during the past five years, they had tried to reduce their stress levels more frequently than men reported. However, men more frequently reported having reduced their stress than did women (Benson & Casey, 2013).

For women, social responsibilities such as caregiving for children and other family members and managing the home are stressors. Stress is accentuated for women who work outside of the home in addition to home and family responsibilities, frequently referred to as the “second shift.” Although women tend not to experience an ongoing stress response to a particular stressor, they experience a greater overall number of stressful situations than men. One study of nurses who cared for a spouse who was disabled or chronically ill, had an increased risk of heart attack and coronary heart disease (Benson & Casey, 2013).

Men and Stress

For men, financial responsibilities produce stress more often than for women. Although men have shouldered more parenting responsibilities in recent years, one study found that men perceive their primary parenting responsibility to be as breadwinner and therefore they give priority to work and career (Benson & Casey, 2013, Shockley, et al., 2017).

In one study, men reacted more strongly to an argument with a child, financial difficulties, and work overload as compared with women who reacted more strongly to arguments with a spouse, transportation difficulties, and family demands (Benson & Casey, 2013).

Research has shown that masculinity is associated with improved physical and mental health, except in the diagnosis of coronary heart disease, which can explain why men have a shorter life expectancy. Masculine characteristics are less associated with anxiety, fatigue, and depression, but more associated with antisocial behavior and substance abuse (Mayor, 2015).

Masculine characteristics are not necessarily associated only with men, women can display these characteristics as well. These characteristics in women can be protective of their stress response, especially in the area of categorizing a stressor as a challenge or a threat.

Men, Women, and Workplace Stress

In the workplace, women are more frequently in clerical roles while men are more frequently in leadership roles. People in positions of power perceive themselves as having more control, and thus tend to experience less stress than people who do not feel they have control over their work environment (Mayor, 2015).

Common Sources of Workplace Stress
Low salary
Excessive workload
No opportunity for advancement
Lack of interest or challenge
Lack of social support
Lack of perceived control over decisions
Lack of clear expectations

New technologies, including cell phones and e-mail have grayed the line between work and leisure time (Benson & Casey, 2013). Although typically referred to as a women's issue, studies have shown that men and women have similar concerns regarding work-life balance, especially now with the increased number of dual-career parents (Shockley, et al., 2017).

Men are less comfortable discussing the issue due to concern for negative career repercussions, although may still be struggling with this conflict despite it not being acknowledged. Workplaces that support a positive, family-friendly culture are associated with improved performance and job satisfaction for both men and women (Wilson, et al., 2015).

Different Stressors, Different Responses: Age, Generation and Stress

According to the 2017 *Stress in America™* Survey, older adults (72 years old and above) have consistently had the lowest levels of stress compared to younger generations; although their stress levels rose by a higher rate than other generations in this survey (APA, 2017). As with each generation, older adults still do have their own unique stressors.

Older persons may experience the stressors of decreased physical abilities, declining health, and social isolation. Life events such as the death of a spouse or illness are more likely to affect adults with time. Even elderly persons who enjoy relatively good health have some diminished capabilities. Perceived threats, whether real or imagined, produce stress. Fear of falling is a valid concern of the elderly, since fall-related injuries often result in disability, moving to a long-term care facility, or even death.

In addition to health-related concerns, threats to self-esteem and financial security produce stress for elders.

Healthcare professionals themselves may not be affected by stressors that elderly persons experience. However, changing demographics create a situation in which more elderly persons become patients. And so, stress relief measures for older persons play a role in planning effective care.

Elderly persons may be at a disadvantage in managing stress because stress relief measures such as diet, exercise, and expression of feelings may be foreign to them due to generational influences (Benson & Casey, 2013). Health problems may restrict opportunities to adjust diet and exercise patterns. Assessing stress and stress management and identifying resources to improve stress relief can facilitate improved mental and physical health for elderly patients.

Generations and Workplace Stress

Generational attitudes may influence the way in which healthcare professionals manage their own stress. Different generations take different attitudes toward stressors such as work and social responsibilities as well as toward stress relief measures including diet, exercise, social networking, and less healthy relief measures such as use of alcohol and other drugs.

In many healthcare settings, four generations work side-by-side. The conflicts that arise from differing values and the misunderstandings that result act as stressors for all involved. Increasingly, healthcare organizations are recognizing the value of intentional approaches to assist employees to work effectively with co-workers who represent generations different from their own.

Effective stress management for healthcare professionals requires flexibility in considering a variety of ways to reduce and manage stress. Working effectively together in an intergenerational workforce requires showing respect for generations other than one's own, sharing differences openly, and a taking a proactive approach to capitalizing upon the strengths of each generation.

Generational Descriptors

There is overlap between generations and slightly different age boundaries may be found in different sources.

Label	Traditionalists/ Matures	Boomers	Xers, NetGen, Next-Gen	Gen Y, Millennials
Age in 2015	69+	50-68	36-49	19-35
Nursing Workforce	8%	46%	30%	18%
Descriptors	<ul style="list-style-type: none"> Disciplined Hard-worker Respect authority Rules Structure Honor Dedication Patience Sacrifice Independent Conventional Value working with others 	<ul style="list-style-type: none"> Largest generation Optimism Achievement-oriented Sacrificed family life Personal growth + gratification Time spent = accomplishment Earned stripes Teamwork 	<ul style="list-style-type: none"> Blunt Outcome-focused Risk-taker Work to live, not live to work Latchkey kids Independent Can work as a team Suspicious of authority 	<ul style="list-style-type: none"> 2nd largest generation Protected by parents More Dads at birth Parental involvement Self-confident Hopeful Assertive Achievement-oriented

	<ul style="list-style-type: none"> • Chain-of-command • Loyal 	<ul style="list-style-type: none"> • Work hard/ play hard • Recognition • Appearances • “Me” generation • Lifelong learning 	<ul style="list-style-type: none"> • More “me” than Boomers • Informal, fun • Flexible • Techno-literate • No hesitation to move on • Value empowerment • Cutting edge products 	<ul style="list-style-type: none"> • Value diversity • Value change • Civic responsibility • Tech-Savvy • Info junkies • Process quickly • Meaningful work • Multitask
--	---	--	--	--

(adapted from NCSBN, 2013)

Generational Descriptors

Label	Traditionalists/ Matures	Boomers	Zers, NetGen, Next-Gen	Gen Y, Millennials
Age in 2015	69+	50-68	36-49	19-35
Nursing Workforce	8%	46%	30%	18%
Communicate	<ul style="list-style-type: none"> • Face-to-face or written • Inclusive style that binds trust 	<ul style="list-style-type: none"> • One-on-one, direct, group process • Less formal than Traditionalists • Face-to-face or telephone 	<ul style="list-style-type: none"> • Impatient with process • Bottom-line-oriented • TV-timely conclusions 	<ul style="list-style-type: none"> • Read less • Expect immediate feedback • Work well in teams • Use technology
Coach	<ul style="list-style-type: none"> • One-on-one • Personal touch • Prefer coaching from more senior person 	<ul style="list-style-type: none"> • Collegial, peer-to-peer • Explain clear, concise directions • Complete project over a few days 	<ul style="list-style-type: none"> • Like to show expertise • May not value procedures or others’ contributions 	<ul style="list-style-type: none"> • Expect lots of coaching and feedback • Better team players than Xers • Like to have a say

(adapted from NCSBN, 2013)

Different Stressors, Different Responses: Work and Stress

Many factors contribute to workplace stress including, job security and pressure to accomplish the same work with fewer people in a tight economy. The possibility of 24/7 work-related communication adds stress. Each occupation and profession have its own unique stressors. For healthcare professionals those stressors include the constant threat of a crisis situation with a patient, considerable physical demands, patients and their families who become demanding in response to their own stressful situations, dying patients, conflicts with co-workers and other disciplines, shift work, and other stressors.

Findings of many studies have suggested that a sense of a greater degree of control over workplace events results in less stress.

Stress is an individual experience. What produces stress for one person may be exhilarating for another or may be just a neutral event. Therefore, it is crucial to identify the specific stressors in one's own work environment and create an individualized stress management plan. Later in the course, you will find information about assessing stressors and planning individualized stress management.

Stress and the Healthcare Professional

“When the clinician suffers, so does the patient. We don't provide the quality care we want to offer when we ourselves are depleted.” (Rushton in Shuster, 2013)

A multitude of potential stressors confront healthcare professionals daily. Some relate to the practice environment, such as continuous change in equipment and procedures, staffing, long work hours, interpersonal relationships, role ambiguity, interruptions and concerns about patient satisfaction and potential litigation (Cuneo, et al., 2011).

Patient-related stressors include high acuity, death and dying, “difficult” patients and families, diverse patient populations, and potential transmission of illness. Limited resources and a feeling of lack of control also add stress (McCloskey & Taggart, 2010).

It may be possible to modify or eliminate some of these stressors, but some remain an inherent part of the healthcare environment. To protect themselves and function optimally, healthcare professionals need to manage their own stress levels, while participating in measures to reduce stress in the environment.

Stress and the Healthcare Professional: A Global Concern

Stress among healthcare personnel is a global concern, especially in the wake of the spread of disease among healthcare workers. A summary of research findings with nurses in the UK indicated that nurses are more likely than other healthcare professionals to experience ill health because of stress. When nurses are absent from work due to stress-related illness, increased workload adds stress for the nurses on duty. A majority of the nurses responding to one survey had considered leaving the profession due to stress (Wright, 2014).

The term “presenteeism” has been used to describe the syndrome of being present at work but failing to be fully engaged due to inattention.

Test Yourself

Organizational leaders can create a stress-free patient care environment.

- A. True
- B. False

Direct Patient Care and Stress

In survey data involving more than 95,000 nurses, researchers found much higher job dissatisfaction and burnout among nurses who were directly caring for patients in hospitals and nursing homes than among nurses working in other jobs or settings, such as the pharmaceutical industry (McHugh, et al., 2011). Burnout is described as a psychological syndrome that involves overwhelming exhaustion, feelings of distrust of the system, and a sense of ineffectiveness (Deible, et al., 2015)

Hospitals in which more nurses were dissatisfied or burned out showed lower levels of patient satisfaction. Nurses were particularly dissatisfied with health benefits. Improving nurses’ working conditions may improve both nurses’ and patients’ satisfaction as well as the quality of care. Burnout may also indicate inadequate support (Yardley, 2014).

Reducing Stress

Like all people, nurses differ in which events or circumstances trigger a stress response. All nursing practice environments include stressors and all practice environments require nurses to develop successful methods of managing stress. For some nurses, a change in specialty or practice setting may alleviate stress, but a completely stress-free practice environment probably does not exist.

Specific potential stressors vary from one specialty to another. However, factors related to the organization, workplace, patient and patient's family trigger stress for many nurses.

Job-related stress occurs when any situation encountered in the work setting creates demands that exceed the individual's coping skill (Campbell, 2013). Finding ways to reduce demands on healthcare personnel while increasing resources and coping skills can reduce stress (Wright, 2014).

Test Yourself

Fill in the blank:

- Successful management of job-related stress relies on balancing demands of the job with adequate _____ and _____ .

The correct answers are resources and coping skills.

Reducing Demands in the Healthcare Workplace

Healthcare personnel experience many work-related demands. It may not be possible to alleviate some, such as critically-ill patients and demanding families. But, marshalling resources to cope with demands can relieve stress.

Demands from one's personal life also impact stress experienced in the workplace.

Some demands such as inefficient procedures or processes or complex, unreliable systems for communication or documentation may be reduced by changing systems and approaches. Healthcare personnel can make an impact on stressors in their environments by working with peers to identify alternate approaches and presenting recommendations to management.

Optimally, an organization makes stress assessment and management an ongoing priority and empowers staff to design innovative approaches toward adjusting the environment and their responsibilities to reduce stress. Speak up to management about special needs of your shift and ideas to improve the work environment.

Increasing Resources in the Healthcare Workplace

Wright (2014) identifies key potential resources in the workplace that assist in coping with stress:

- **Control:** Influence that the person has in the way he or she works.

- **Support:** Including encouragement, sponsorship, and resources provided by the organization, management, and colleagues.
- **Relationships:** Including efforts to deal constructively with conflict and unacceptable behavior.
- **Role:** Individuals' understanding of their roles in the organization and the organization's effective efforts to clarify roles and prevent role conflict.
- **Change:** The effectiveness with which change, both large and small, is managed and communicated in the organization.

One study involving more than 21,000 RNs identified factors associated with poor health and declining health:

- Minimal control over their jobs
- Little social support at work
- High job demands

In this study, a sense of control depended on ability to acquire and apply new skills on the job and to have decision-making authority. Women in jobs with the highest control with the lowest demands had greater health measures (Benson & Casey, 2013).

Building Resilience

“Nursing is a notoriously high-stress occupation emotionally taxing and physically draining, with a high incidence of burnout (Hersch, et al., 2016). Resilience, or the ability to cope effectively, is an important resource when working in this type of environment.

Four qualities and abilities help to build resilience:

1. Self-awareness
2. Managing emotions
3. Social awareness
4. Communication skills

(Yardley, 2014)

There are many in-person stress management strategies documented in the literature, however Hersch et al. (2016), designed a randomized controlled trial to test a web-based intervention, BREATHE: Stress Management for Nurses, which resulted in significantly decreased stress levels in the intervention group. The identified sources of stress reported related to issues such as death and dying, conflict with physicians and/or peers, work load, and inadequate experience/knowledge related to duties.

The BREATHE: Stress Management for Nurses program incorporates 7 modules, including:

- Introduction – information provided regarding the effects of stress on the body and how routine tasks are affected by stress
- Assess and identify your stress
- Manage stress
- Avoid negative coping
- Your mental health
- The manager’s role – a module specifically designed for nurse managers

More Info: ICU Nurses Build Their Resistance

Researchers studied the effects of an intervention intended to increase the resilience of ICU nurses. The intervention included a two-day educational workshop, written exposure sessions, event-triggered counseling sessions, mindfulness-based stress reduction exercises, and an aerobic exercise regimen.

The intervention proved both feasible to conduct and acceptable to the nurses. Nurses who received the intervention and the control group, each experienced reduced PTSD symptom scores after the intervention. Perhaps the project raised the awareness of stress and need for stress management in the control group nurses, even though they did not receive the intervention (Mealer, et al., 2014).

Increasing Your Mind and Body Resources

Wright (2014) recommends building and replenishing your own personal resources:

Mind:

- Debrief time with colleagues at the end of the shift. Share successes and frustrations.
- Write a brief journal entry after each shift. Focus on what went well, what could be improved, and what could be done differently next time.
- Plan what needs to be done and write it in the journal.
- Escape from thoughts about work, with entertainment and socialization.
- Practice mindfulness through yoga or meditation.
- Protect some “me time” each day. Create a routine of engaging daily in a relaxing activity.

Body:

- Exercise regularly and vigorously to release frustrations.
- Punch some pillows or hit them with a stick or baseball bat.
- Find somewhere secluded and scream.
- Put music on full volume and sing or dance along as loudly and energetically as possible.

- Complete something tangible at home to give a sense of achievement; cooking, baking, and cleaning may all offer a sense of achievement. The focus on the activity helps to relieve stress.

Think About It

You are beginning your shift. As you make rounds with your patients you feel overwhelmed by their needs and think this assignment is too much for one person.

How have you handled similar situations in the past? Did those approaches work for you? Before reading the suggestions below, think about how you will handle this situation.

- Focus and identify your priorities. If, after your initial assessment of your patients, you believe that your assignment is unsafe, explain your concerns to the charge nurse. You are not alone but are a part of a team. Identify concerns early on to avoid getting into an unsafe situation or feeling stressed throughout the shift.
- Take it one step at a time, one priority at a time.
- Communicate with your patients. Let the patient know when you will be back and how to call for assistance if needed.
- Remind yourself that you are capable. You can accomplish the most important things. Think through possible ways that others can help you.

Caregiving and Stress

Healthcare professionals care for patients as a part of the careers and work life they have chosen. Many of the stressors they encounter have already been discussed. Healthcare professionals also have the ability to assess the stressors and coping abilities of the family caregivers of their patients and provide resources and recommendations to those less experienced in the role than themselves.

Family members or significant others who care for others in the home setting often face unrelieved stress from continuous caregiving. Caregivers deal with emotions such as exhaustion, guilty, anger, and grief as well as physical effects such as increased illness themselves and increased mortality (Benson & Casey, 2013). Healthcare professionals can assist caregivers in any healthcare setting, including during hospitalizations, clinic visits, and in-home visits. Caregivers may have little preparation for the duties they perform. Healthcare professionals can identify their learning needs and provide support, information, and resources.

Caregivers need effective means of managing stress to maintain their own health and sustain their caregiving roles. Healthcare professionals can reinforce the need for self-care and for obtaining needed assistance from others. Recommended stress relief measures for caregivers

include use of relaxation techniques, assertiveness techniques to obtain needed help and relief, and participation in support groups (Benson & Casey, 2013).

Some of the same stress relief techniques that benefit lay caregivers can also benefit healthcare professionals – indulge in things you enjoy, such as a book, a massage, a movie, or a manicure. Use whatever outlets help you to relax and refresh yourself.

Nurses and Stress

Stressors in the patient care environment evoke emotions in nurses which trigger the stress response. Stressors include high workloads, long hours, unrealistic expectations, and perceived lack of control over the work environment (Yardley, 2014). Additional stressors may include bullying, workplace violence and team dysfunction, such as poor communication, unclear working guidelines, personality clashes, issues of power/hierarchy, and in some cases, lack of good leadership (Yardley, 2014).

Stress is the number one cause of workplace absence and is accompanied by a rise in mental health problems such as anxiety and depression. The *Beyond Breaking Point* survey found that stress-related absence is rising, with 40% of employers reporting a rise over the previous year. Between 2009 and 2012, the number of employers reporting a rise in mental health problems doubled (Yardley, 2014).

Research Findings: Nurses and Stress

One might expect certain nursing specialties to create more stress for nurses than others. However, research findings (Peters, et al., 2012) have indicated similar stress levels across specialties.

Purcell, Kutash, & Cobb (2011), surveyed a sample of 197 nurses and found that nurses reported increased stress when they worked the weekend. In the same study, patient workload and day of the week influenced stress levels. However, younger nurses cared for fewer patients and experienced higher stress levels than older nurses who cared for more patients.

A study of nurses who worked telephonically identified measurable stress-related deficits in cognitive processing. When stressed, nurses experienced more slips of attention and memory and were more likely to refer the caller to another health professional rather than address the problem (Allan, et al., 2014).

Night Shift Stress Prevention

The body's natural rhythms for sleep, alertness, and digestion make night shift work difficult. Rotating shifts are especially problematic; though rotating from day to afternoon to night appears to be less disruptive to the sleep cycle (McCarten, 2011).

The following are helpful tips for preventing stress while working the night shift:

- If possible, nap during breaks or take more frequent shorter breaks.
- Consume no caffeine after the fifth or sixth hour of the shift.
- Create a sleep routine and when possible, stick to it when off duty. It's not necessary to force yourself to sleep immediately after returning home from work, but too long a delay can result in a disruptive "phantom second wind."
- Limit your exposure to strong light immediately after your shift. The exposure can keep you awake.
- Establish a routine and avoid pharmacologic sleep aids.
- Eat your main meal a couple of hours before your shift and eat some protein just before your shift.
- Avoid eating a second heavy meal during the shift.
- Avoid sweets and empty calories during the shift. Bring your own healthful lunch or snacks.
- Keep yourself hydrated.

Pay attention to your body and any signs and symptoms of distress:

- Maintain a healthy body weight, and good health practices including exercise. Exercise before work.
- If you take medication, check with your prescriber about potential effects of shift rotation.
- Experiment with stress relief and relaxation measures until you find one that works for you and then make it part of your routine.

Maintain your social connections with friends and family. Since those significant others probably keep different schedules of work and sleep, it may require more planning, but these relationships help you renew your energy and enjoy life. Network with other shift workers/colleagues online (McCarten, 2011).

More Info: The Night Shift and Weight Gain

Researchers found that alterations in Circadian rhythm appear to affect energy expenditure and fat burning for night shift workers.

According to Kenneth Wright, "When people are on a shift-work-type schedule, their daily energy expenditure is reduced, and unless they were to reduce their food intake, [shift work] by itself could lead to weight gain" (McHill et al., 2014).

Participants in the study burned more fat while sleeping during the day than when sleeping at night.

Further research is needed, especially since the study subjects were not actual shift workers, but according to Wright, the findings suggest “that it’s perhaps even more important to have a healthy diet for shift workers as well as a healthy amount of physical activity (McHill, et al., 2014).”

Draw-a-Person-in-the-Rain

Take an art break. Draw a person in the rain:

When you have completed your drawing, proceed to the next page to interpret your drawing.

What Does Your Drawing Say?

Draw-a-Person-in-the-Rain (PIR) is an art assessment which researchers used as one means of assessing stress in a study of ways to reduce stress and prevent burnout among nurses (Graves, Jones, & Kaplan, 2013).

The PIR is intended to reveal the interaction between stressors and coping.

The rain in the drawing represents stressors. The greater the intensity of the rain and the presence of ominous clouds, thunder, lightning, puddles, and wind indicate the number and intensity of stressors experienced by the person who made the drawing.

The shielding in the drawing represents coping mechanisms. If the person in the drawing is adequately protected by an umbrella or by shelter of some kind, the person who made the drawing is coping adequately with stressors. However, if the rain is striking the person regardless of shielding, or if the person has no shielding at all, the person is probably experiencing negative effects of stress.

Dealing with Patient Death

Death is one of the most common stressors in the health care setting, and an event that nurses will likely encounter many times throughout their career. Coping with death is a personal experience, and an effort needs to be made by health care leadership to support the diverse coping strategies used by their staff (Zheng, Lee & Bloomer, 2017).

Poor coping with patient death is associated with burnout, compassion fatigue, and providing decreased quality of care at end-of-life. Supporting coping strategies in relation to coping with patient death has the potential to decrease the nurse’s anxiety and stress, promote emotional health, and contribute to job satisfaction, and ultimately the potential to improve the quality of care provided (Zheng, Lee, & Bloomer, 2017).

Resources related to coping with patient death:

Intrinsic Resources	Extrinsic Resources
Setting Boundaries	Talking and being heard
Reflection	Spiritual practices
Showing emotion	Education and programs
Death beliefs	Debriefing
Life and work experiences	
Daily routines and activity	

(adapted from Zheng, Lee & Bloomer, 2017)

Think About It

From the information you have just received in a hand-off report you believe that one of your patients will likely pass away during your shift. The patient’s family is present. How will you manage your stress in this situation?

What has worked for you in the past in similar situations?

Only you can identify what it is you need to relieve your own stress in this situation. Before reading the general suggestions below, think about how you will deal with the situation.

- Identify and carry out your professional role. Reflect on the professional nursing needs of the patient and family in this situation. Ask the family what would be most helpful; doing so will make them your partners and will respect their cultural practices at this time. Let them know what to expect to help relieve their fear and anxiety.
- Offer support by your physical presence, even when there is nothing you need to do for the patient.
- Ask yourself what you need to enact your professional role. Do you need additional information or assistance with performing some aspects of physical care?
- Benefit from social support. Can you plan for a few minutes with another nurse during the shift?

- Set limits for yourself in the situations. Others have roles to play and you have other patients who need care.

Assess Your Stress: Stress in Your Life

In 1967, researchers Holmes & Rahe developed one well-known stress assessment by asking people to rate various life events for the stress each produced on a scale of 0-100, with 50 being marriage. This assessment is widely available online and some versions include slight variations, such as “single person living alone,” score of 14; expanding “Christmas” to include “Holidays,” score of 12. For example, looking at a snapshot of **ONLY** the two extremes of the scale of 0-100:

Spouse’s Death	100	Change in eating habits	15
Divorce	73	Vacation	13
Marriage separation	65	Christmas	12
Jail term	63	Minor legal violations	11

(adapted from Masuda & Holmes, 1967)

Although such measures have value in research, for the individual person, what is most important is what that individual finds stressful and how they manages stress.

Most important in managing your own stress is to create your own “scale of 0-100.” What events cause you to experience signs and symptoms of stress? Signs and symptoms of stress also vary from one individual to another. In some people, the cardiovascular effects are prominent; others may experience gastrointestinal symptoms, or cognitive or behavioral symptoms may predominate.

Social Media and Stress

Contrast effect occurs when we are constantly comparing ourselves to those in our social network (David, 2016). Even if we perceive ourselves as the “winner,” you can get hooked on one-upmanship and the need for external validation instead of acting based on your values. Comparing ourselves to others can be very toxic and a contributor to increased stress.

Social contagion is a concept that describes how we are influenced by the people in our in-person and online social networks (David, 2016). Behaviors that we see are normalized, are behaviors we are likely to repeat. For example, when you are exposed to several friends who have experienced a divorce-you are more likely to see that as a reasonable solution to the conflicts in your own marriage and proceed with a divorce yourself.

How Vulnerable Are You to Stress?

Assess Your Vulnerability to Stress with the Type D Scale-14 [DS14] (Denollet, 2005).

		False	Less False	Neutral	Less True	True
1	I make contact easily when I meet people.	4	3	2	1	0
2	I often make a fuss about unimportant things.	0	1	2	3	4
3	I often talk to strangers.	4	3	2	1	0
4	I often feel unhappy.	0	1	2	3	4
5	I am often irritated	0	1	2	3	4
6	I often feel inhibited in social interactions.	0	1	2	3	4
7	I take a gloomy view of things.	0	1	2	3	4
8	I find it hard to start a conversation.	0	1	2	3	4
9	I am often in a bad mood.	0	1	2	3	4
10	I am a closed kind of person.	0	1	2	3	4
11	I would rather keep people at a distance.	0	1	2	3	4
12	I often find myself worrying about something.	0	1	2	3	4
13	I am often down in the dumps.	0	1	2	3	4
14	When socializing, I don't find the right things to talk about.	0	1	2	3	4

As you probably surmised as you scored the statements, the quiz is based upon the concepts that a negative attitude (negative affectivity) and social inhibition contribute to susceptibility to stress and negative effects of stress. Optimism and healthy relationships with others are associated with better coping mechanisms and therefore lesser adverse effects of stress.

Add your scores in the *DS14 Personality Quiz*

NEGATIVE AFFECTIVITY: Add scores for questions 2, 4, 5, 7, 9, 12, and 13.

SOCIAL INHIBITION: Add scores for 1, 3, 6, 8, 10, 11, and 14

Interpret the results:

You qualify as a Type D personality if your Negative Affectivity is 10 or higher and your Social Inhibition is 10 or higher. Because negative affectivity and social inhibition each may be associated with adverse effects of stress, a high score in either is a warning to make attempts to move toward greater optimism and to more healthy relationships with others.

To enhance your positive outlook, learn to view good news as pervasive, long lasting, and generated by your own actions. Practice viewing bad situations as limited and stress-neutral because they are beyond your control.

Assess Your Stress: Recognize Early Signals

Some of the most common signals of stress appear below (Benson & Casey, 2013). However, individuals vary greatly in signs of stress. What is most important is to recognize YOUR OWN early warning signs and act to relieve stress. Opposite extremes may indicate stress – such as constipation or diarrhea; overeating or eating less, weight gain or weight loss; increased socialization or withdrawal.

The following are the most common signals of stress:

- Tight, stiff, or painful muscles, especially in the back, neck, and shoulders
- Fatigue
- Difficulty sleeping
- Pounding heartbeat or palpitations
- Tremors and sweating
- Tinnitus
- Gastrointestinal symptoms, including constipation or diarrhea
- Irritability, anger, nervousness
- Changes in dietary patterns
- Use of alcohol, drugs, or cigarette smoking
- Changes in social habits – seeking more interaction or withdrawing
- Thinking frequently about stressful situations
- Fidgeting, grinding of the teeth
- Feelings of powerlessness, unhappiness, or depression
- Inability to enjoy activities, including sex
- Continual worry
- Lack of concentration
- Impaired memory

Think About It

You made a mistake in programming a PCA pump. The new graduate you are precepting observed and noticed the discrepancy. When you both were outside the patient's room, your orientee asked you if that's what you meant to do. You both returned to the patient immediately and you corrected the setting. You feel your heart pounding and feel nauseated – you are very upset that the error could have harmed the patient and that your orientee was the one to catch the near miss.

Fortunately, nurses are human beings who bring their human caring to their patients. Unfortunately, humans do make mistakes or at times fail to take the absolute best course of action. How can you relieve your stress in this situation?

Even if you have never made an error, was there ever a time when you knew in retrospect that you could have done a more effective job in a particular situation? How do you handle it when you sense that another team member might lack confidence in you? Before reading the suggestions below, think about how you can avoid stress in this situation.

- Thank your orientee for speaking up. You can make this an important learning experience for both of you. Your orientee can learn the importance of questioning when something seems amiss. You can reflect on what led you to your mistake and caution your orientee about how to avoid that error. Let your orientee know of your feelings about the situation.
- Use this mistake to teach the new grad how to avoid the same mistake and also how to handle mistakes in a professional manner. If your organization has a policy and procedure for reporting near misses, follow the procedure with the orientee.

Choosing Healthy Responses to Stress

Some of the signs of stress listed previously actually represent unhealthy ways of managing stress – such as abuse of alcohol or other drugs and overeating. Unhealthy responses include excessive sleeping, excessive television watching, social withdrawal or frantic socialization, and risky behaviors such as driving too fast.

Unhealthy responses to stress may provide temporary escape but further deplete one's resources to eliminate stressors when possible and manage stress effectively.

One in ten adults indicated that they do not engage in any stress management activities (APA, 2014).

Just as individuals differ in triggers and manifestation of stress, each person also varies in what measures relieve stress. You may need to experiment a bit to find stress reduction measures that work for you. A host of stress relief approaches have proven effective. Even if you have your own favorites, adding new stress-fighting weapons to your arsenal can increase your ability to manage stress effectively.

Responding to stress with Emotional Agility

Emotional agility is a process that enables us to navigate life's day-to-day stressors with self-acceptance, clear-sightedness, and an open mind (David, 2016). Emotional agility helps to avoid becoming "hooked" and reacting with an immediate, autopilot response.

Susan David describes 4 key concepts to help identify our emotions as data—not directions—and how we can open a space between a stressful stimulus and our active response by choosing our actions based on our values.

Showing Up: Acknowledge difficult emotions and determine your personal values that align the emotion as why you may have reacted in a certain way. Do not overemphasize ‘positive thinking.’ Negative emotions (such as anger, sadness, fear, contempt) serve a purpose and encourage slower, systematic processing.

Stepping Out: Change your point of view; think about stressful situations as challenges, not threats. Writing things down can help bring perspective to the situation by slowing down your thoughts. Do not interpret someone’s action for more than the action itself, this is more likely to be your opinion of why they acted in that manner and not their opinion.

Walking Your Why: “Courage is not an absence of fear, it is fear walking” (David, 2016). Without action, your values are only aspirations; it is like riding a bike, you are balanced and upright only when you are in motion. Even when you make a choice based on your values, you still give up the road not taken and there may be associated emotions with that loss, however you will better be able to accept those emotions when you know you gave the decision adequate time and attention.

Moving On: When the plan to address a stressful situation is too large, it invites the possibility of frustrations. Aim for small changes, because when there is little to lose, there is decreased stress and increased confidence. Small changes can also redefine your habits in ways that positively affect your mindset. This process prevents you from feeling overwhelmed, while remaining excited and enthusiastic about actions that align with your values.

Think About It

One of your patients has been incontinent X3 and the shift is only half over. The only linen remaining on the cart is face cloths, gowns, and blankets.

How do you handle it when linen, or other items, or medications are not available on your unit? Have you put in place some solutions that work? Before reading the suggestions below, think about how you can avoid stress in this situation.

- Detach yourself from the emotional component. Let go of the frustration and solve the problem.
- What is your professional role in this situation? Running to another unit to scavenge linen may solve the problem for the moment, but “no linen again” sounds like a reoccurring problem. Avoid a quick fix and pursue the appropriate channels to fix the system. Begin with your supervisor or other identified resources. Go beyond simply

reporting the problem. Inquire as to what will be done to keep the problem from reoccurring and when. If the response includes a reporting procedure, be sure to follow through.

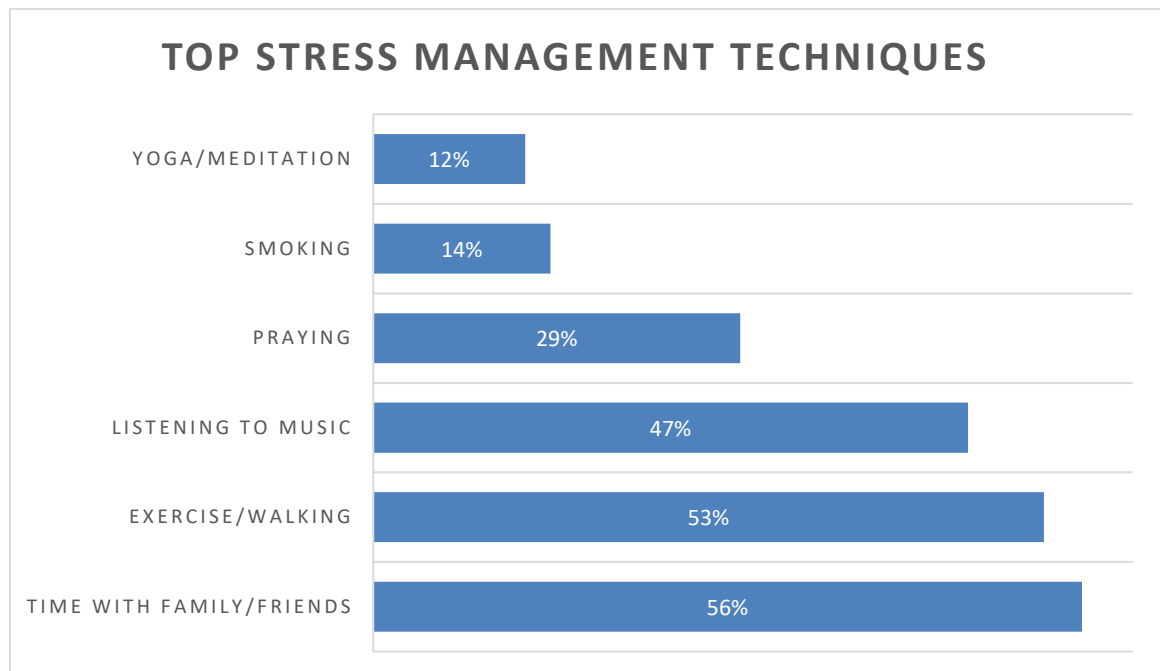
Stress Management Techniques

Stress management techniques fit into three general categories. Some recommend the use of these categories in combination for best results (Benson & Casey, 2013):

1. Relaxation techniques.
2. Self-care and renewal techniques, such as setting aside time for socialization, relaxation, exercise, connecting with others, and pursuing activities that add joy to your life.
3. Cognitive restructuring to reframe negative thoughts.

More Info: Prevalence of Stress Management Techniques

The most recent APA survey (2017), revealed the top stress management techniques used by nearly 2,000 US adults. Of note, exercise ranked higher than it has in the past 3 years, and yoga ranked the highest it has been ranked since being added to the survey in 2008.



(adapted from APA, 2017)

Relaxation Techniques

The relaxation response is the opposite of the stress response and counteracts the adverse physical effects of stress.

By focusing intensively, one can elicit the relaxation response. Intense focus screens out the noxious stimuli and leads to a peaceful state whether you focus on breathing, one specific body part at a time in sequence, meditation, yoga, tai chi, repetitive prayer, repeating a word or phrase, or guided imagery.

The intense focus requires commitment to practice and to maintain a routine of practice. To provoke the relaxation response when you need it, you must master the technique that produces relaxation for you. Most stress management techniques become more effective with frequent practice.

Numerous self-help publications and classes are available to help you practice and master these techniques. See the resources listed at the end of the course.

Test Yourself

Stress relief measures such as relaxation work most effectively when you:

- A. Practice the technique frequently.
- B. Use the technique only when at work.
- C. Explain the technique to your co-workers.

Reiki

Reiki is a form of complementary energy medicine and an ancient, hands-on healing practice, thought to rebalance the biofield, strengthen the body's ability to heal and increase systemic resistance to stress (Cuneo, et al., 2011).

Studies have demonstrated stress reduction in nurses that practice Reiki, as well as decreased anxiety, improved ability to focus on patients, and improved problem solving (Deible, et al., 2015). Nurses that engage in self-care such as Reiki, have the potential to provide higher quality of care to their patients.

Meditation

Meditation quiets the mind and allows a person to disengage the senses and “go beyond” the mind (Taylor, 2014, p. 28). The relaxation response results in decreases in oxygen consumption, carbon dioxide elimination, respiratory rate and volume, heart rate, blood pressure, and muscle tension (Taylor, 2014).

Meditation practices are categorized in one of two categories, concentrative meditation or mindfulness meditation.

A person practicing concentrative meditation cultivates focused attention by using mantras, breathing patterns, or visualization.

Mindfulness meditation begins with deliberate conscious breathing and focuses on the gift of the moment. It focuses on intentional self-regulation and with practice, enables a person to escape his physical boundaries.

A literature review compiled by Sarah Smith (2014), found that among nurses, Mindfulness-Based Stress Reduction (MSBR) was associated with:

- Reduced stress, anxiety, and burnout
- Improved coping with stress
- Increased in focus
- Improved mood
- Empathy
- Self-improvement such as empowerment, control, feelings of accomplishment, self-compassion, improved relationships in and out of work setting
- Improved quality of care provided

Guided Imagery

Guided imagery produces a calming sensation by recalling specific peaceful, calming scenes or experiences. When a therapist or recording facilitates the technique, words guide the person to notice the details of the scene using all the senses – for example, the smell of the ocean; the feel of soft warm, sand; the warmth of the sun’s rays; the sounds of the waves and the birds.

Although a therapist or a recording may facilitate the technique, you can also train yourself to envision the scene or memory and experience it fully using all of your senses.

The focus on the calming image using all the senses blocks out noxious stimuli and induces a peaceful state.

Think About It

You are dreading calling a particular MD. When you have called him in the past, he interrupts you frequently so that you find it hard to report your findings and your concerns. You think that this doctor is frustrated because he can't cure everybody and is taking it out on you.

Have you succeeded in improving communication in situations like this in the past? Or do you just give up and feel stressed every time you need to communicate with someone you find difficult. Before reading the suggestions below, think about how you can avoid stress in this situation.

- Detach yourself from the emotional component. Plan that you will deal with what you perceive as the doctor's problematic attitude at another time, then let go of the stress you feel as you anticipate a negative response from the doctor.
- What exactly do you need? To get the doctor to see the patient? To get an order for medication? First, clarify for yourself exactly what you need from the doctor. Then, prepare yourself to articulate clearly what you need, what assessment data and judgment you need to support your request, and what you expect from the doctor.
- Call the doctor, present the information, and ask for what you need. That accomplishes your first priority and meets the patient's needs.
- To manage stress effectively and prevent it in the future, you also need to deal with what you perceive as the doctor's problematic attitude.
- Share your observations and perceptions with him, using I-messages: "When I am reporting information to you and you interrupt me repeatedly, I find it hard to give you the information you need to assess the patient's condition. After our conversations go that way, I really hesitate to call you." Then, after letting him respond, ask, "How can we do this differently?"
- Try any adjustments in your communications that you and he agree to. Reflect on the results. Make further adjustments if needed.

Nutrition

Both the what and how of eating relate to stress prevention and healthy stress-relief. A balanced diet served in modest portions helps to maintain a healthy weight and serves as a stress-proofer by preventing the hypoglycemia which can lead to irritability and signs of stress.

Intentionally including fruits, vegetables, whole grains, and less saturated fat in the diet supports good health and reduces susceptibility to the adverse effects of stress. Eating slowly allows you to experience a satisfied feeling without rushing to second helpings. Some recommend a glass of warm water before eating to help create a feeling of fullness and prevent overeating.

Healthy eating also includes sharpening your awareness of the need to eat – that is, to eat only when hungry and not to relieve stress or to maintain an eating schedule that really does not work for you.

Foods That Relieve Stress

Some foods reduce stress hormones such as cortisol and increase serotonin levels. Comfort foods such as a bowl of warm oatmeal, boost levels of serotonin, a calming brain chemical. Other foods can cut levels of cortisol and adrenaline, stress hormones that take a toll on the body over time. A healthy diet can help counter the impact of stress by shoring up the immune system and lowering blood pressure. Nutrition experts have identified the stress protection value of specific foods (Zelman, 2014):

Food	Stress Protection Value
Avocado	Contains serotonin, which improves mood and potassium which helps regulate blood pressure. Might substitute for mayo in a sandwich or as a part of a salad. Avocados are high in fat and calories.
Cereal (vitamin D-fortified)	Vitamin D helps maintain a cheerful mood, especially when sunshine is not abundant. Milk adds benefits of calcium for bones and teeth.
Complex Carbohydrates	Help to balance by supplying a steady release of serotonin and stabilize blood sugar. Examples include whole-grain breads, pastas, and breakfast cereals, including old-fashioned oatmeal.
Simple Sugars and Sweets	Are digested quickly and spike serotonin, therefore it might be helpful after a stressful episode or before bedtime to aid sleep. Before bedtime, a light carbohydrate such as bread and jelly is preferable to a heavier snack which might cause indigestion and discomfort. Light carbs at bedtime can speed the release of the brain chemical serotonin and promote sleep.
Dark Chocolate	Contains magnesium which relaxes muscles and can relieve anxiety. Chocolate-covered almonds give an extra dose of magnesium. Low magnesium levels cause fatigue, headache, and irritability. Other sources include soybeans, salmon, and green leafy vegetables.
Fatty Fish, such as salmon and tuna (containing Omega-3 fatty acids) Other sources include: Pistachios, almonds, walnuts, and seeds	Prevent surge of stress hormones. May help protect against heart disease, depression, and premenstrual syndrome (PMS). For a steady supply of feel-good omega-3s, aim to eat 3 ounces of fatty fish at least twice a week. A handful of pistachios, walnuts, or almonds every day may help lower cholesterol, ease inflammation in coronary arteries, make diabetes less likely, and protect against the effects of stress. Almonds are full of helpful vitamins: vitamin E to bolster the immune system, plus B vitamins, which aid resilience during bouts of stress or depression. To get the benefits, snack on a quarter of a cup every day. Nuts are rich in calories.

Green Tea	Contains L-theanine which is associated with relaxation. Polyphenols promote oral health and prevent breath odor. Black tea contains calcium which reduces cortisol and might be helpful after a stressful episode.
Herbals*	St John's Wort and valerian have been associated with relief of stress and depression. St. Johns' Wort also appears to reduce symptoms of anxiety and PMS.
Milk	Contains calcium which eases anxiety.
Oranges and Other Sources of Vitamin C	Decrease cortisol levels and boost the immune system. In one study of people with high blood pressure, blood pressure and levels of cortisol returned to normal more quickly when people took vitamin C before a stressful task.
Popcorn	Carbohydrates increase serotonin levels which improve mood; a low-calorie, whole-grain source of carbohydrates, but avoid slathering it with butter.
Raisins	Contain antioxidants and provide quick energy. Promote dental health by slowing bacterial growth in the mouth.
Raw Vegetables	Can relieve the muscle tension on a clenched jaw.
Yogurt	Contains probiotics which have been shown to ease depression and reduce bacteria in the mouth which promotes oral health.

*Note: Herbal product manufacturers are not required to submit proof of safety and efficacy to the U.S. Food and Drug Administration (FDA) before marketing. Thus, adverse effects and drug interactions associated with herbal remedies are largely unknown. Caution should be used when using herbal remedies together with other medications, as drug interactions may occur.

Exercise

Exercise offers many positive health effects such as lowering blood pressure, reducing cholesterol, strengthening bones and muscles, boosting the immune system, increasing metabolism, and maintaining a healthy weight. Specifically related to managing stress, exercise acts as a means of dissipating the stress hormones. The stress hormones prepare the body to fight or flee – exercise makes constructive use of those hormones and prevents stress hormones from building up and causing harmful effects.

The exercise built into daily activities has benefits – walking when possible, taking the stairs instead of the elevator. Just taking a couple of minutes to stretch during a busy shift can relieve muscle tension.

Stretch Break!

- Reach your arms high over your head. Repeat several times, reaching higher each time.
- Bend from the waist to stretch your back and touch your toes. Repeat several times, deepening the stretch each time.
- Arch your back. Repeat several times.

- Roll your head first clockwise, then counter-clockwise to stretch your neck and upper back. Repeat several times.
- Investigate other stretching exercises and try them out!

For optimal stress-proofing and stress-relief, experts recommend 30 minutes of aerobic exercise three to four times each week (Zelman, 2014).

Writing

Several forms of writing can help alleviate stress.

- Journaling, or simply making a habit of recording your experiences and your thoughts and feelings about your experiences, can have a cathartic effect and help to release stress related to particular experiences and people (Benson & Casey, 2013).
- Periodically making a list of what and whom you are grateful for helps to get positive energy flowing (Benson & Casey, 2013).
- Keeping a “worry box” in which you insert slips of paper on which you have written what you are worried about (Benson & Casey, 2013).

The act of writing and then setting aside what you have written symbolically removes worries and concerns, offers some perspective, and frees you to be peaceful, mindful, and focused.

Maintaining Social Connections

Studies have documented the correlation between positive relationships with others and good health. Recovery from illness, surviving cancer, and even longevity are associated with social support (Benson & Casey, 2013). According to the *APA Stress in American™* survey, 74% of respondents felt that they have someone they can rely on for emotional support (APA, 2017).

Connections with colleagues in the workplace can help to diffuse workplace stress. Relationships can remain professional and maintain appropriate personal boundaries while still offering support. Being the one who offers support to a colleague helps positive relationships to develop and may invite a colleague to reciprocate when you can benefit from support.

Social connections outside of the workplace assist in separating from work and directing attention to others and other interests. Fostering positive relationships serves as effective stress protection and offers a pathway to relieve stress. Opportunities to develop positive relationships abound in social, service, and faith-based organizations, in volunteer opportunities, and in social networking in the web-based environment.

Equally important to establishing relationships is keeping relationships positive and nurturing. At times, it means changing, limiting, or severing a relationship that is not helpful or toxic.

Little Things Mean a Lot

One expert on compassion fatigue emphasizes the importance of simple approaches to relieving and preventing stress. “Maybe they just need to be sure to take their lunch or dinner break. Get to the lounge or get outside, take a deep breath, or do other simple things at work. Follow healthy living interventions and eat right and exercise. There are things people can do in just a few minutes to refocus on themselves” (Lombardo in Schuster, 2013).

Think About It

You’ve been circulating in the ortho OR for ten years. Now your manager tells you that you will be expected to work neuro cases as well! Your cross-training is going well, and you’ve been in on a case with a preceptor, but you feel as if the neurosurgeons don’t trust you.

Have you ever felt stressed out when faced with new responsibilities? Or perceived a lack of trust from other team members when you perform new skills or take on new responsibilities? What helped you in those situations? Before reading the suggestions below, think about how you can avoid stress in this situation.

- Let go of those feelings of incompetence. Reframe your thinking to thoughts about your competence: you have circulated in an OR for ten years. You certainly have valuable expertise.
- Why do you believe that the neurosurgeons don’t trust you? Reflect on this evidence. Are you jumping to conclusions? If you remain concerned, validate your perceptions with each individual neurosurgeon.
- If the neurosurgeons do lack confidence in your competence, clarifying will not solve the problem; only demonstrating your competence will solve the problem. If you need additional practice or training, tell your supervisor. You may need to use a more customized assignment plan so that you are circulating only on routine cases.
- Your role is to provide safe and effective care. Clarify expectations with your supervisor and with the surgeons. Do not neglect YOUR expectations in this clarification process. You have the right to expect adequate cross-training and co-workers (including neurosurgeons) who know what to expect from you.
- With your supervisor, set specific goals in reaching specific competencies. Reflect upon your progress. What learning methods are most helpful to you? Do you need to collaborate with your supervisor for a more effective plan?

Reframing

The technique of reframing is also known as cognitive restructuring. The process of reframing can be as simple as looking for the silver lining. As one healthcare facility housekeeper put it when a patient apologized for fecal incontinence on the floor, “If you don’t make a mess, I don’t have a job.”

At times it is difficult to identify any positive aspects in a situation. And yet, failing to do so can lead to catastrophizing, or perceiving a situation as even worse than it is.

Reframing, seeking support from others to identify positive aspects, and supporting others in their efforts can create a calming and productive work atmosphere.

Reframing situations helps to give a sense of control. When reframing, you can identify the aspects of the situation that you can actually control or influence. In some situations, the only control you have may be over your own response to the situation. However, often there is some proactive opportunity, such as to gain additional help or support or to influence a change in practice.

A Sense of Control

A sense of control and predictability help prevent toxic stress. Gaining a sense of control over situations gives you a powerful tool to manage stress. Note that a SENSE of control may differ from having complete control or true control of a situation. Just as your perception of situations creates stress, perception of control in those situations can also mitigate stress. Although much lies outside of your control, you always have the power to control your reaction to a situation. Having a realistic plan helps to create a sense of control.

Perceiving control in situations reduces stress. Casting aside the victim role and accepting REASONABLE responsibility for outcomes alleviates stress. An unrealistically strong sense of responsibility can have a detrimental effect. If you take personal responsibility for events beyond your control, you set yourself up for feelings of frustration and guilt.

Patient-controlled analgesia (PCA) pumps provide patients with control and predictability in pain management. Envision your own Nurse-Controlled Stress Management System. Think about the situations that frequently cause stress for you. How can you gain a greater sense of control in those situations? Purposeful hourly rounds can impart a greater sense of control by learning the patient’s priorities, setting realistic goals, and making the shift predictable for you and your patients.

Learned Helplessness

Researchers in psychology have studied the concept of learned helplessness. Learned helplessness explains the behavior of people who perceive themselves as powerless. Classic examples of learned helplessness include victims of domestic abuse who cannot separate themselves from their toxic partners.

People who perceive themselves as powerless believe that they can do little or nothing to influence the outcome of situations. They believe that other people and circumstances determine everything. In contrast, individuals who believe that their own actions play a strong role in determining outcomes are better prepared to manage stress successfully.

Think About It

One particular team member seems to vanish on frequent occasions. You and others are often asking each other if anyone has seen her. You wonder how she manages to disappear every time you need help.

How do you handle conflicts with other staff members? Before reading the suggestions below, think about how you can avoid stress in this situation.

- Detach yourself from the emotional component. If you need help to give safe and effective care at this moment, find it. If you can't find "she who disappeared," find another staff member or your supervisor. Resolve that you will deal with the disappearing staff member as soon as possible.
- What is your professional role in this situation? Your first responsibility is to render the needed care to the patient. Immediately after providing care, locate the individual who was supposed to be helping you.
- Present the problem to the disappearing staff member. Share your observations and perceptions. Use I-messages, obtain her response, and ask, "What can we do to prevent this from happening again?" Follow through on your part of the bargain. Evaluate progress every time you and she work the same shift. Give her feedback about her performance.
- If the proposed solution doesn't work, enlist the help of your supervisor in dealing with the staff member.

Organizational Commitment to Stress-Managers for Nurses

The following are examples of organizational stress-managers for nurses (Hendren, 2010):

Stress Reduction Classes

Some organizations have recognized that stress reduction and burnout prevention for nurses pays off in patient care, cost savings, and nurse satisfaction. Organizations are experimenting with both live and computer-based formats. In order to be effective, techniques must be realistic in the work setting. Techniques such as stretching and deep breathing can provide quick relief. Hendren (2010) recommends rewarding nurses' participation with incentives consistent with the stress relief theme, such as gift certificates for massages.

Space and Atmosphere for Relaxation

Both a calming environment and the opportunity to interact with peers can provide stress relief. An intentionally designed break room and break scheduling to facilitate interacting with co-workers facilitates stress relief.

Mentor and Buddy Programs

Peer venting and support offer stress relief for nurses of all experience levels, but especially for new graduates and nurses new to a specialty.

Recognition and Support

A culture in which managers and colleagues offer simple specific compliments for a job well done and support in stressful times helps to stress-proof the environment. A short-stress relief segment might be built into staff meetings; such as stretching, giving another a two-minute shoulder massage, or telling a short story of a stressful situation and how one obtained relief.

Professional Development

Competence and confidence help to limit stress in the workplace. Organizations can contribute by supporting and affirming nurses for attending non-mandatory educational events, achieving death certification, and pursuing other forms of professional development.

Counseling

Employee assistance programs can design programs targeted to prevent nurse burnout.

Test Yourself

Which of the following is an example of an organizational stress management program?

- A. Yoga
- B. Reiki
- C. **Mentor program for new grad nurses**

Stress Relief in the Practice Setting: An Example

Campbell (2013) identified some specific approaches that have helped critical care nurses manage stress, including the support of a chaplain to provide leadership in:

- Interdisciplinary rounds and enhanced communication among team members, including consistent interdisciplinary care planning involving case management, quality management, social work, nursing, pastoral services, pharmacy, and nutrition.
- One-on-one interventions for nurses to address personal, professional, and spiritual needs.
- Involvement of family in care, such as family presence in resuscitation.
- Communication and ethical decision making in end-of-life situations.
- “Ethics Drive By,” a brief interaction, typically 15 minutes, in which staff members briefly present a patient whom they feel may have ethical issues facing his/her plan of care.
- Group forums to provide assistance for intensive care unit nurses to distinguish between communication and ethical issues and provide options of care.
- Huddles/debriefing to provide a safe place for staff to process emotions after a critical event.

Healthy Workplace Initiative

Citing that cumulative distress on the job leads to absenteeism, sleep disorders, burnout, and physical and emotional health problems, the Emergency Nurses Association (ENA) developed a position statement on healthy work environments. Click here to access the ENA position statement:

https://www.ena.org/docs/default-source/resource-library/practice-resources/position-statements/healthyworkenvironment.pdf?sfvrsn=a4170683_12

In its Healthy Work Environments Initiative, the American Association of Critical Care Nurses (AACN) developed standards that describe a healthy work environment. Click here to access information about the AACN standards and other resources:

<https://www.aacn.org/clinical-resources>

The American Nurses Credentialing Center (ANCC) Magnet Recognition Program® includes criteria that indicate an environment of nursing autonomy and professional practice. Click here further information about the Magnet Recognition Program®:

<http://www.nursecredentialing.org/Magnet.aspx>

Organizational Resources

Many organizations have developed programs to help nurses prevent and manage stress.

Examples include (Schuster, 2014):

- Exercise programs, stretching and dance sessions, wellness centers, nurses' lounges with improved facilities and stress relievers such as massage chairs and jigsaw puzzles.
- Counseling, wellness counseling services, professional massages.
- Monthly group therapy sessions.
- Journaling for first-year nurses.
- A requirement that nurses hand over pagers, cell phones and other communication devices when on break or at meals.
- Knitting classes, Art therapy sessions, including pounding clay.

Be proactive. Find out how to recommend and if necessary seek funding for stress management programs in your organization. Your community may offer services at reasonable prices or free of charge.

Think About It

You're feeling pretty tired well into your third day of 12-hour shifts in the emergency department. You look out to triage and see a very familiar patient. The next admission is yours, but you feel too stressed out to handle it. You say to one of your RN colleagues, "Look who's back. You admit her – I can't deal with another ED 'frequent flyer' tonight."

Have you ever had a negative reaction to a particular patient even though you acted professionally and did not express a negative opinion? Have you ever called upon another team member to help you out when you felt you just couldn't cope? Before reading the suggestions below, think about how you can avoid stress in this situation.

- Detach yourself from the emotional component. Setting limits can help you manage stress. Is it reasonable to ask the other nurse to take this admission? If so, that may be your best option. If you take that approach, be sure to tell that nurse that you needed and appreciated her help. Offer to return the favor in the future.
- What is your professional role in this situation? If you must indeed admit this patient, take a few deep breaths or use another stress relief measure. Then make a plan. Protect yourself from stress by analyzing exactly what it is about this patient that gives you trouble. Before you approach the patient, decide how you will handle those aspects. If you can't think that through at the moment, talk it through with another nurse.
- Whether you wind up passing the admission to another nurse or admitting the patient yourself (with or without supportive consultation from a colleague), reflect on what it is about this patient that gives you trouble. Talk it through with another nurse or with your supervisor to identify some new approaches.

Personalized Stress-Proofing Habits

Self-care and self-valuing form a firm foundation for effective stress management. Remember the words of the flight attendant's safety speech – "Put on your own oxygen mask first before trying to assist someone else."

Getting started with a stress management plan requires discipline. It is very important to practice techniques routinely so that the technique is easily accessible in times of stress. A positive attitude helps to prevent the adverse effects of stress.

Researchers have identified techniques that increased happiness scores and lowered depressive symptoms. Regular practice and sustained practice over time produced best results (Benson & Casey, 2013):

- **Signature Strengths:** Identify your own top five "signature strengths." Some self-assessments can assist (see resources at the end of the course). The input of family and friends may also validate your strengths. Then, pick one of your strengths and every day for the next week, try to use that strength in a new way.
- **Three Good Things:** Every evening, reflect on the day's events and identify three things that went well. Record these events in a journal. Answer the question "How did that happen?" The journal provides a reference for building your stress resistance. Reflection helps you to set yourself up for stress relief by identifying some of the ingredients of successful experiences and envisioning ways to repeat those positive experiences.
- **Gratitude Visit:** Recall someone whom you would like to thank for helping you in some way. Write a letter that expresses gratitude and specifically states how the person's assistance affected you. Meet with the person and read the letter aloud. Reflect on your feelings and the other person's reaction.

More info: Five Proven Stress-Reducers (White, 2014)

1. Posture – sit up straight, shoulders back.
2. Get organized.
3. Abandon unrealistic goals.
4. Try to avoid interruptions.
5. Embrace your stress – the upside of temporary stress. Use temporary stress to enhance your performance, but learn ways to let it go.

Stop, Breathe, Reflect, and Choose

When you begin to feel stress (Benson & Casey, 2013):

STOP:

- Give yourself a time out.

BREATHE:

- Take a few deep, low breaths: in with fresh thoughts and feelings, out with tension.
- Look for other ways to metaphorically cleanse yourself of stress, such as during frequent handwashing that you do during your shift. Visualize that you are washing away stress.

REFLECT:

- Question yourself about this situation.
 - Can you reframe it more positively?
 - Are the threats you perceive real or imagined?
 - Are you jumping to conclusions?
 - What is the worst that could happen? How likely is that worst case scenario?

CHOOSE:

- Intentionally decide how to manage this stressor.
 - Remove the emotional component and focus.
 - Can you remove the stressor altogether? How can you work around it if you can't remove it?
 - Who and or what can help you manage the situation?

It's All About YOU

How you prevent and manage stress effectively probably differs in some ways from exactly what works for any other person. It is truly all about YOU:

- Which stressors trigger a stress response for YOU?
- Which physical, behavioral, emotional, and cognitive signs and symptoms do YOU experience?
- Which stress relief methods reduce the stress response for YOU?

Nurturing yourself and taking self-care measures increase your resistance to stress and your resilience in recovering from stressful episodes. Once again, the specifics of your self-care plan probably differ from the plans that others make for themselves, however for everyone, maintaining good physical health and a positive attitude serve as stress-proofers. Nutrition, exercise, affirmations, and supportive relationships complement one another to strengthen

resistance and recovery. Finding reliable means of inducing relaxation enables you to counteract the adverse effects of stress.

Think About It

You went to 12-hour shifts to have more time with your kids. But, you feel so exhausted and on your days off you cannot get your mind off the unit and some of your recent experiences with patients and other team members.

Have you ever found it difficult to “leave work behind?” What techniques did you use to let it go? Before reading the suggestions below, think about how you can avoid stress in this situation.

- Do whatever stress relief activity aids you in focusing, such as deep breathing, exercising, or meditating. Let go of the feelings of overwhelmed frustration.
- What do you want to accomplish in this situation? Let go of unrealistic expectations. Identify your priorities. If possible, create a structured routine to safely manage those responsibilities.
- Amongst your priorities, identify the one or two most important items for today: on the unit, with your children, or in other dimensions of your life. Plan specific time to address each priority.
- Take one step at a time and focus fully on the priority you are dealing with at the moment; you are not neglecting other priorities, they are just not the highest priority in this moment.
- Practice meditation and focus techniques.
- Reflect on your progress. Make a habit of sharing your perceptions and accomplishments in managing your priorities with your colleagues and friends. You may discover some new techniques.
- If you are not satisfied with the results of prioritizing, planning, and validating with your network, investigate formalized stress relief training (such as yoga or meditation) or counseling resources.

Conclusion

This course has:

- Provided up-to-date information about stress, the stress response, stress prevention, and stress management.
- Presented research and recommendations specific to the healthcare setting.
- Suggested proven techniques to prevent and relieve stress.

Healthcare professionals can use the information to manage their own stress more effectively and prevent burnout. Healthcare professionals can also use the information to assist patients and their families in managing stress more effectively.

As you studied the course you have learned or refreshed your knowledge of:

- *The physiological response to stress and the effects of sustained stress.*
- *Physical, behavioral, emotional, and cognitive signs and symptoms of the stress response.*
- *Implications of gender, age, generation, and workplace upon stress and stress responses.*
- *Organizational and worker-focused strategies to improve stress management in the healthcare setting.*
- *General categories of stress prevention and relief strategies and examples of within each category.*
- *Stress management techniques that address sample clinical situations.*

Resources

American Psychological Association

<http://www.apa.org/news/press/releases/stress/index.aspx>

The American Institute of Stress

<http://www.stress.org/>

Emotional Agility Quiz

<http://www.susandavid.com/ea-quiz/>

Harvard's Benson-Henry Institute for Mind Body Medicine

<http://www.massgeneral.org/bhi/>

National Institute for Occupational Health and Safety (NIOSH)

www.cdc.gov/niosh/topics/stress

NIOSH Quality of Work life Questionnaire

<http://www.cdc.gov/niosh/topics/stress/qwlquest.html>

Relaxation Techniques for Health

<https://nccih.nih.gov/health/stress/relaxation.htm>

Stress Education Center

<http://www.dstress.com>

University of Pennsylvania Positive Psychology Center

Self-assessments related to happiness available at no charge.

<http://www.authentic happiness.sas.upenn.edu>

Disclaimer

This publication is intended solely for the educational use of healthcare professionals taking this course, for credit, from RN.com, in accordance with RN.com [terms of use](#). It is designed to assist healthcare professionals, including nurses, in addressing many issues associated with healthcare. The guidance provided in this publication is general in nature and is not designed to address any specific situation. As always, in assessing and responding to specific patient care situations, healthcare professionals must use their judgment, as well as follow the policies of their organization and any applicable law. This publication in no way absolves facilities of their responsibility for the appropriate orientation of healthcare professionals. Healthcare organizations using this publication as a part of their own orientation processes should review the contents of this publication to ensure accuracy and compliance before using this publication. Healthcare providers, hospitals and facilities that use this publication agree to defend and indemnify, and shall hold RN.com, including its parent(s), subsidiaries, affiliates, officers/directors, and employees from liability resulting from the use of this publication. The contents of this publication may not be reproduced without written permission from RN.com.

Participants are advised that the accredited status of RN.com does not imply endorsement by the provider or ANCC of any products/therapeutics mentioned in this course. The information in the course is for educational purposes only. There is no “off label” usage of drugs or products discussed in this course.

You may find that both generic and trade names are used in courses produced by RN.com. The use of trade names does not indicate any preference of one trade named agent or company over another. Trade names are provided to enhance recognition of agents described in the course.

Note: All dosages given are for adults unless otherwise stated. The information on medications contained in this course is not meant to be prescriptive or all-encompassing. You are encouraged to consult with physicians and pharmacists about all medication issues for your patients.

References

Allan, J.L., Farquharson, B., Johnston, D.W., Jones, M.C., Choudhary, C.J., & Johnston, M. (2014). Stress in telephone helpline nurses is associated with failures of concentration, attention and memory, and with more conservative referral decisions. *British Journal of Psychology*, *105*, 200–213

American Psychological Association (APA). (2014). *Stress in America Are teens adopting adults' stress habits?* Stress in America Survey™.

American Psychological Association (APA). (2017). *Stress in America: The State of Our Nation*. Stress in America™ Survey.

American Psychological Association (APA). (2018). Coping with Stress at Work. Retrieved 3/9/18 from <http://www.apa.org/helpcenter/work-stress.aspx>

Benson, H. & Casey, A. (2013). *Stress management: Approaches for preventing and reducing stress*. Boston, MA: Harvard Health Publications.

Campbell, D. (2013). Spirituality, stress, and retention of nurses in critical care. *Dimensions of Critical Care Nursing*, *32*(2), 78-83.

Centers for Disease Control and Prevention. (2017). Heart Disease Facts. Retrieved February 2018 from <https://www.cdc.gov/heartdisease/facts.htm>.

Centers for Disease Control and Prevention. (2018). Stroke. Retrieved March 2018 from <https://www.cdc.gov/stroke/index.htm>.

Cuneo, C.L., Curtis Cooper, M.R., Drew, C.S., Naoum-Heffernan, C., Sherman, T., & Walz, K., & Weinberg, J., (2011). The effect of Reiki on work-related stress of the Registered Nurse. *American Holistic Nurses Association*, *29*(1), 33-43.

David, Susan. (2016). *Emotional agility: Get unstuck, embrace change, and thrive in work and life*. New York, NY: Avery.

Deible, S., Fioravanti, M., Tarantino, B., & Cohen, S. (2015). Implementation of an integrative coping and resiliency program for nurses. *Global advances in health and medicine*, *4*(1), 28-33.

Denollet, J. (2005). DS14: Standard assessment of negative affectivity, social inhibition, and Type D personality. *Psychosomatic Medicine*, *67*, 89-97.

Fink, George. (2016). *Stress: The Health Epidemic of the 21st Century*. Elsevier Scitechconnect.

Retrieved 3/7/18 from <http://scitechconnect.elsevier.com/stress-health-epidemic-21st-century/>.

Graves, A., Jones, L., & Kaplan, F.F. (2013). Draw-a-Person-in-the-Rain: Does geographic location matter? *Art Therapy: Journal of the American Art Therapy Association*, 30(3), 107-113.

Hersch, R.K., Cook, R.F., Deitz, D.K., Kaplan, S., Hughes, D., Friesen, M.A., & Vezina, M. (2016). Reducing nurses' stress: a randomized controlled trial of a web-based stress management program for nurses. *Applied Nursing Research*, 32: 18–25. doi:10.1016/j.apnr.2016.04.003

Masuda, M. & Holmes, T.H. (1967). The Social Readjustment Rating Scale: a cross-cultural study of Japanese and Americans. *Journal of Psychosomatic Research*, 11(2), 227-37.

Mayor, E. (2015). Gender Roles and Traits in Stress and Health. *Frontiers in Psychology*, 6, 779. doi: 10.3389/fpsyg.2015.00779

McHill, A.W., Melanson, E.L., Higgins, J., Connicke, E., Moehlmana, T.M., Stotharda, E.R., and Wright, K.P. (2014). Impact of circadian misalignment on energy metabolism during simulated nightshift work. *Proceedings of the National Academy of Sciences of the USA*, 111(48), 17302-17307.

McCarten, K. (2011). Coping with the challenges of shift work. NurseZone.com. Retrieved November 2014 from http://www.nursezone.com/Nursing-News-Events/more-news/Coping-with-the-Challenges-of-Shift-Work_37124.aspx.

McCloskey, S., & Taggart, L. (2010). How much compassion have I left? An exploration of occupational stress among children's palliative care nurses. *International Journal of Palliative Care*, 16(5), 233–240.

McHugh, M.D., Kutney-Lee, A., Cimiotti, J.P., Sloane, D.M., & Aiken, L.H. (2011). Nurses' widespread job dissatisfaction, burnout, and frustration with health benefits signal problems for patient care. *Health Affairs*, 30(2), 202-210.

McVicar, A., Ravalier, J. M., & Greenwood, C. (2014). Biology of stress revisited: Intracellular mechanisms and the conceptualization of stress. *Stress Health*, 30, 272–279.

Mealer, M., Conrad, D., Evans, J., Jooste, K., Solyntjes, J., Riethbaum, B., & Moss, M. (2014). Feasibility and acceptability of a resilience training program for Intensive Care Unit nurses. *American Journal of Critical Care*, 23(6), e97-e105.

National Council of State Boards of Nursing (NCSBN, 2013). 2013 national nursing workforce survey of Registered Nurses. *Journal of Nursing Regulation*, 4(2), S3-S72.

*National Center for Complementary and Integrative Health. (NCCIH, 2016). Relaxation Techniques for Health. Retrieved on 3/2/18 from <https://nccih.nih.gov/health/stress/relaxation.htm>.

Peters, L., Cant, R., Sellick, K., O'Connor, M., Lee, S., & Burney, S. (2012). Is work stress in palliative care nurses a cause for concern? A literature review. *International Journal of Palliative Nursing*, 18(11), 561-567.

Purcell, S.R., Kutash, M., & Cobb, S. (2011). The relationship between nurses' stress and nurse staffing factors in a hospital setting. *Journal of Nursing Management*, 19, 714–720.

Schuster, J. (2013). With nurses at risk of compassion fatigue, hospitals try to ease their stress. Retrieved November 2014 from http://www.washingtonpost.com/national/health-science/with-nurses-at-risk-of-compassion-fatigue-hospitals-try-to-ease-their-stress/2013/06/07/b92b9e86-97e3-11e2-97cd-3d8c1afe4f0f_story.html.

Smith, S.A. (2014). Mindfulness-based stress reduction: An intervention to enhance the effectiveness of nurses' coping with work-related stress. *International Journal of Nursing Knowledge*, 25(2), 119-130.

Shockley, K.M., Shen, W., DeNunzio, M.M., Arvan, M.L., Knudsen, E.A. (2014). Disentangling the Relationship Between Gender and Work–Family Conflict: An Integration of Theoretical Perspectives Using Meta-Analytic Methods. *Journal of Applied Psychology*, 102(12), 1601-1635. doi: 10.1037/apl0000246

Taylor, S. (2014). Research reveals the benefits of meditation. *Nurse.com*, 28-33.

White, M.C. (January 22, 2014). 5 scientifically proven ways to reduce stress at work. *Time*. Retrieved November 2014 from <http://business.time.com/2014/01/22/5-scientificallly-proven-ways-to-reduce-stress-at-work/>.

Yardley, J. (2014). Staff must be prepared to beat stress before it beats them. *Nursing & Residential Care*, 16(2), 108-110.

Yoon, H.-S., Lee, K.-M., and Kang, D. (2014). Intercorrelation between immunological biomarkers and job stress indicators among female nurses: a 9-month longitudinal study. *Frontiers in Public Health*. 2(157), 1-10. doi: 10.3389/fpubh.2014.00157

Wilson, A.B., Vilardo, M., Fellingner, R., & Dillenbeck, T. (2015). *New York Journal of Student Affairs*. 14,(2), 3-17.

Wright, K. (2014) Alleviating stress in the workplace: Advice for nurses. *Nursing Standard*. 28(20), 37-42.

Zelman, K.M. (2014). Foods that help tame stress. *WebMD*. Retrieved November 2014 from <http://www.webmd.com/diet/ss/slideshow-diet-for-stress-management>.

Zheng, R., Lee, S.F., & Bloomer, S.J. (2017). How nurses cope with patient death: A systematic review and qualitative meta-synthesis. *Journal of Clinical Nursing*, 27 (1-2), e39-49. doi: 10.1111/jocn.13975