

**BINDURA UNIVERSITY OF SCIENCE EDUCATION**

**FACULTY OF COMMERCE**

**DEPARTMENT OF HUMAN RESOURCES**



**THE NEXUS BETWEEN STRESS MANAGEMENT INTERVENTIONS  
AND ORGANISATIONAL PERFORMANCE: A CASE OF MAKONDE  
CHRISTIAN HOSPITAL.**

**SUBMITTED**

**BY**

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**A DISSERTATION SUBMITTED IN PARTIAL FULFILLMENT OF  
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i. APPROVAL FORM

The undersigned certify that the supervisor have read and recommended to Bindura University of Science Education for examination, a Research Study entitled **“The nexus between stress management interventions and organizational performance: A case of Makonde Christian Hospital**, submitted by **Meey B Masiya** in partial fulfillment of the requirement for the Bachelor in Commerce Honors Degree in Human Capital Management.

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## ii. RELEASE FORM

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### iii. DEDICATION

This research is dedicated to my parents and my husband who have been the source of inspiration throughout my education endeavor. They have given me the drive and discipline to tackle the task with enthusiasm and determination. Without their love and support this project would not have been made possible. I would also want to be grateful to my brothers, sisters, friends and classmates who shared their words of encouragement to finish this study. And lastly, I would like to dedicate this research to the Almighty God, who has been guiding me and giving me strength, power of mind, protection, skills and knowledge to reach where I am today.

#### **iv. ABSTRACT**

This research intends to investigate the nexus between stress management intervention techniques and organizational performance at Makonde Christian Hospital. The research was conducted in form of a case and casual study in which a sample size of 49 out of a total population of 71 was used. Both stratified and judgmental sampling methods were employed in the selection of participants. Furthermore, questionnaires and interviews were used to collect data from the sample, in presenting and analyzing the collected data, the thematic approach was used in which themes were derived from the research questions. After analyzing the collected data, the research findings revealed that stress management intervention techniques indeed are being implemented and are also related to a positive organizational performance at the organization.

In addition, the study also recommends that the organization should avail adequate funds for training and development, include employees in decision making, organizational policies reformations and improve communication channels.

## **v. ACKNOWLEDGEMENTS**

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## CHAPTER I

### Introduction and background

#### 1.0 Introduction

This chapter focused on the research problem itself, the background and purpose of the search. The study sought to assess, the nexus between stress management intervention and organizational performance at Makonde Christian Hospital. This chapter includes background to the study, statement of the problem, objectives of the study, research questions or sub problems, significance of the research, assumptions, and definition of terms, limitations, delimitations and the summary of the whole chapter.

#### 1.1 Background to the Study

Since 1980, occupational health physicians, professionals, have placed a significant focus on workplace stress in Zimbabwean hospitals because of the effects it has on productivity (Biron & Karanika-Murray, 2014; Gachter, Savage, & Torgler, 2021; Kossek, Pichler, Bodner, & Hammer, 2011; Pridgeon & Whitehead, 2013). Globalization, innovation in technology, increased competition, work intensification, and workforce diversification have all led to increased pressure and stress in the workplace (Kalliath & Kalliath, 2012). Workplace stress has increased continually since the mid-1980s and creates a significant burden for organizations through direct and indirect costs such as lost workdays, lower productivity, high turnover rates, increased staffing, and health benefit costs (Walinga & Rowe, 2013). Workplace stress in the Zimbabwe costs employers 300 million per annum; in the Zimbabwe, in wages and productivity through mental health or stress-related absence from work. (Spurgeon, Mazelan, & Barwell, 2012).

Organizational leaders must intervene to ensure a healthy workforce, increase productivity, remove inefficiencies, lower costs, and encourage behaviors that will contribute positively to the social-psychological environment of the workplace (Karam, 2021). Although researchers have examined a number of issues that give rise to workplace stress, social support and work–life conflict and their impact on workplace stress have remained an underdeveloped topic (Fernandes & Tewari, 2012; Jain, Giga, & Cooper, 2013; Kossek, Pichler, et al., 2011; Pridgeon & Whitehead, 2013).

In the worldwide organizations, employee stress management has appeared as an increasingly demanding chore for organizations management and is peculiar to healthcare and manufacturing firms. According to Adeoye, Aliu and Soladerin (2012), and Hubbard (2019), employees are engaged in tasks characterized by stressful work-related activities and these stress-related activities in the views of Plattner and Mberengwa (2014), have rippling effects on organizational performance, since 'bad' stress may negatively influence organizational performance while 'good' stress may have positive influence. Amazingly, employees of organizations, particularly those in healthcare sector are usually confronted with more stress than other.

Nevertheless, Manabete, et al. (2016) Ashfaq and Muhammad (2013) reiterated that due to the stress employees face in the work environment, it makes them unsettle, thus leading to low performance. Given the supposed negative effect of employee stress, Akomolafe and Ogunmakin (2014) emphasized the need for organizations to effectively management stress faced by employees. Chovwen (2013) and Ekundayo (2014) see employee stress management as a process of controlling emotional and physical conditions of employees within an organization so as to forestall mental disorders. Evidently, stress impact on the physical and emotional wellbeing of employees, which result to decline in organizational performance (Obiora & Iwuoha, 2013; Chemdhok & Monga, 2013; Sun & Chiou, 2014); work engagement (Holzemer, 2011; Laiba, Anum, Muhammad, Naseem & Kashif, 2011; Raheem, Nawaz & Imamuddin, 2014; Olusegen, Oluwasayo & Olawoyin, 2014).

The foremost cause of employee stress in Africa and world over as Sun and Chiou (2014) notes it is derived from work overload. Inexplicably, rather than focusing on positive outcome of employee stress management on organizational performance, extensive attention has been on negative outcomes of employee stress on performance, even though stress could equally stimulate people to work better (Raddy & Anuradha, 2013; Omolara, 2014). Thus, lack of ability by organizations to engage in effective stress management has made employees unveil some forms of depressions, anxiety as well as job dissatisfaction (Manabete et al, 2016; Akingbola & Adigun, 2010).

In present scenario, the most common issue in corporate world is stress at workplace. Many studies are focusing on stress at work place and there is a growing concern that stressful working conditions have negative impact on employee and organizational performance. The

employees in many companies are claiming that they are experiencing high levels of stress at work place. This is because; there often is an emphasis on high productivity and in turn gaining competitive advantage in corporate world. In today's economic world, work related stress is even more pronounced than ever before.

It is a very serious employment issue that makes the organizations to turn their approach towards stress management to resolve the stress related issue in work station because it's not only affects the employee performance but also effects every organization in terms of lower productivity. In the healthcare sector for instance, employee stress management is becoming a major aspect of study in management literature since the sector is a very sensitive and vital sector in most viable economies of the world. The performance dimensions affected by poor stress management as noted by Artz, Norman, Hatfield and Cardina (2020) encompass market share, earnings per share, returns among others. The intervention techniques used are management training, wellness training, employee empowerment and involvement, occupational rehabilitation.

### 1.2 Statement of the problem

The health care staff is widely regarded as a group that is at high risk of work stress and job dissatisfaction. High levels of work stress are related to higher sickness absenteeism rates and decreased performance thereby jeopardizing patient safety. Hence, effective interventions to prevent work stress and to improve health, well-being, and performance of health care employees are badly needed. To maintain effective employee stress management; organizations have resort to providing vacations for employees and even engaging in health disclosure. More importantly, since healthcare sector could be poorly influenced by stress leading to declined performance, there is therefore the need to carry out an investigation on the nexus between stress management intervention and organizational performance at Makonde Christian Hospital.

### 1.3 Research Objectives

This study has the following objectives:

1.3.1 To ascertain the relationship between wellness training and organizational performance at Makonde Christian Hospital.

1.3.2 To examine the impact of employee empowerment and organizational performance at Makonde Christian Hospital.

1.3.3 To assess the effect of occupational rehabilitation on organizational performance at Makonde Christian Hospital.

1.3.4 To suggest solutions and recommendations on the stress management intervention and the organizational performance at Makonde Christian Hospital.

### 1.4 Research Questions

The following questions guided this research:

1.4.1 What is the employee empowerment and involvement in stress management intervention and the organizational performance at Makonde Christian Hospital?

1.4.2 What is the wellness training in stress management intervention and the organizational performance at Makonde Christian Hospital?

1.4.3 What is the occupational rehabilitation on stress management intervention and the organizational performance at Makonde Christian Hospital?

1.4.4 What are the solutions and recommendations on the stress management intervention and the organizational performance at Makonde Christian Hospital?

### 1.5 Hypothesis

This study is based on the following hypothesis:

H<sub>0</sub>: There is no relationship between stress management intervention and organizational performance.

H<sub>1</sub>: There is relationship between stress management intervention and organizational performance.

### 1.6 Assumptions

Assumptions are obvious realities or facts related to research, and without these assumptions, the research is pointless (Denscombe, 2013). Researchers must declare all the assumptions they make during the course of their research (Denscombe, 2013). I assumed that the number of employees of the subject Makonde Christian Hospital who participated in the study would meet or exceed the minimum number of participants required to achieve the desired level of statistical power.

This study is based on the following assumptions:

1.6.1 The selected sample will be a representation of the Makonde Christian Hospital.

1.6.2 The respondents are able and prepared to express their opinions freely and honestly.

1.6.3 The resources were available for the study to be carried out.

1.6.4 To provide accurate and honest information regarding their perceptions of social support, work–life conflict, job performance, and workplace stress.

### 1.7 Purpose of the research

This study was an attempt to increase the current level of knowledge of the existing literature on the nexus between stress management intervention and organizational performance. In terms of its theoretical contribution, first, this study contributes to the body of literature on the relationship between stress management intervention and the organizational performance.

### 1.8 Justification of the research

This study was basically done to highlight the nexus between stress management intervention and organizational performance at Makonde Christian Hospital. According to Maslach's (1982) findings on health care workers, the requirement of attending on and caring for

patients continuously imposes stress management intervention on health care professionals. It is being found that the workers who are able to practice stress management intervention are able to be good in organizational performance. After this their mindset can perform well in their work although they try to give their best. These workers are trained to practice stress management intervention maintain a calm attitude around their patients and thus they suppress their real feelings and express the one that organisation wants. It's exactly equal to the separation of internal conscience from brain. This study has been basically conducted in Makonde Christian Hospital. The respondents are the employees of the Makonde Christian Hospital.

### 1.8 Significance of the research

The research will be very useful to the university students who are still contemplating on the nexus between stress management intervention and organizational performance. It will help the researcher, the organisation (Makonde Christian Hospital), academic board and the government.

#### 1.8.1 The researcher

The researcher is doing Bachelors science honors in Human Capital Management. Thus this study will enlighten the researcher on the nexus between stress management intervention and organizational performance at Makonde Christian Hospital

#### 1.8.2 Makonde Christian Hospital

Firstly, Kellett et al. (2006), argue that leaders have to engage in stress management intervention in order to produce good

Organisational performance from their employees. They may have to display a wide variety of emotions, ranging from friendliness, to sympathy and support, to anger. Thus, they must be able to display all of the emotions required by different types of service workers and use judgment about which emotion to display at a particular time. In the case of Makonde Christian Hospital, the Hospital administrator who is the boss will be able to engage in stress management intervention such as nurses and doctors produce good organisational performance.

#### 1.8.3 Academic board

The academic board will benefit with the knowledge from the study on the nexus between stress management intervention and organizational performance at Makonde Christian Hospital. Also getting literature from the view from other researchers and authors thus promoting education 5.0 onto outcomes-focused national development activities towards a competitive, modern and industrialized Zimbabwe. It is now all about problem-solving for value-creation. Additionally, McColl-Kennedy and Anderson (2002) found that leaders influenced subordinates' feelings of frustration and optimism. Drawing on transformational leadership theory, McColl-Kennedy and Anderson argued that one of the important functions of leaders was to instil feelings of optimism and to convince followers that challenging goals were obtainable. They found that transformational leaders had strong positive effects on subordinates' feelings of optimism.

#### 1.8.4 Government

It enables the government to make informed decisions. The government will know the relationship between the stress management intervention and organizational performance and thus they make informed decisions.

#### 1.9 Delimitations of research

This research was confined to a study of Makonde Christian Hospital. However, adequate hospitals will be sampled for the purpose of the study to make results more generalizable and it is hoped that the research findings will be utilized to stimulate further research in the other state hospitals to establish whether similar results would be obtained. Makonde Christian Hospital, has two Hospitals and they are Private healthcare organisation, in Mhangura, Norton, Mashonaland West, Zimbabwe. Makonde Christian Hospital is the only referral health institution in Mhangura constituency but for years been operating with limited equipment and machinery. Mhangura, its latitude is -16.8938700, and longitude 30.1682800. With a population of 6.503 inhabitants, Mhangura time zone is Africa/Harare (Africa/Harare\_cet). The theory of preventive stress management (TPSM) has contributed to theoretical understanding, empirical exploration and organizational practices since its introduction in 1979. Cooper (1998) identified 12 leading theories of organizational stress, which range from Maslach's (1998) theory of burnout and Edwards, Caplan, and Van

Harrison (1998) person–environment fit theory to Siegrist’s (1998) effort–reward imbalance theory, Theorell’s (1998) job demand–control model and Quick, Quick, and Nelson’s (1998) theory of preventive stress management (TPSM). At the time of Cooper’s review, the TPSM had been in existence for about 20 years, and its origins in public health and preventive medicine had never been fully explored.

#### 1.10 Limitations of the research

The researcher foretells the following constraints which affect reliability and validity of these findings:

##### 1.10.1 Financial Resources

The financial constraints as the limiting factor. It limits the study of all hospitals in Zimbabwe hence only the study of Makonde Christian Hospital. Additionally there was need to increase personal savings to finance costs incidental to the research.

##### 1.10.2 Time

The researcher will have a limited time to undertake the research therefore she was not able to cover the whole Makonde Christian Hospital. The lack of time resulted in the researcher focusing on the hospital. Thus, the little time frame to prepare for the project, Also the time constraints in data collection as researcher will be preparing for examinations, assignments and work. By taking off days from work to concentrate on the research might be of great help.

##### 1.10.3 Questionnaires

The questionnaires might be left unattempt by the respondents, due to their personal commitments. The researcher might try to distribute them to respondents in time so that their spare time so that they can be attend to them. The language of questionnaire might be a barrier as the researchers have to consume a lot of time to explain the contents of the questionnaire.

##### 1.10.4 Respondents

Respondents might withhold information which they view as sensitive and needed permission from the relevant management. By dealing with this problem the researcher will seek permission from the management. Also, to avoid this limitation clear aims of the study should be communicated and the agreement between the researcher and respondents. Lack of awareness can be another limitation from respondents and the lack of cooperation from hospital management and staff.

### 1.11 Definition of terms

1.11.1 Nexus is a Latin word for connection, usually where multiple elements meet John Stoner (2018).

1.11.2 Stress management is a wide spectrum of techniques and psychotherapies aimed at controlling a person's level of stress, especially chronic stress, usually for the purpose of and for the motive of improving everyday functioning. Stress produces numerous physical and mental symptoms which vary according to each individual's situational factors. These can include a decline in physical health, such as headaches, chest pain, fatigue, and sleep problems Cannon, W. (2019)

1.11.3 Organizational performance comprises the actual output or results of an organization as measured against its intended outputs (or goals and objectives). Organizational performance is also the success or fulfilment of organization at end of program or projects as it is intended. According to Richard et al. (2019) organizational performance encompasses three specific areas of firm outcomes financial performance (profits, return on assets, return on investment, etc.); (product market performance (sales, market share, etc.); and shareholder return (total shareholder return, economic value added.)

### 1.12 Dissertation Outline

This study will be organized into five chapters. The specific information contained in these five chapters is listed below.

Chapter One discusses the research background, research questions and objectives research, importance or significance of the research, assumptions, definition of terms, limitations, delimitations and summary.

Chapter Two provides a review of the literature on in the nexus between stress management intervention and organizational performance. Following an extensive review of literature, hypotheses and an empirical testing model were proposed.

Chapter Three presents the methodology of the study. It explains the steps involved in the nexus between stress management intervention and organizational performance at Makonde Christian Hospital

Chapter Four presents the results of the statistical analysis.

Chapter Five includes the findings of the study in relation to the hypotheses, and provides managerial implications. The limitations of the study and suggestions for future research are also discussed.

#### [1. 13 Chapter Summary](#)

This chapter outlined on the background and purpose of the search. The study sought to assess, the nexus between stress management intervention and organizational performance at Makonde Christian Hospital. This chapter will include background to the study, statement of the problem, objectives of the study, research questions or sub problems, importance or significance of the research, assumptions, definition of terms, limitations, delimitations and summary.

## **CHAPTER II**

### **Literature review**

#### **2.1 Introduction**

A literature review is a piece of academic writing that contextualizes the academic literature on a certain topic to show expertise and understanding of it. The chapter sought to present a theoretical framework in understanding the connection between stress management interventions and organizational performance at Makonde Christian Hospital by looking at different scholarly views, opinions and works surrounding the study at hand.

#### **2.2 Theoretical review**

In order to better understand the relationship between stress management interventions and organizational performance, this study will provide information on how management training, wellness training, employee empowerment, and occupational rehabilitation affect organizational performance. The input-process-output (IPO) framework serves as the foundation for a conceptual framework. This conceptual model expands on the notion that job demands that lead to stress, anxiety, and burnout in workers include complexity, work burden, skill discretion, and the physical environment. Productivity, adaptability, and performance are the main outcomes of stress management interventions whereas management training, wellness training, employee empowerment, and occupational rehabilitation are some of the job resources that act as inputs.

##### **2.2.1 The Input-Processes-Output (IPO) model**

###### **2.2.1.1 Input**

The methodical process of performing group tasks has been challenged by the ever-shifting workplace to virtual organizations. The situational leadership approach of Hersey-Blanchard is the most suitable and adaptable for examining leadership behaviours in a dynamic work context (Hersey and Blanchard 1969; McCleskey 2014). Relationship orientation is on the opposing side of the continuum from task orientation, according to Hersey-Blanchard. The task-related and people-related leadership behaviours were the main emphasis of this study, which was guided by the Hersey-Blanchard leadership paradigm.

The need of training programs to deal with stress management and performance issues is also noteworthy (Salain 2017). Training programs that emphasize relaxation, mindfulness, and increased resilience are crucial for enhancing performance and eustress (positive stress management) (Gharib et al. 2016; Botwe et al. 2017; Ismail et al. 2015). Employees must have the guarantee of a durable and robust career in addition to training to be able to function well in a constantly changing environment and maintain maximum organisational performance (Foy 2015). According to Urbanaviciute et al. (2018), employment insecurity is a stressor, hence stress management can be predicted by employment security.

The need to support employees in managing stress by offering leadership support, stable employment, and training is at the core of performance enhancement with stress management parameters (Kati'c et al. 2019). Taking into account these results, this study hypothesized that wellness training, management training, employee empowerment and occupational rehabilitation are input elements in the stress management process that leads to greater organisational performance.

#### 2.2.1.2 Process

By controlling occupational stress, which mediates the relationship between input and output, management training in the context of services (Abbasi 2018) enhance organisational performance and productivity. As a result of globalization radical transformations and technology integration, supportive management behaviours are helpful in reducing occupational stress (Jedynak and Bak 2018). Online training courses for stress management are available in the meantime (Heber et al. 2016). To improve resilience and stress management, managers and employees might benefit from training (Brooks et al. 2019). Organisational performance may be hampered by stress related to employment security and workplace responsibilities (Yang et al. 2018). Numerous studies have shown that those who can control their stress levels are happier, more productive, and more motivated (Fried et al. 2008). Situational-affected service personnel are more prone to experience stress and emotional exhaustion in both their personal and professional lives because felt insecurity may result in behavioural adjustments toward performance (Bartsch et al. 2020). Accordingly, this study put out the hypothesis that employee empowerment (Pacheco et al. 2020), effective management behaviour from management trainings, wellness training programs have a favourable impact on stress management in businesses, which in turn increases organisational

performance. This study concentrated on the aspects of stress management known as optimism, mindfulness, coping, and resilience. A psychological characteristic of positive outcome expectations is optimism. Positively accepting difficulties, responding confidently in stressful situations, and believing in the best results even in challenging circumstances are all traits of those with an optimistic outlook (Layard and Sachs 2017).

Being mindful is a mental attitude that prevents you from passing judgment and reacting emotionally to your surroundings (Zgierska et al. 2009). It incorporates self-reliance, self-compassion, non-judgmental, non-striving, and a letting-be attitude as a method to experience reality (Vanderhoof 2015). According to Aikens et al. (2014), the foundation for efficient stress management and intervention is mindfulness. Training in mindfulness-based stress reduction (MBSR) in the workplace enables people to identify stress triggers and take appropriate action to control their stress levels (Mindfulness Initiative 2016; Carter and Halter 2019). According to Weber et al. (2014), resilience is a dynamic phenomenon and a consistent personality attribute that affects the self-regulatory process. Employees' capacity for developing interventions and modifications in a highly stressful work environment is known as resilience and is therefore recognized as an essential component of the stress management process (Rees et al. 2015). Similarly, the ability to adapt to a situation after a negative experience is known as coping. In general, coping skills support the process of managing stress in two ways: problem-focused techniques are prioritized while taking the realities of the situation into account. To counteract the negative psychological and emotional impacts of stressors, emotion-focused methods are prioritized (Baqutayan 2015). Accordingly, this study suggested that stress management is a process of fostering employees' resilience, mindfulness, optimism, and coping skills throughout pandemic transitions, all of which have a good effect on performance.

#### 2.2.1.3 Output

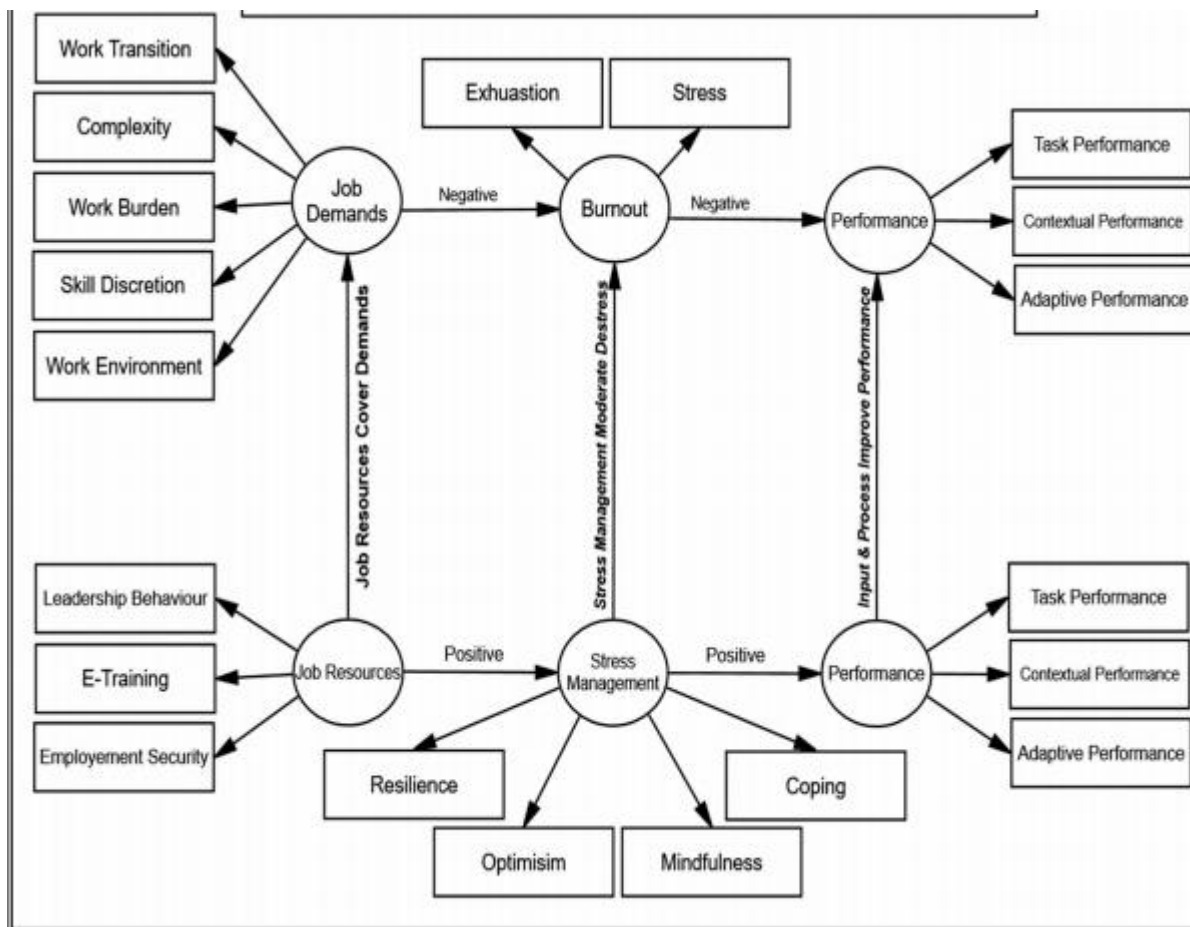
The third component of the IPO model, output, is often defined as the extent to which service personnel meets performance goals (Dulebohn and Hoch 2017). Proactivity is increasingly important since personnel in firms must adapt to the dynamic environment (Griffin et al. 2010). As a result, self-driven work behaviours, proactivity, and adaptability are appropriate performance measures (Bartsch et al. 2020). Employee performance, according to Pradhan and Jena (2017), involves effective task performance, adaptable performance, and contextual

performance. Task completion is defined as working explicitly and carrying out the obligations listed in the job description. Employees must have the following abilities in order to perform their tasks effectively: cognitive skills, task knowledge (the technical expertise needed to complete a task and the capacity to complete multiple assignments), task skill (the application of technical knowledge to effectively complete the task with little to no supervision), and task habit (the internal drive to complete the assigned task) (Conway 1999). The ability to adapt behaviours to the various job requirements under unpredictable scenarios, such as those that arise through technological transitions, is referred to as adaptive performance (Ilgen and Pulakos 1999). The execution of unspoken prosaically or extra-role activities that are expected but not explicitly indicated in the job description is referred to as contextual performance (Bateman and Organ 1963). This study addressed task performance, adaptive performance, and contextual performance as result components of the input-process-output paradigm, which all drives organisational performance referring to the aforementioned sources.

#### 2.2.2 Integration of Job Demands-Resources Theory

The JD-R model was first presented by Demerouti et al. (2001), and it quickly rose to become one of the top models for occupational stress (Hu et al. 2013). The JD-R model makes the assumption that how effectively work demands and resources are balanced affects employees' stress levels, wellbeing, and organisational performance and productivity. Job demand was described by Bakker and Demerouti (2014) as the physically, psychologically, socially, and organizationally demanding elements of a job that have the potential to cause stress and necessitate ongoing psychological and physical costs. In addition, job resources are tangible, interpersonal, or institutional components that make it easier to complete tasks and achieve objectives by lowering stress. Two potential burnout pathways were covered by Bakker et al. (2014). First, the demands of the job, such as the workload, the physical workplace, the transitions between tasks, and the pressure of the clock, cause stress and tiredness. Second, burnout can be triggered by a lack of resources including job control, job stability, rewards, leadership support, autonomy, and feedback. Similarly, two processes—the energy-driven process (job demand burnout poor performance) and the motivation-driven process (job resources engagement good performance)—operate separately (Bakker and de Vries 2020).

Figure 1. Illustrates how job demands-resources theory and performance are combined.



## 2.3 Conceptual Framework

### 2.3.1 Management training

Employees can receive online training through a procedure called "e-training" (Amara and Atia 2016). Training programs for the development of employees contribute essentially to stress management. Companies provide training courses to train staff with the necessary techniques for stress management (Grawitch) et al. 2015). Employees' performance is improved by training in stress management programs (SMPs). Resilience, mindfulness, and relaxation are all beneficial (Van Wingerden and Derks 2018; Sahlin et al. 2014; Van der Riet et al. According to definitions of resilience (Fletcher and Sarkar 2012; Sarkar and Fletcher 2014), which take into account the impact of well-designed training programs, resilience has two aspects: one is more fixed and stable related to an individual's personality, and the other is flexible and changeable as a result of interactions with the environment (Wagstaff et al.

2017). Therefore, consistent practice and education foster adaptation, resilience, and coping mechanisms to efficiently handle stress in changing circumstances (Grawitch et al. 2015). Additionally, mindfulness is a mental practice that teaches one to remain present in the moment and accept it quietly rather than reacting negatively to it (Sahni 2020). According to Lacerenza et al. (2017), organizational leaders offer training programs for staff members on coping and stress management techniques to enhance organisational performance. By offering awareness of the circumstance and action plans to lessen the impact of stressors, training programs during uncertain scenarios assist employees build relaxation, motivation, and positive coping mechanisms abilities that are important for stress management.

In light of the previously discussed insights, it was suggested in this study that management and employee training could help organisational staff cope with stress by promoting optimism, resilience, mindfulness, and coping mechanisms which directly enhance the performance of the organisation.

### 2.3.2 Wellness training

The wellness training programs help employees maintain their mental and physical fitness and work optimally so that organisational performance also stays at its best. The programs help employees deal with stress, fatigue and other strains. Effective wellness management influences employee productivity, task performance, efficiency, and daily functionality (Adim et al 2018). Adim et al (2018) investigated the effect of wellness programs on employee performance and reached a notion that wellness programs improve employee efficiency, effectiveness and performance which then enhance organisational performance at large. Wellness training build resilience in employees to contain any form of discomfort and uphold company goals. Employees' mindful behaviours from such resilience enhance task accomplishment and adaptive performance in changing conditions. (Dane and Brummel, 2015). In line with such findings, the study reveals that wellness training programs positively influences organisational performances

### 2.3.3 Employee empowerment and involvement

Employee empowerment is the act of supporting employees so that they attain personal power, confidence and security in their positions. Employees need to feel secure and empowerment for them to give their best performance on their jobs and enhance

organisational performance. Employment security is usually referred to workers' expectations of enduring stable and long-lasting jobs in the organization (Piccoli et al, 2017). Wang et al (2018) argues that job security removes stress in employees and if they do not have job insecurity then they feel self-empowered to perform their tasks without fear of retrenchment. He also argues that promotions at the workplace promotes employee empowerment in their abilities that they give their all to their jobs hence promoting optimal organisational performance. According to Schmidt (2020), bringing employees on board in decision making and voting give a sense of importance to employees in the organisation and this recognition pushes them to perform better and earn that recognition and, in that regard, they positively affect organisational performance. In light of all that, it is a safe inference by the study that employee empowerment and involvement enhances organisational performance in companies.

#### 2.3.4 Performance

Haung et al., 2013 defines employee performance as a scenario where employees derive a certain amount of perfection in their assigned tasks. Moreover, (Mathis & Jackson, 2012) articulated that employee performance is associated with quantity of output, quality of output, and timeliness of output, presence attendance on the job, efficiency of the work completed and effectiveness of work completed. In simple terms, employee performance can be simply defined as the successful completion of tasks by a selected individual or individuals, as set and measured by a supervisor or organization, to pre-defined acceptable standards while efficiently and effectively utilizing available resource. Tutar et al.( 2012) define performance as the level of how the activities serve the good intention, self-devotion and extra role behavior. Similarly, Elnaga et al., 2014 comment that organizational performance; effectiveness, success and productivity can only be achieved by responsible, competent employees who find their jobs meaningful through empowerment. This is in consistence with Haung et al., 2015 who propose that empowerment brings performance through the realization of the purpose or outcome level of the activity. Bharathi et al., 2014 carried out a study in Seshasayee Paper and Boards Ltd Erode which sought to investigate how employee empowerment impact on employee performance. The data was collected through interviews and distributed questionnaires. Results of the study showed that the reason of high performance is the feeling created in employees through empowerment programs. The research results showed that employee empowerment would ignite employee potentials, make them feel part of an organization and perform maximally for the organization.

### 2.3.5 Performance results of stress management intervention techniques

#### 2.3.5.1 Reduced costs related to absenteeism and turnover

Islam et al., 2012 found stress management interventions techniques as devices to reduce turnover intentions and high absenteeism. Likewise, Choi et al., 2016 posit that employee empowerment can reduce nursing staff turnover owing to low job satisfaction. Correspondingly, Mukwakungu et al., 2018 propose that stress management interventions have been associated with a couple of benefits such as lower costs, reduced turnover and absenteeism, increased revenues, employee satisfaction and flexibility. They add that quality of work produced by happy empowered employees is high and the number of defects and poor services issues is reduced thus reduces related costs. Consistently, (Mahrabani & Shajari, 2013) carried out study in Iran which sought to investigate the effectiveness of stress management interventions on the employees in health organizations. The research outcomes showed that the interventions yield employee satisfaction which reduces related costs due to high turnover and absenteeism. Hence this improves the overall performance of the organisation.

#### 2.3.5.2 Increased Commitment and motivation

(Filstad, 2012) defines commitment is an attachment to the organization, characterized by an intention to remain in it, identification with the values and goals of the organization; and a willingness to exert extra effort on its behalf.

Insan et al., 2013 postulate that employee commitment and motivation is high in organizations where employees perceive that they are being empowered, receiving wellness training and also being offered occupational rehabilitation. Likewise, Goudarzvandchegini and Kheradmand (2013) comment that the most important sources of competitive advantage in organizations is committed and motivated employees. A study conducted by Zanolvi et al., 2016 of some NGO's in Zimbabwe on the importance of employee empowerment showed that in this dynamic and competitive environment, no organization can perform well unless the employees are empowered, fit and stress free which motivates them and commits them to the organization needs and make employees to subordinate their personal needs to the organization. Lack of motivation and commitment due to unmanaged stress, employees are most likely not going to perform well leading to a low organisational performance.

### **2.3.5.3 Job satisfaction**

Rizwan et al., 2013 defines job satisfaction as employee commitment that results from an increased sense of meaningfulness at work and improved accomplishments. Pelit et al., 2012 posit that empowered, rehabilitated and healthy employees have a higher level of job satisfaction. Equally, Choi et al., 2016 carried out a study in Malaysia which was designed to investigate the casual relationship between stress management interventions and job satisfaction. They used a survey to collect data from 200 nursing staffing which included medical assistants employed by a large private hospital and a public hospital in Malaysia. A 5-point Likert scale question paper was used where they were asked about employment and performance. The study results showed that the interventions have a positive impact on job satisfaction among medical assistants and nurses in Malaysia. Therefore stress management intervention are effective in improving the performance of the organisation through satisfied and stress free employees.

## **2.4 Summary**

In a nutshell, the chapter gave an insight of the literature depth of the current study by highlighting how other schools of thought has said on the issue. Theories surrounding the issue were given and empirical review given and analysed. The following chapter will look at the research methodology used in carrying out the study.

## **CHAPTER III**

### **Research methodology**

#### **3.1 Introduction**

This chapter investigates the methods used in carrying out the research study. The chapter begins by examining study design and data collection methods used in this research study. The purpose of this research is to determine the connection between stress management intervention and organizational performance at Makonde Christian Hospital. As a result, this chapter is crucial because it lends credibility to the research and provides scientifically sound findings. It also includes a detailed plan to help researchers stay on track and make the procedure smooth, effective, and controllable. This chapter's structure is comprised of descriptions of research design, data sources, research instruments, validity, reliability, data collection procedures, data analysis procedures, and ethical considerations. A detailed description of how the study was conducted is provided.

#### **3.2 Research design**

The study used a descriptive research design in the form of a case study. This design was used because the researcher wanted to focus on a specific area that would do so be able to provide more accurate results to assess implementation of sustainable procurement. Whenever possible, a descriptive research design was used. It predominantly employs quantitative data, although qualitative data is also used sometimes for descriptive purposes. Researcher covered an appropriate sample of respondents' representative of the total population studied and also allows the researcher to organize data into one sensible. ( Kothari , 2013). Descriptive research design was used because it enables the research goals to be achieved by conducting a field survey. Use of questionnaires as an essential tool and conduct of interviews. In addition, a case was used in order to satisfy internal validity as the researcher strives to understand the real issues affecting the ineffective implementation of sustainable procurement practises (Chipiro, 2009). Moreover, a case study also has the ability to cope with technically

distinctive situations in which there are many variables and data sources thus triangulation of data becomes possible. Furthermore, a case study was chosen because of its in-depth analytical way of giving results on a particular department of an organization eliminating generalizing component. On descriptive research design there is an element of observing and measuring without manipulating variables. It can identify characteristics, trends and correlations.

### 3.3 Population

The target population for this study comprised of 71 employees of Makonde Christian Hospital. The study comprised of the patron, senior, junior and student nurses, midwives and general hand worker. These were chosen because they are the ones who are the most involved in the daily hospital tasks.

**Figure 2.**

| Target Group   | Population |
|----------------|------------|
| Patron         | 1          |
| Senior nurses  | 10         |
| Junior nurses  | 25         |
| Student nurses | 15         |
| General hand   | 15         |
| Midwifery      | 5          |
| Total          | 71         |

### 3.4 Sampling

This study used stratified random sampling technique at the initial stage according to occupation as depicted in the above table. The researcher also employed the judgmental sampling method when selecting the respondents within the strata. The researcher went for

the stratified random sampling for its ability to produce estimates of the overall population with higher precision and ensures that a more representative sample is derived from a relatively homogeneous population. The researcher determined the sample size of each category of employees using disproportionate stratified random sampling where the sample selected from each stratum is independent of the strata's proportion of the total defined target population. This was so because the researcher needed to have a larger proportion of the management in his sample. The researcher applied judgmental sampling in order for him to only get information from the members that have the knowledge of the work stress.

### 3.5 Sample size

The sample size of 49 participants was used for this study using the Raosoft formula which represented 69% of the target population. According to Bougie (2010), who stipulated that following the rule of thumb for determining sample sizes; sample sizes that are larger than 30 and less than 500 are appropriate in most research studies? (Kothari, 2013). Descriptive research design was used because it enables the research objectives to be accomplished by carrying out a field survey using questionnaires as a major instrument and carrying out interviews people selected for interviews. The managers and other staff were chosen for the interviews using judgemental sampling method as the researcher regarded this two-offer valid information regarding the research under study considering their level of education. This was first postulated by Cronbasha's Alpha, (1970).

### 3.6 Research Instruments

The researcher used self-administered questionnaires and interviews as instruments for data collection as historical data was difficult to obtain since the employees were reluctant to release this due to confidentiality concerns. Questionnaires were administered and the interview guide was administered to the Matron and Sister in Charge.

#### 3.6.1 Questionnaires

The research used questionnaires to collect primary data. Both open-ended and closed questions were used to provide data respectively. The questions were closed to make it easier for the researcher to analyse responses. Closed questions came as a result of the pilot study that the researcher had conducted where most respondents were unable to answer the questions.

At the same time some questions were open to allow respondents to give his/her opinion on what they know, like, dislike and think. (Kothari,2013)

The questionnaires were designed in such a way to reflect the objectives of the study. Some of the motivations for the use of questionnaires are that, they cover a wide number of respondents at a lower cost hence affordable to researcher. The fact that the researcher was absent, led to the respondents feeling unrestricted and free to give accurate responses.

### 3.6.2 Interviews

An interview is a formal or informal meeting between two people or among a group of people who are obtaining information about something in particular (Cooper & Schinder ,2005).The researcher used interview guide in collecting data and the interview questions were based on the research questions. Questions relating to stress management intervention practises were posed to the interviewees as a means of accessing first-hand information. Interviews were conducted with the hospital staff selected in sampling.

The interview guide enabled the researcher to scrutinize the answers that were given in the questionnaire and which enabled the researcher to obtain further information on the extent of stress management intervention. The researcher was also able to make use of the information relayed by the respondents through non-verbal communication and the responses are spontaneous. This means that the researcher was able to gather first-hand information from the respondents, despite the fact that there can be bias in terms of the tone in voice.

### 3.7 Data collection procedure

After having obtained prior authority from MOTID questionnaire were designed and personally distributed to each respondent. The administering and collection of questionnaires was done over a period of three days. Interviews took only a few hours since all staff were available on the appointed day. The researcher also used secondary data which included data obtained from newspapers, textbooks and journals and Ministry Of Healthcare website page. This secondary data was used as it is cheaper to collect, easy to gather, saves money and time.

### 3.8 Data Validity and Reliability

The researcher determined the data validity of the research instruments by discussing the research instruments with her supervisor. The valuable comments and corrections given by the supervisor assisted her in the validation of the instruments so that they will be reliable.

On data reliability, a pilot study was done on the questionnaires. The pilot study enabled the researcher to yield data concerning deficiencies. Questionnaires do also have some disadvantages like, the wording of questions that may result in wrong interpretation. To try and counter this, the researcher conducted a pilot study first, whereby there was a pre-test of the questionnaire and vagueness clarified. Respondents may not complete the questionnaires. To counter this, the researcher made personal follow-ups so that people will be encouraged to respond properly and give applicable feedback. The researcher used semi structured interview questionnaire, which allowed comparisons between respondents.

To address the critical issues relating to the quality of research instruments, the interview schedule was pre-tested before being administered to the sampled population. This was to reveal ambiguities, poor worded questions that were too long, unclear choices and also indicate whether the instruments to the respondents were clear. Data reliability was also ensured when the researcher used Statistical Package for Social Sciences (SPSS) in data analysis as a way of ensuring data reliability

### 3.9 Ethical Consideration

The study included only participants who freely consented to participate. During the course of this research study no harm or offence was caused to any participant. The researcher referenced all the used sources from different authors and any data or ideas without due acknowledgement and permissions were not used. Permission to conduct the research was sort from Ministry Of Transport and Infrastructural Development before engaging the research. Also on the questionnaires instructions was given to the respondents that the study was solely for academic purposes. The researcher also took into cognisance the rights of respondents to informed consent, anonymity, privacy, confidentiality and voluntary participation in the study.

### 3.10 Data analysis and presentation procedures

Descriptive statistics method of analysis which provides a general overview of the results was used for the analysis. The descriptive method analysed the responses in percentages. The frequency distribution was used in this study. The organized data was interpreted on account of research objectives using Statistical Package for Social Scientists (SPSS) version 21 to communicate the research findings. The results from both the primary and secondary data was presented using tables and graphs. Tabulation was also used as it involves arranging the data

in a tabular form. Pie charts were also used as a method of data presentation as it summarises and communicate the meaning of the data.

### 3.11 Chapter Summary

This chapter have covered the methodology which was used to collect data on the extent of stress management intervention and organisation performance. The chapter discussed the research design, research instruments techniques, sampling method, sample selection, method of data collection and data analysis as well as the generalization, validity and reliability of the study. The collected data was analysed and presented in the next chapter.

## CHAPTER IV

### Data presentation and analysis

#### 4.0. Introduction

This chapter shows the collection and presentation of data obtained quantitatively and qualitatively from employees at Makonde Christian Hospital using questionnaires and interviews. The researcher used graphs as methods of presenting quantitative data and tables on qualitative data using a thematic approach.

#### 4.1. Response rate

Table 1: Response rate for questionnaires

|                | <b>Target</b> | <b>Actual</b> | <b>%Response</b> |
|----------------|---------------|---------------|------------------|
| Senior nurses  | <b>10</b>     | <b>10</b>     | <b>100</b>       |
| Junior nurses  | <b>25</b>     | <b>15</b>     | <b>60</b>        |
| Student nurses | <b>15</b>     | <b>10</b>     | <b>66.67</b>     |
| General hand   | <b>15</b>     | <b>10</b>     | <b>66.67</b>     |
| Midwifery      | <b>5</b>      | <b>3</b>      | <b>60</b>        |
| Patron         | <b>1</b>      | <b>1</b>      | <b>100</b>       |
| <b>Total</b>   | <b>71</b>     | <b>49</b>     | <b>69</b>        |

**Source: Primary data (2021)**

The response rate for participants was tabularized in table 1 and showed that 49 of the 71 administered questionnaires were filled and returned clean, representing a response rate of 69 percent. In most cases, according to Saldivar (2018), a decent response rate of 50% or greater should be deemed excellent. This response rate allows the researcher to continue with the study because, according to Mugenda and Mugenda (2011), a response rate of more than 50%

is sufficient for the researcher to continue with the data presentation because it produces genuine data.

## 4.2 Demographic Data

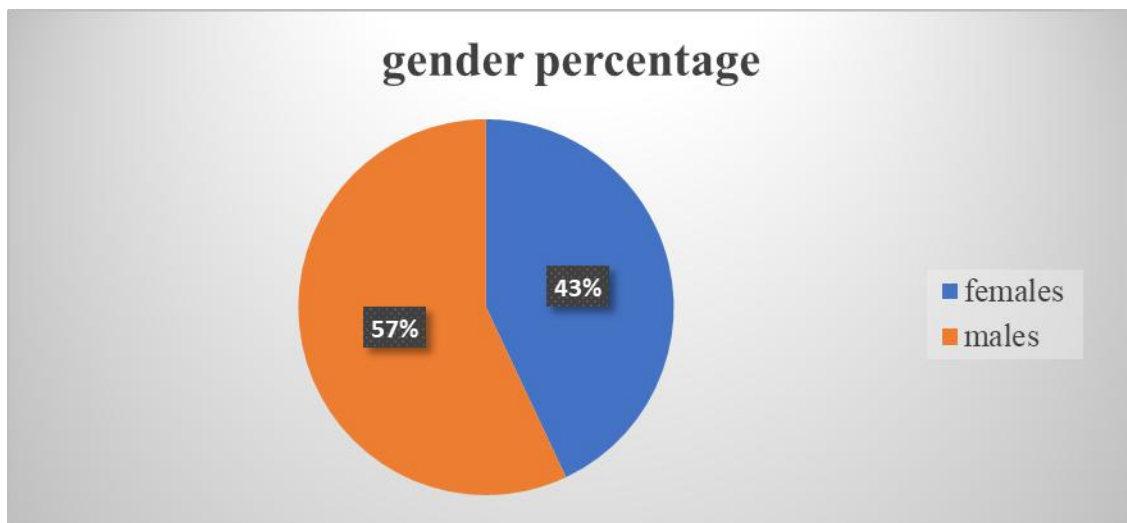
### 4.2.1 Gender Representation

**Table 2: Gender representation per group**

| Gender | Patron | Senior<br>nurses | Junior<br>nurses | Midwifery | General<br>hand | Student<br>nurses | total |
|--------|--------|------------------|------------------|-----------|-----------------|-------------------|-------|
| Male   |        | 6                | 8                | 2         | 7               | 5                 | 28    |
| Female | 1      | 4                | 7                | 1         | 3               | 5                 | 21    |

Twenty-eight of the forty-nine research participants were males, whereas twenty-one were women, as shown in Table 2. The number of female participants was lower than the number of male participants, indicating that gender equality has not been fully achieved.

*Pie Chart: Gender Presentation as a percentage*



Source: questionnaires and interviews

The pie chart above shows that, female employees consist forty three percent of the total number of participants who took part in data collection. Males consisted of the other remaining fifty seven percent of the total participant population. Male representation was higher than that of females.

#### 4.4 Age distribution

**Table 3: Gender representation per group**

| <b>Age</b>                     | <b>Patron</b> | <b>Senior<br/>nurses</b> | <b>Junior<br/>nurses</b> | <b>Midwifery</b> | <b>General<br/>hand</b> | <b>Student<br/>nurses</b> | <b>total</b> |
|--------------------------------|---------------|--------------------------|--------------------------|------------------|-------------------------|---------------------------|--------------|
| <b>20yrs<br/>and<br/>below</b> |               |                          | 7                        |                  | 5                       |                           | 12           |
| <b>21-40<br/>years</b>         | 1             | 6                        | 8                        | 1                | 3                       | 10                        | 29           |
| <b>41 and<br/>above</b>        |               | 4                        |                          | 2                | 2                       |                           | 8            |

The table above shows age distribution of participants who took part both on interviews and questionnaires. It reveals that there was no 20 years and below participant who was under patrons. Between twenty one and forty years there was 6 participants from senior management, 8 from junior nurses, 1 from midwifery, 3 from general hand. The table further reveals that, there is 4 seniors, 2 midwifery and 2 general hand from 41 and above section.

#### 4.5 Work Experience

**Table 4: Years of service**

| <b>Year attained</b> | <b>Patron</b> | <b>Senior nurses</b> | <b>Junior nurses</b> | <b>Midwifery</b> | <b>General hand</b> | <b>Student nurses</b> |
|----------------------|---------------|----------------------|----------------------|------------------|---------------------|-----------------------|
| <b>5 and below</b>   |               |                      | 15                   |                  | 5                   | 10                    |
| <b>6-9 years</b>     | 1             | 6                    |                      | 1                | 3                   |                       |
| <b>10 and above</b>  |               | 4                    |                      | 2                | 2                   |                       |

The table above reveals number of years of work experiences possessed by participants. It reveals that there was no senior management participant who was five or less years of service. All junior nurses participants had 5 years and below in the services, 5 general hand workers and 10 students had also 5 years in the service. Moreover, the table shows that, under the 6-9 years there were 6 senior nurses, 1 patron, 1 midwifery and 3 general hand. Under the 10 and above section, there were 4 senior nurses, 2 midwifery and 2 general hand.

#### 4.6. Designation

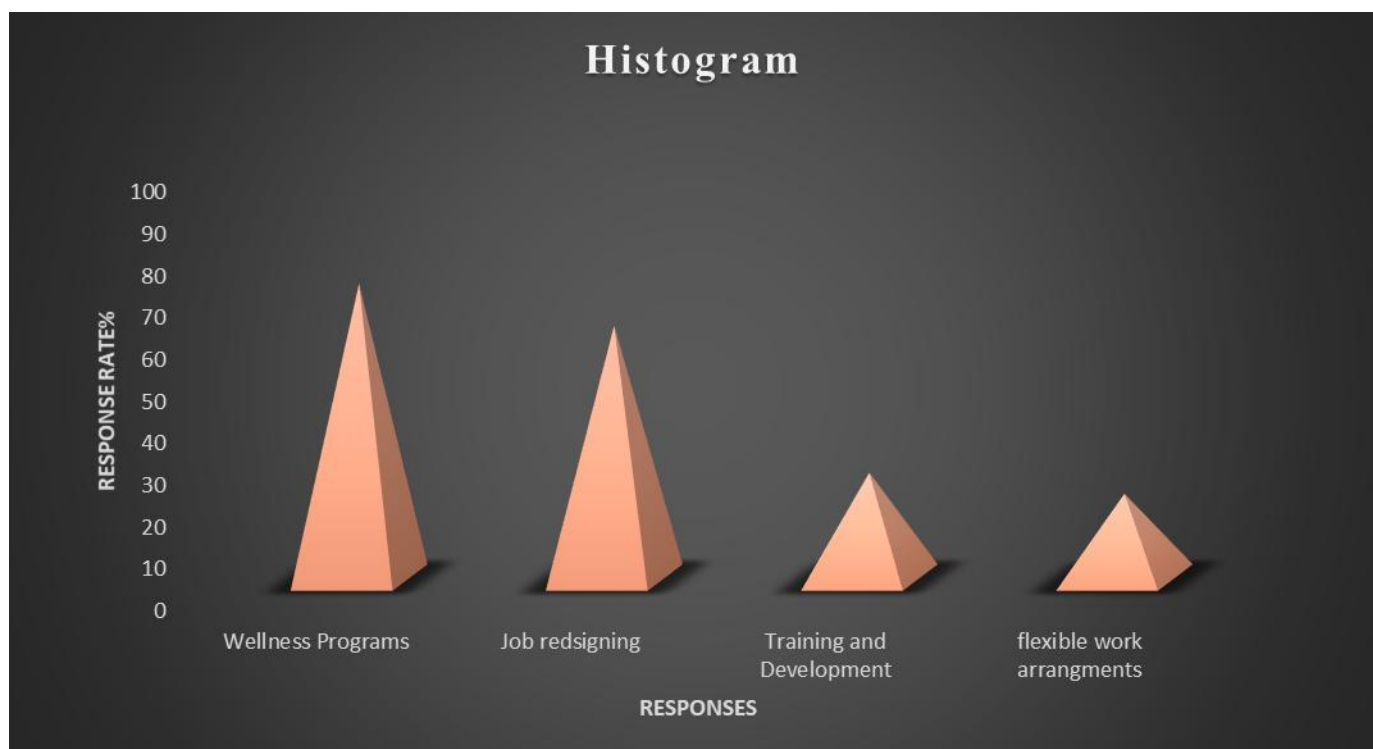
Table 5: Participation by designation

| <b>Designation</b> | <b>Number of Participants</b> |
|--------------------|-------------------------------|
| Senior nurses      | 10                            |
| Junior nurses      | 15                            |
| Student nurses     | 10                            |
| Midwifery          | 3                             |
| General hand       | 10                            |
| Patron             | 1                             |

The table above shows designations of research participants. Out of a sample of seventy one participants, forty nine managed to take part in the data collection procedure on questionnaires and interviews.

#### 4.7 Stress management intervention techniques used

Figure 4.2: Responses from questionnaires



**Source: Primary data (2021)**

Figure 4.1 above shows a histogram which indicates responses given by participants on a questionnaire giving answers on stress management intervention techniques being implemented by the organisation. **70%** of the respondents were of the view that wellness programs and job redesigning are the most practiced interventions being implemented by the organisation. However, a minority of **20%** were of the view that flexible working arrangements, training and development were also other interventions being placed into practice by the organisations.

From the interviews conducted **70%** of the respondents indicated that wellness programs were interventions implemented by the organisation as way to deal with occupational stress.

**Table 6. Interviewee's responses**

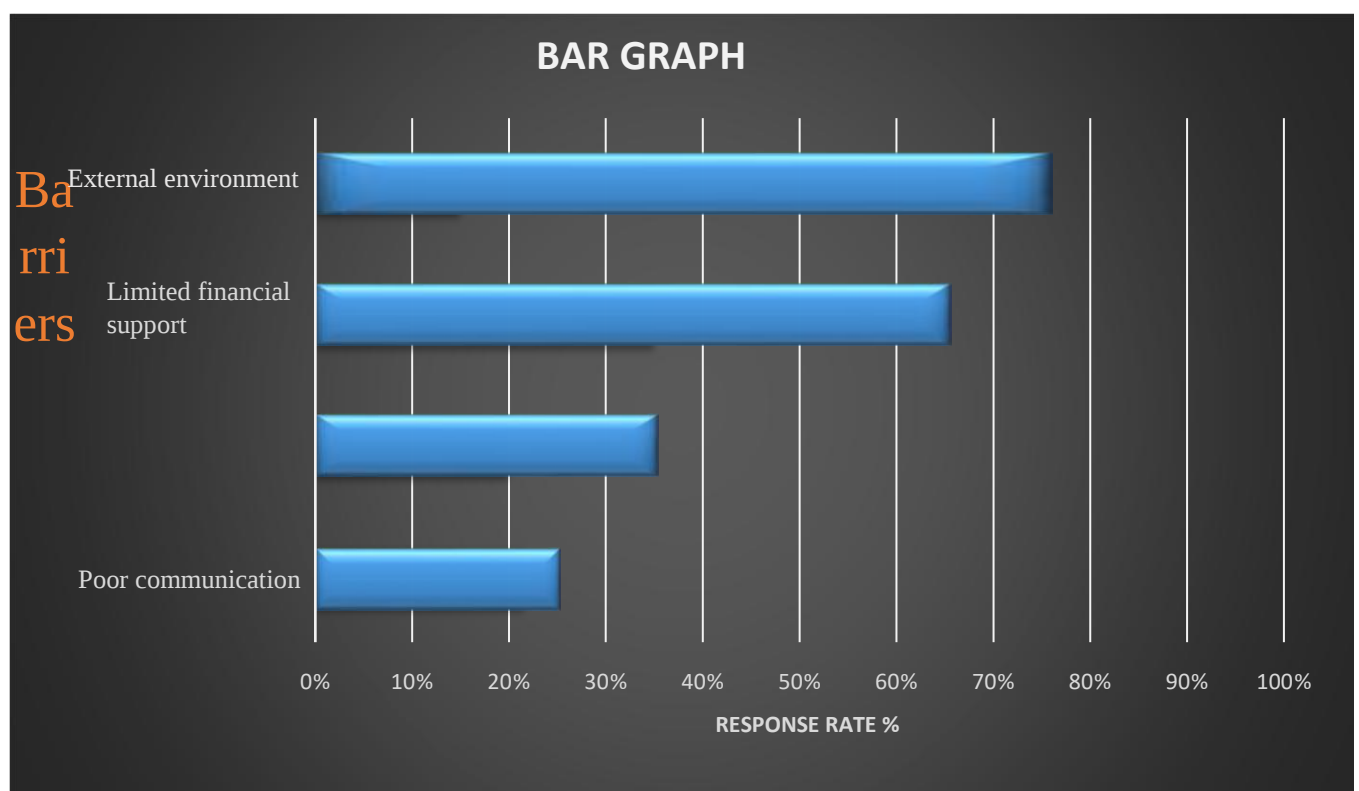
| <b>Interviewee</b> | <b>Response</b>                                                                                                                                                                                               |
|--------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 2                  | <i>“The organisation is exercising various programs to curb stress related problems and such programs include wellness programs, flexible working conditions, job redesigning, training and development.”</i> |
| 4                  | <i>“Due to stress existing, employees the organisation is partaking job redesigning, training and develop as ways to suppress the pressure of stress.</i>                                                     |

However, minority of (30%) were of the view that improved communication is an intervention technique being practiced by the organisation as a way to curb stress. This can be revealed by the table below:-

**Table 7: Interviewee's responses**

| <b>Interviewee</b> | <b>Response</b>                                                                                                                                             |
|--------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 2                  | <i>“Improved communication and decision making is one of the stress management intervention techniques being undertaken at Makonde Christian Hospital.”</i> |

**Figure 4.3: Responses on questionnaires**



**Source: Primary data (2021).**

Figure 4.3 above shows a bar graph which indicates responses of participants on questionnaire regarding the barriers to effective stress management interventions used by the organisation. **70%** of the participants were of the idea that external environment and limited financial support are the major barriers towards effectiveness execution of stress management interventions. However, **30%** were of the view that employees perception and poor communication were among the barriers of effective stress management intervention.

#### 4.6. Key performance indicators of an effective stress management intervention program

Figure 4.4: Responses from questionnaires



Source: Primary data (2021)

Fig 4.4 above depicts that majority (60%) were of the view that increased job satisfaction was a key performance indicator of an effective stress reduction program undertaken. However, minority (40%) were of the view that low labour turnover rates, reduced absenteeism and reduced number of accidents at work were among key performance indicators of an effective stress management intervention program.

Moreover, the same responses magnitude of **60%** was given on interviews conducted by the research in finding out the key performance indicators. The responses can be supported by the table below.

**Table 8: Responses from interviews**

| <b>Interviewee</b> | <b>Response</b>                                                           |
|--------------------|---------------------------------------------------------------------------|
| 2                  | <i>“job satisfaction is one of the signs of an efficient SMI program”</i> |
| 4                  | <i>“increased job satisfaction points an effective SMI technique”</i>     |

The table above shows that the majority supported that increased job satisfaction was a key performance indicator of an effective stress management intervention program.

However, a minority of **40%** were of the view that low labour turnover rates, reduced absenteeism and reduced number of accidents at work were among key performance indicators of an effective stress management intervention program. This can be supported by the table below.

**Table 9: Responses from interviews**

| <b>Interviewee</b> | <b>Response</b>                                                                                                                                                                |
|--------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 10                 | <i>“low labour turnover rates, reduced absenteeism and reduced number of accidents are key performance indicators of an effective stress management intervention program”.</i> |

## 4.8 Chapter Summary

In order to ensure that the reliability of the results was not compromised, the chapter presented a comprehensive set of empirical research findings and conducted all necessary researches. The chapter also provided a reason of the findings. Wellness programs were the variable of this study that required special attention and was covered in length, even though some research findings contradicted the researcher's initial hypotheses. Chapter 5 will provide

a summary of the study, prospective policy recommendations, and suggestions for more academic studies that are corroborated by the chapter's conclusions.

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## **CHAPTER V**

### **Summary, conclusion and Recommendations**

#### **5.0 Introduction**

This chapter explains the findings from the data analysis and conclusions obtained. The study's findings have been described alongside the objectives, conclusions have been reached, and suggestions for action are also provided.

##### **5.1.1 Summary**

In order to better understand the relationship between stress management intervention and organizational performance, the study provided information on how management training, wellness training, employee empowerment and occupational rehabilitation affect organizational performance. The input process output (IPO) framework serves as the foundation for a conceptual framework. This conceptual model expands on the notion that job demands that lead to stress, anxiety and burnout in workers include complexity, work burden, skill discretion, and the physical environment. Productivity, adaptability, and performance are the main outcomes of stress management interventions whereas management training, wellness training, employee empowerment, and occupational rehabilitation are some of the job resources that act as input. . This chapter presents a summary of the study's results and draws conclusions from them that serve as the basis for suggestions. In order to cover the gaps found in the study, suggestions for subsequent research are also recorded.

Background to the study and a preview of the subsequent chapters' organization, substance, and boundaries were provided in Chapter 1. In chapter two, the study provided a critical assessment of the literature to aid in laying the foundation for this research and provided an outline of the relationships between the important components in numerous nations around the globe. Furthermore, chapter 3 made it obvious which model was influenced by the empirical data that was more thoroughly discussed in chapter 2. To ensure that the model

estimation results were accurate and not compromised and observations were provided in chapter 4. The research's findings showed that wellness programs, job redesigning and training development have a substantial impact on stress management.

#### 5.1.2 Summary of Findings

The main objective of the study was to discover the factors that have been driving stress management intervention and organizational performance at Makonde Christian Hospital. Hence, supported by the research findings critically discussed in the preceding chapter, the study can draw a number of conclusions highlighted below:

A histogram indicated the responses given by participants on a questionnaire giving answers on stress management intervention techniques being implemented by the organisation. **70%** of the respondents were of the view that wellness programs and job redesigning are the most practiced interventions being implemented by the organisation. However, a minority of **20%** were of the view that flexible working arrangements, training and development were also other interventions being placed into practice by the organisations.

A bar graph indicated responses of participants on questionnaire regarding the barriers to effective stress management interventions used by the organisation. **70%** of the participants were of the idea that external environment and limited financial support are the major barriers towards effectiveness execution of stress management interventions. However, **30%** were of the view that employees perception and poor communication were among the barriers of effective stress management intervention.

Increased job satisfaction was a key performance indicator of an effective stress reduction program undertaken. However, minority (40%) were of the view that low labour turnover rates, reduced absenteeism and reduced number of accidents at work were among key performance indicators of an effective stress management intervention program.

Moreover, the same responses magnitude of **60%** was given on interviews conducted by the research in finding out the key performance indicators.

### 5.1.3 Conclusion

Educating from the results of the study, it can be evidenced that the organization was implementing half stress management intervention programs and a several employees clearly noted that there was need to improve the way of operation. The purpose of this chapter was to summarize the whole research and foster better ways to enhance effectiveness of stress management intervention programs.

### 5.1.4 Recommendation

#### **Adequate funding**

From the research, it was clear that, funding can be recommended to fully fund the training programs so that they can bring out the required or desirable results for the effectiveness of stress management intervention techniques. Smooth running of things can also be achieved when there is adequate funding.

#### **Reviewing human resources policies**

Participates were of the review that, some human resources policies do not cater for temporary employees when making decisions. Hence, there is a need to revise the policies to match every employee.

#### **Continuous training**

Makonde hospital should continuously train its workforce to match the job demands. Training also improves workers morale and job satisfactory as employees are developed to overcome stressors.

### 5.1.5 Recommendation for the future

As stated before, the main aim of the study was to assess the efficacy of stress management intervention strategies. Further research is needed to determine the optimal stress management invention strategy to use in order to overcome a specific stressor, according to the findings of the study.

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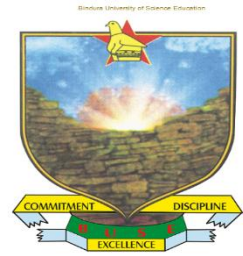
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## APPENDIX 1: PERMISSION TO CARRY OUT A RESEARCH

Bindura University of Science Education

P. Bag 1020

Bindura

..... 2022

### Letter to the Authorities at the administration department

Address.....

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PE Address .....

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Dear Sir/Madam

### RE: REQUEST FOR PERMISSION TO CARRY OUT A RESEARCH AT YOUR ORGANISATION

I am a 4<sup>th</sup> year student at Bindura University of Science Education and studying towards a Bachelor of Commerce Honors Degree in Human capital management. As required by the requirements of the institution, I am carrying out a research project in partial fulfillment of my studies entitled “**THE NEXUS BETWEEN STRESS MANAGEMENT INTERVENTIONS AND ORGANISATIONAL PERFORMANCE**”. I am therefore kindly seeking permission to carry out my research at your institution.

The information availed by your institution will be exclusive to Bindura University of Science Education for academic purposes only and will be treated with far much confidentiality. Your reply and assistance will be greatly appreciated

Yours Faithfully

Meey B Masiya.

## **Questionnaire**

My name is **Meey B Masiya**. I am a final year student at Bindura University of Science Education undertaking a Bachelor Honors Degree in Human Capital Management, registration number **B1852185**. I am carrying out a research topic entitled ***the nexus between stress management interventions techniques and organizational performance: A case of Makonde Christian Hospital***. You are kindly invited to participate in this research study. Responses provided will be treated with strict confidentiality and used for academic purposes **only**. You can also give as much information as you can even after this research. My contact number **0777584119/0713248729**.

### **SECTION A: DEMOGRAPHIC DATA**

#### ***Instructions:***

***Please tick the box corresponding to your response or fill in the spaces provided.***

- (a) Gender      Male                      ☐      Female                      ☐
- (b) Age group      20yrs and below                      ☐      21-40yrs                      ☐      41yrs and above                      ☐
- (c) Work Experience      5yrs and below                      ☐      6-9yrs                      ☐      10-19yrs                      ☐      20 and above                      ☐
- (d) Highest Qualification      Primary Level                      ☐      Secondary Level                      ☐      High School level                      ☐

|                       |                          |                |                          |                          |                          |  |
|-----------------------|--------------------------|----------------|--------------------------|--------------------------|--------------------------|--|
| Diploma level         | <input type="checkbox"/> | Degree level   | <input type="checkbox"/> |                          |                          |  |
| <b>(f) Department</b> | pharmacy                 | administration | theatre                  | outpatient               | <input type="checkbox"/> |  |
| Inpatient             | <input type="checkbox"/> | rehabilitation | opportunistic clinic     | <input type="checkbox"/> |                          |  |

**SECTION B:**

1. is there stress management education programs being done at Makonde Christian Hospital?

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2. Can you identify some of the stress management activities being done at Makonde Christian Hospital?

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3. Do you feel empowered as an employee at Makonde Christian hospital?

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4. is there wellness training being practiced at Makonde Christian Hospital?

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.....

5. What are the improvements being seen after wellness training at Makonde Christian Hospital?

.....  
.....  
.....  
.....

6. Are injured employees being occupationally rehabilitated at Makonde Christian Hospital and what effect is it giving to the performance of the organisation?

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.....

7. What do you recommend be done at your organisation to reduce employee stress that may improve the performance of the employees and the organisation at large?

.....  
.....  
.....

## **SECTION C**

### **IN-DEPTH INTERVIEW GUIDE**

**(The nexus between stress management interventions and organizational performance at Makonde Christian Hospital)**

| Aspect                  | What I will do                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | Observation(s) | Comment(s) |
|-------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------|------------|
| <b>Introduction</b>     | <p>Greet participant to try to establish connection with respondent.</p> <p>My name is Meey Masiya and I am conducting a research entitled: <i><b>The nexus between stress management interventions and organisational performance</b></i> as a partial fulfilment of Bachelors of Commerce Honors Degree in HCM at Bindura University. Participation in this interview remains voluntary and confidential.</p> <p>Feel uncomfortable to continue with the interview at any point, you are free to withdraw. The interview will take approximately 5-10 minutes of your time.</p> <p>Thank you for agreeing to take part in this interview with me and you have agreed to have our conversation be written down.</p> |                |            |
| <b>Demographic Data</b> | <p>Gender</p> <p>Age</p> <p>Years of service</p> <p>Highest qualification</p> <p>Department</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                |            |
| <b>Question 1</b>       | <p><b>How are employees being empowered and involved as a stress management intervention and it's to organizational performance at Makonde Christian Hospital?</b></p> <p>Probes</p> <p>How are you employees being involved?</p> <p>How are employees being empowered?</p> <p>Does it motivate employees to improve on their performance?</p>                                                                                                                                                                                                                                                                                                                                                                       |                |            |
| <b>Question 2</b>       | <p><b>Is occupational rehabilitation being practiced for managing stress and improving performance at Makonde Christian Hospital?</b></p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                |            |

|                   |                                                                                                                                                                                                                                                                                                                                                                                                                 |  |  |
|-------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|
|                   | <p>Probes</p> <p>Are employees returning to work after injuries and being given duties that suit their level of physical ability?</p> <p>How is occupational rehabilitation affecting the performance of the organization?</p>                                                                                                                                                                                  |  |  |
| <b>Question 3</b> | <p><b>What are the solutions and recommendations on stress management intervention and organizational performance at Makonde Christian Hospital?</b></p> <p>Probes</p> <p>In what ways can the organization improve its process of stress management intervention to improve performance?</p> <p>How can the organization sustain the stress management interventions to enhance organizational performance</p> |  |  |
| <b>Conclusion</b> | <p>Ask the respondent if he or she has any other questions and comments about the topic and thank the interviewee for participating in the interview.</p>                                                                                                                                                                                                                                                       |  |  |

