INVESTIGATING WORK RELATED STRESS AND ITS IMPACT ON THE PERFORMANCES OF REGISTERED NURSES EMPLOYED AT KATUTURA STATE HOSPITAL IN WINDHOEK, NAMIBIA

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Abstract
Work related stress in nurses is a common problem. It is also a contributing factor to health problems in nursing. It is essential to record the causes of stress to an extent of stress in any health care organizations. Nursing involves activities and interpersonal relationships that are often stressful, while nurses are faced with greater demands and high expectation, while they are not well secured. The healthcare environment is a source of overwork and stress has been implicated in today s ‘nursing shortage. The study aimed to investigate work related stress and its impact on registered nurses performances at Katutura State Hospital in Windhoek, Namibia. Data was collected from registered nurses at the particular hospital, with a survey instrument method. A random sampling method was used to collect data from 90 participants. For this research exploratory statistics were used for data analysis and discussions.

Introduction
The nursing profession is very important in any country because nurses devote much of their time to enhance a country’s healthcare. Wicks (2006:143), asserts that being a healthcare professional is rewarding because it grants an opportunity to save, improve and lengthen people’s lives. However, healthcare professionals usually work during odd hours, thereby increasing the stress levels associated with the nursing profession. It is important to ensure that such stress levels are managed to ensure that nurses continue to deliver quality service despite the challenges they face in their day to day lives. Work-related stress has aroused growing interest across many countries in recent years. The increased integration of health delivery system in Namibia has constrained on the financing of healthcare. This has been worsened by the emergence of new diseases, a swelling urban population. The increased demand for health services is falling on the back of the health professionals. The increased demand for health care services puts both patients and nurses at risk of stress. The current shortage of nurses has prompted policy makers to increasingly focus on the health care work environment, as a source of
heavy workloads and stress. Registered Nurses at the Katutura Intermediate State Hospital often find themselves racing to keep up with all their tasks without having time to reflect the deeper meaning of their novation. Occasionally registered nurses face heavy workloads which often exceed their carrying capacity. This may lead to work-related stress and a decline in their expected performances. Nurses render their service most of the time to stressed individuals, and sometimes become victims of stress themselves.

Organizations stand to benefit through increased efficiency if they adopt efficient stress management policies. Therefore, management of the Katutura State Hospital should develop organization-directed strategies and engage healthcare professional at this Hospital in stress management programs in order to prevent and reduce workplace stress among the registered nurses. The study aims to investigate work-related stress and how does stress affect the performances of registered nurses employed at the Katutura Intermediate State Hospital in Windhoek.

Aim of the study
The aim of this study is to investigate work related stress and its impact on the performances of registered nurses employed at Katutura intermediate State Hospital in Windhoek, Namibia. This research is carried out in order to assist policy makers to understand current working conditions the nurses are facing and their impact on stress levels. Further the study aims to provide stress management strategies to ensure that nurses effectively execute their duties. The study is a combination of the existing and primary findings.

Research Objectives
- To identify the sources of Stress at Katutura State Hospital.
- To identify the strategies used to manage stress at Katutura State Hospital.
- To assess the stress levels at Katutura State Hospital.

LITERATURE REVIEW

Who is a Registered Nurse?
Some researchers define a Registered Nurse (RN) as nurse who has graduate from a nursing program at a college or University and has passed a national licensing examination to obtain a nursing qualification. A registered nurse, in the Namibian context means a person registered as such in terms of section 64 of the Nursing Act, No 8 of 2004 of the constitution of Namibia. A Registered Nurse’s scope of practice is determined by the school and by the government responsible for healthcare in the region. Such bodies like the Nursing Board in Namibia, outlines the Legal Practice for nurses and what tasks they may or may not perform.

Some Duties of a Registered Nurse
According to Searle (2006:78-79) RN should assure quality of care by adhering to therapeutic standard measuring health outcomes against patient care goals and standards. A RN should protect patient, employer and other employees by adhering to infection control policies and protocols. Registered Nurse should maintain confidence and protects operations by keeping confidential.
Understanding the Karasek Demand and Control Model of Job Stress
Karasek (1979) developed a theoretical model that suggests that physiological strain can be a contributing factor of stress. Karasek designed four stress categories for jobs, also known as a PAEI Structure of Concern. To explain this, Karasek categorizes nursing under high strain jobs. This category is characterized by anxiety, fatigue and physical illness as a result of adverse effects of physiological strain, which occurs when job demand and control of decision latitude is low (Karasek and Theorell 1990:31). The second category, demonstrates high limits of physiological demands and controls, whereby workers can exercise their freedom to utilize their skills at their potential most, and mitigate the negative stress. With the Low Strain Job, as the third category of the model, there are high limits of relaxation and leisure and few physiological strain and physical illness. Passive Jobs, the last category, is known with low demands and low control levels, Workers will exhibit negative learning, loss of interest and relaxation. Nurses’ subordinates who monitor patients and only report when there are abnormalities, may be found in this group.

The Effort/Reward Imbalance Model
According to Sigriest and Rodel (2006), cited in Chen (2008; 31), the Reward/Imbalance Model focusses on the costs, reward reprocity and individual coping strategies. According to Aleck, Kelly, Mustard and Hertzman, commend that the ERI postulates that jobs characteristics featured by an imbalance between high effort and low rewards and may result in ill-health conditions. The Model indicates that occupational skills and successful role performances provide the opportunity to enhance self-esteem (Niedhammer, Chestang, Barochiel and Barrandon 2006). Esteem, which is the respect and support to others, is one of the three transmitter systems of occupational rewards Chen (2008:31). Lack of reprocity between effort and reward can cause stress and emotional distress among the Registered Nurses.

Over commitment
Over commitment is a third dimension of the job stress model and it is a useful tool for understanding the impact of psychosocial factors on mental and physical outcomes of the workers. Niedhammer (2006), Registered Nurses may develop stress-related illness if they are committed to their work and not being rewarded accordingly.

Approaches to the problem
It is of great importance to identify the nurse’s perception of workplace stress, and establish the potential effectiveness of initiative to reduce distress. This will also pave a path for further studies. A survey done between January 1985 and April 2003 about stress in nursing staff, revealed that workload, leadership or management style, professional conflict and emotional cost of caring have been the main sources of distress for nurses for many years, but there is a disagreement as to the other issues in order of ranking. The management style of any Health sector and the reduction of occupational stress are recognized as the key factors in promoting employees well-being. Nursing is one of the many disciplines contributing to a huge body of research into the causes and effect of the ill-defined phenomenon of workplace stress.
Related Nursing Theories

Nurses provide nursing care through nursing practice. Nursing processes and theories as derived from nursing research are being used by nurses in rendering and improving patient nursing care. Maslow’s need hierarchy theory, cited in Nel (2005:337), describes self-actualization need as a fifth position of his needs theory, as a desire to become more what one is and to become everything one is capable of becoming. According to Maslow, self-actualization is an exhibition of a one’s true self, advancement, feelings of accomplishment and importance Tomey (2004:102). McClelland’s achievement theory of motivation takes three needs into consideration, namely: the need for affiliation, a need for power, and a need for achievement (Nel 2005:339) These theories are applicable in the nursing profession. People, who lack interpersonal relationship, end up into interpersonal conflicts, stress and poor performances. Although performances of Registered Nurse are sometimes under criticism, some Registered Nurse is being praised for their outstanding performances and top achievements. This is also supported by McClelland’s achievement motivation theory that categorizes people with high needs for achievements as high performers (Nel, Werner, Sono, and Schultz, 2006:340). The Hygiene and motivation factors in Herberzt motivation theory are positive contributors to the desired performances (Hussain and Khalid 2011:566-567). If registered nurses are governed by and practicing according to the rules, policies and regulations of the health services, have the required resources and control, they will achieve the desired goals of the organization (Nel 2005:340).

Definition of Stress

According to Girdano, Everly and Dusek, (1997:1) stress is a physical response to protect our lives. They further continue to define stress as a natural defense mechanism that has allowed our species to survive. Erasmus, Van Wyk and Schenk (2000:603) define stress as the arousal of mind and body in response to an environmental demand, which are the stressors. Stress is a term that is widely used in everyday life with most people having some appreciation about its meaning. It is commonly believed to occur in situations where there is excessive pressure being placed on individuals and nurses are no exception due to the conditions under they work. Selye (1930) defined stress as a strain on living organisms the body’s non-specific response to any demand and classified stress into two categories namely eustress, which is a beneficial stress and distress, the harmful or disease-producing stress. According to Tomey (2009:33), nurses experience stress since that they are work overloaded, fight with life and death, and have to apply their skills and knowledge to render quality care. To many people, stress is regarded as something not favorable, bad and destructive. It is important to understand how nurses behave under stress and how significant is work related stress affecting them in carrying out their duties.
**Work-related/ occupational stress**

Krumm, (2001:494), defines work place stress as something perceived undesirable or a pressure most people experience at work. Work-related or Occupational stress is defined as the adverse reaction people have to excess pressures or other types of demand placed on them at the workplace. According to Robins, DeDenzo (2001:435), cited in Loo-Lee (2008), occupational stress can occur when there is a discrepancy between the demands of the environment or between the workplace and an individual’s ability to fulfill these demands Tomey (2009:33) This is evident in the nursing profession, where nurses are work overloaded and have to utilize the minimum resources to their disposal, in order to render the quality nursing care. This especially where nurses have little control over work and receive little support at work or outside work Perrewe (2010:3). According to Swanepoel (2000:603), increasing forces like competition, innovation and the increase in the pace of doing business can create workplace stress.

**Prevalence of stress**

Many questions aroused nowadays asking why do companies need to tackle stress. Stress is prevalent and costly in today’s workplace, as firms have to cover sick employees, which is sometimes difficult to arrange. Researchers on work-related stress report that in most companies studied, about one-third of employees report high levels of stress, while one quarter of workers ranked their job as the highest stressful one. Stress can reduce the effectiveness of employees and high rate of absent workers. Wilton (2011) comments that the job stress is synchronized with bad quality of life at work, a decreased level of autonomy, lack of control over individual jobs, impaired decision making and work processes.

**Sources of Stress**

Work-related stress has been linked literally to a dozen of major stress sources (Woodman, 1995:22-25). Sources of work-related stress can be detriment to the health and wellbeing of an individual. Positive and negative events can generate stress and negative occurrence. Certain events may exert pressure that results in stress to a person. The main sources identified by Whetten and Cameron (2005:107) are Time-Stressor, Income and Encounter Stressor, Situation Stressor and Anticipatory Stressor. So the complicity of nursing practice may results in variation between identification of sources of stress, especially when the workplace and roles of nurses are changing as it is currently occurring in many countries s health services. This could have implications on measures being introduced to address problems of stress in nursing. Swanepoel (2000:604) asserts that, what one perceive as a stressor maybe not be regarded as a stressor to another person, because people differ in their reaction to stress, An individual might experience positive stress simply from a challenging task. However, if a nursing staff is prevented from achieving his or her target goal, it will hamper her performances and lead to distress (Marshall and Cooper, 1997:3). Furthermore, it is important to relate stress with the physical environment. Poor working conditions such as crowded areas, noise, dangerous conditions and physical stress are considered as potential sources of stress at the workplace (Nel et al, 2008:313).

**Time Stressor**

Work overload and lack of control are time stressors generally experienced as a result of too much to do in a short time (Karasek 2009: Whetten and Cameron, 2002:107). Tasks that are not well planned can be a source of stress. A variety of studies have indicated that quantitative work overloads are potential sources of stress in the workplace, in which individuals like Registered Nurses, are expected
to complete some work within a given time (Kassar and Tattersall, 1998:85). A nurse should be time conscious, since that much of her work is timetabled. If not so, the negative impact of her performances will be past to her client or patient. Mustafa (2012) contends that nursing is demanding and the workload placed on nurses are intense. Mostly everything nurses do is time-sensitive, and each task must be performed within very short timelines and intensive deadlines.

**Work overload**

Employees often become overloaded if they cannot cope with the amount of work they are asked to do. According to Perrewe and Ganster (2010:9) a high level of stress is healthy and it motivates employees to put more effort to meet the demand. On the other hand, high workload may result in negative emotional reaction, physical fatigue associated with overwhelming. Searle (2006:382), asserts that globalization of economic activities have an impact on both the relative movement of goods, service and technology, as well as on human resource. Nurses from different African countries including Namibia, have moved to Britain, Europe and the United States of America for better employment opportunities and salaries. This contributed to the already existing shortage of nursing staff in those countries. According to Sutherland, Coper and Bond (2010:1) the health and performances of the organization depends on the job satisfaction and well-being of the employees. An increasingly workload and staff shortage might have an impact on the Registered Nurses’ ability to cope and deliver adequate or desired services to patients. This creates a stressful environment within the nursing profession (Huber 1996:561).

Home and hospital nurses are taking care of patients who are sicker than in the past, so their workload is doubled. According to Wicks (2005:10), workload or heavy load, have an adversely effect on nurses and patient safety. In many, if not all state hospitals, nurses are performing nonprofessional tasks such as housekeeping, dishing of food to patients, transportation of patients to other wards and to investigation rooms, orderings, coordinating and performing ancillary service. Other factors like high rates of bed occupant, high expectations of patients, and relatives from the nursing staff and unstable work systems issues, contributes to nurses overload and stress (Wicks 2005:4). The problem of insufficient nurses or shortage of nursing staff can affect the Registered Nurse performances and health care delivery. The nurse/patient ratio does not match as the nursing staff levels are not adjusted according to the high turnover rate. So this could be a stressor to the nursing staff. The problem of HIV/AIDS is a big health concern and demanding, to be handled by a few numbers of nurses, who are already work overloaded.

**Lack of Control**

According to Karasek Demand Control Model (2008), workplace stress is a function of how much pressure and demands a person experiences at work, while control, is the discretion, authority or job decision latitude people have over their own responsibilities (Nel et al, 2008:313). Employees are said to experience stress if they are assigned tasks and there is no proper control to direct them in the right way (Tomey 2004:33). Karasek (2008) reviewed The Demand Control Model and concluded that there is interaction of objective workload demand in the environment, and employee’s decision latitude, to meet the demand. According to Perrewe, Ganster (2010:3), Sutherland, Cooper and Bond (2010:3) employees can be dissatisfied and perform poorly if they have no say over how and when they have to do their work or involved in decision making regarding their work. In other words, when the job demand is high, the level of control should be intensified in order to prevent the risk of stress-related illnesses, (Nel et al, 2008:316). According to Wicks (2005:10), a person can use skills, knowledge, and
decision making abilities to satisfy workplace demands). Clear procedures, guidance and evaluation are of great importance in improving service rendering and expected performances. This might be due to the fact that they do not perceive the situation as high demand (Barres-Farrell, 2005). Mc Neely (2008) appreciates the importance of probing the association between the nature of nursing work and the status of nurses’ health. He further emphasizes the importance of assessing the connection between how well nurses feel and how well they perform (Nel 2008:317). Registered Nurses may develop stress related diseases such as headaches, back pains and hypertension. A high rate of turnover and absenteeism may also increase.

Situational Stressor
Girdano, Everly and Duke (1997) refer situational stressors as biological factors in the work place. (Whetten et al, 2005:108), assert that any change in the environment, a person lives or works can be stressful. Mark and Smith (2008), in their review of the Stress Model argues that change have led to new challenges and problems to organizations and employees. Some of the characteristics of change, is the advance of Information Technology in health service sectors, globalization, and more international competition, (Cox and Griffiths, 1995; Schabraq and Cooper, 2000), cited in (Sutherland et al, 2010:22). This is an indication that workers are under pressure in a competitive environment where they have to adopt, learn new skills to meet new demands. Currently, at the Katutura State Hospital and other state hospitals in Namibia, the Ministry of Health is busy changing the manual paper work to a unique information system. Most of the nurses find it difficult to operate and feed the computer with the necessary information about the patients, like admissions, discharge, follow-ups, dispensing of medicine and other processes around patient care. This is due to the little exposure they have about the computerized information. Generally, nurses who are working after their retirement on contract are sometimes stressed and sensitive as they feel that they are their work is going to be terminated anytime. Sometimes, even if the organization engages its employees when undergoing change, change remains a threat to some.

Noise
When one talks about noise, another person might be thinking only about the noise one can hear. It might be the noise due to miscommunication. This happens when the employer, employees and co-workers do not agree on a certain point or got into a conflict. Aldwin (2009) asserted that categories noise as one of the noxious detergent (environmental characteristics). Physical noise can be harmful to the workers and a longstanding exposure to noise can result in a loss of hearing. The nurse’s performances can be disturbed or interrupted as she always needs to have a good ear to pick any strange sound in the working environment that could be harmful to the patients.

Interpersonal Stressor
Interpersonal stressor is the third cause of stress. Stress for an individual and her interaction with internal and external environments has been noted as a tough and complex concept work environment is very important to the employer and customers. Positive behavior improves interpersonal relationships and is important in the workplace (Perrewe 2010:240) et al, It is vital for the managers of organizations to create an environment which is conducive to the employees and customers. In the medical environment, interpersonal relationship has also to do with interaction with patients, their relatives and other medical teams’ members. The hospital is a stressful environment, but nursing professionals should also remember that, there is no perfect work environment, but it is what a person
makes it. Searle (2006:264), points out how important the work environment is, for the nursing staff and patient-nurse-relationship. Healthcare organizations should employ up to date methods, in such a way that workload is alleviated and the nursing staff has got enough time to maintain the desired nurse-patient care relationship at all level, Nel ET all. Poor relationship with colleagues and supervisors is potential source of stress and leads to loss of trust, and low interest in problem-solving activities Khan, Byosiere, (1995:198). Being responsible for other people demands a stressful and extensive period of time spent on interacting with people (Baron and Grenbry 1990:229). Furthermore, nurses are expected to enhance their communication techniques to create a more conducive working relationship when attending to patients, although there is a staff shortage. Lack of autonomy and feedback, conflict with co-workers are some of the leading factors to interpersonal stressor.

**Anticipatory Stressor**

According to Scott and Brunero (2008), stress is the most common workplace hazard together with handling of injuries and consequences of chemicals. Registered nurses are working in an environment where they are sometimes exposed to dangers. With the high rate of HIV, nurses may encounter stress. In the process of handling bloods and bloods components they might prick themselves and be infected. Those nurses, who are working in infectious disease wards, have a fear of being infected as well. In their busy daily activities, nurses are filled with fear that their performances and that their actions are not as desired by the patients and the Ministry of Health and Social Services. Due to the imbalance of demand supply, nurses can easily make mistakes.

**Bullying and Harassment**

Harassment occurs when one person pursues an unwanted course of action to others that violates that person’s dignity and causes the alarm or distress. Harassment also extends to behavior relating to an employee’s disability where this results in an intimidating or offensive work environment for the individual. A certain study found that levels of harassment at workplace may lead to differences in performances of work-related tasks. High levels of harassment are related to least negative outcomes. Relationships can be one of the biggest sources of stress, especially when there are problems like bullying and harassment. According to Vega and Corner (2005), cited in Janine and Cooper (2011:6), bullying is a well know problem in organization. Bullying may be characterized by offensive intimidating, malicious or insulting behavior on abuse or misuse of power through means intended to undermine, denigrate or injure the recipient.

**Stress response**

Tomey (2004:37) asserted that stress cannot be avoided at many instances. Tomey identified three stress responses as follows:

**The alarm stage**

Girdano (1997) argues that every person responds differently to a stressful situation. Behavior change like depression, alcoholism, drug abuse can be observed in some individuals as a response to stress or life threatening demand, (Nel et al, 2008:316). In other words a person’s behavior at work and the meaning of that behavior must be always compared with certain criteria in the context of her or his behavior. The stage is characterized by an individual being highly anxious and exhibits signs of fearfulness. As a result to a stimulus, the body collects all its sources to fight against arousal responses. According to Whetten and Cameron (2005:105), stress is necessary, while in the absence of stress,
people or their lives will be bored. People need something to activate them. Moreover, some individuals can be highly stressed, but the negative forces can be balanced out by the positive ones to restore the normal lives.

The fight or fly response
Girdano, Evelyn and Dusek (1997) gave a description of the physiological response that takes place in the alarm stage as follows: The pituitary glands are stimulated to excrete a high amount of AGTH. The stimulus of the adrenal glands results in a “fight or fly” response. Whetten and Cameron (2005:106) asserted that the fight or fly is a reaction to any threat. Aldwin (2007) extended Whetten and Girdano’s earlier work, by stating that, the body, when exposed to physical threat, responds by moving away quickly from the source of the threat, or face the opposing source. This argument is consistent with, or can be compared with the way nurses at the State hospitals respond or react to work related stress. Some became resistant to stress or get into conflicts with their colleague or supervisors (fight). Those who cannot fight back, make their way out for other organizations (fly). ‘Stress too high” was a significant contributing factor for to leave the nursing job in Malaysia, Hatiyah and Yussoff, (2000:27).

Performances
Definition of performances
Amstrong (2005:9) defines performances as the achievement of quantified objectives what people achieve and how they achieve it. In other way performances are the outcomes of an activity and endeavor that matter. According to the Business Dictionary, performance is defined as the accomplishment of a given task measured against preset known standards of accuracy, completeness cost and speed.

The effect of stress on work performances
Many questions were already answered about why do organizations need to tackle or manage stress? Stress can reduce the effectiveness of employees and lead to high rates of absenteeism. Employees that are suffering from stress show less interest in their work have a low concentration and their communication skills are limited. They can become lethargic and have a feeling that they are not valued and end up not making effort to contribute to the common goals. This is evident with the nursing staff when they are under stress. All these mentioned are having a negative impact on the nurse’s performances. Nurses can lose their grip on acceptable social skills when they are under stress and this is dangerous because they are dealing with people’s life. When a level of arousal exceeds the ability to meet the demand upon an individual that person experience feelings of burnout, exhaustion and ultimately performances will be impaired (Wright and Woe 1996:698).
Extremely high and extremely low level of stress tends to have negative effects on performances. Recent nursing research into the concept reflects the growing concern of prolonged stress among the nursing profession, although some stress leads to motivation and achievement. Freeburn and Sinclair (2009) cited that stress, particularly in academic performance and well-being, has been acknowledged for its potential important impact on the educational process. So stress is necessary to a certain extend. Earlier studies by Schulz and Schulz (1994:402-403), indicates that, stress, if not well managed will bring negative consequences, not only to the employee, but also to the organization. This is evident in the nursing profession when some nurses arecharged with misconduct and negligence. The adverse behavior or poor performances of an individual nurse is referred to that particular hospital or to the Health System of the country. In short, the nursing work system often exceeds the limits and
capabilities of human performances. When stress is managed well and channeled in a positive way, it results in a highly motivated team, good team spirit, and common group value and employee morale. So nurses will be eager to learn, progress and will be willing to deliver at their utmost best.

The effect of stress on physiological and physical health of nurses
By understanding the nature of stress and major sources of work-related stress, it is vital to know the effect of it on physical, physiological health and behavior on an individual. Overwhelming evidence indicates that long-term exposure to stressful situations over a period of time is related to onset of illness, emotional stress and involving negative activities. Swanepoel (2006:504) asserts that too much pressure and demands can result into physical health problems absenteeism. Stress plays a role in the development of several types of chronic health problems, including psychological disorders, cardiovascular diseases and musculoskeletal disorders. Physical symptoms like headaches, eating disorder and sleeping disturbances are some of the effects of stress. Absenteeism, poor decision making accidents and burnout are reported high in some organizations were stress levels are high (Tomey 2009:447). This has a negative impact on the individual staff morale and to the organization itself. The high rate of absenteeism and booking off sick contributes to the existing work overload at some hospitals. Nurses have to be moved from some units or wards to cover the shortage. This involves time for orientation and adoption in the new work environment and lead to a decline in performances. The effect of stress can negatively impact workplace relationships and interactions, where advancements may be made out of necessity rather than merit experiencing.

Whetten (2005:106), comments that stress can cause viral infection. The European Safety Agency (2009) stated that health professionals have always paid a heavy price concerning infectious diseases because the nature of their work exposes them. Biological dangers through the use sharp of equipment like needles and through skin contact, health professionals are also exposed to the same active infection dangers as the patients by handling patients' blood and bodily liquids. In addition, the chemical substances such as dangerous medication for example drugs used in chemotherapy, expose nurses to health dangers.

Stress can have a significant impact on individual nurses and their ability to accomplish tasks. More specifically, poor decision making, lack of concentration, apathy, decreased motivation and anxiety may impair job performance and create uncharacteristic errors, Moussaka, Theodoros and Constantinidis (2012). Occupational stress has very negative consequences on nurses’ behavior and can create mental problems such as anxiety, depression, insomnia and feelings of inadequacy (Nel et al, 2008:313)

Performance management
According to Buchner (2008:3), performance management is a key for connecting and aligning the achievement of the employees to the performances of the organization. Performance management aims to entrench performance appraisal as a legitimate part of a manager to motivate employees to achieve the desired organizational goals (Swan 1991:11; cited in Swanepoel et al, 2000:407). According to Spangenberg (1994), cited in Swanepoel (2006) performance management focusses on managing people including planning employee performance, and motivating employees to achieve their goals. Some related tasks like gathering information, giving feedback, motivation of and empowering employees, leads to attainment of organizational goals. Nurses perform some independent tasks and some according to their job descriptions. Jamal (2011) in his study of stress contents, that there is an inverse relationship between job stress and employee performances. According to Swanepoel
(2000:407), performance can be well managed if the employees demand and give feedback about their work. Employers from their side should ensure that stress management programs are and counseling sessions are available in their organizations. Registered nurses operate as middlemen between doctors and patients to ensure that the expected nursing care is rendered to the satisfaction of all stakeholders.

**How to improve performances**

According to Whetten (2005:300), performance is the product of ability multiplied by motivation. Workers are able to perform their tasks if they have the right aptitude, and are provided with training and necessary resources to their disposal. Khan (2011); assert that job stress can be reduced by long time of personal experience and job commitment. Jamal (2011) indicates that performances can be improved by enhancing the role organizational commitment. One of the independent functions of Registered Nurse is to motivate and empower subordinates to accomplish their tasks.

**How to cope with stress at workplace**

A number of nurses who were interviewed stressed the importance of strategies to prevent and cope with stress at the workplace. People cannot get rid of stress by getting rid of their jobs, so they have to find ways for stress management. According to Nel (2008; 316), simple common methods should be used to abbreviate stress like relaxation, changing ones job and getting counselling. Occupational Health and Safety programs are available in some health setups to deal with all matters regarding workplace stress; Swanepoel (2006:624). Nurse managers should introduce activities and measures that promote self-esteem for Registered Nurses.

**From the Employee’s side**

Employees must be aware of the signs and symptoms of workplace stress. Policies and procedures on prevention, reporting and management of stress should be strictly adhered to. Stressful situations outside the work environment must not be carried along to the hospital. Combining stress from home with the one at work will lead to burnouts. Nurses at this hospital under study should learn to take time for themselves to relax at work and outside the work environment and shake off the workload mentality. According to Nel (2008:315) employee should assess their job performances and consider that change in their daily activities could alleviate their stress levels. Employee should be able to learn on the job and be allowed to continue to learn as their career progress. According to Tomey (2008-37), time management is of great value in order to control stress. Nurses should be time conscious, set goals, act consistently and plan strategically when performing their tasks. According to the employment equity cited Nel (2008:155) employees should be treated in affair and respective manner. Affirmative Action measures should be implemented to ensure employment equity.

**From the Employer’s side**

It is of great importance for managers of organizations to monitor the working conditions of the workers (Weinberg, Cooper, Sutherland and Bond, 2007:6). According to (Weinberg et al. 2007:5) managers of Health care sectors should be able to identify the nursing staff at risk and apply precaution measure in order to prevent work related stress. Employees must be aware of the signs and symptoms as well as the prevention measures. A good job which accommodates employee mental and physical abilities should be designed Weinberg et al, 2007:8). The job should be reasonable demanding and provide the employee with at least a minimum of variety job tasks. The employee should feel that the job leads to some sort of visible future. Tomey (2009:35) asserts that stress and burnout can be
managed by setting personal and professional goals and practicing good health. According to the
Canadian Center for Occupational Health and Safety, employers should assess their workplace for the
risk of stress, look for pressure at work which could cause high and long lasting level of stress and
whom may be harmed by this pressure. Management of the Health Sectors should provide work place
health programs that target the true source of stress among the Registered Nurse.
A study done by the European Foundation for the improvement of working conditions (1990) revealed
that a reduction in working hours has both individual and organizational positive results (Weinberg et
al, 2007:10). According to Kwok-bun (2007:6) on hours, one of the sources of stress is usually
determined by the employer. Hence the issue of work related stress can be effectively addressed by the
Ministry of Health and Social Services. Nurses in State Health Care institutions are usually left out
from decision making processes regarding their work. The Canadian Centre for Occupation Health and
Safety (2012) encourages the involvement of employee in decision making as a measure reducing stress
at the workplace. Lack of involvement can also be a major contributing factor to high stress levels.
Whetten (2005:303) assert that it is important to provide training in order to foster a motivating work
environment.
Health care is seen as one of the most stressful sectors to work in. Nursing, specifically have several
factors that can cause stress (Al-khassawneb, Futta (2013:267). A number of studies has looked into the
causes of stress in health care and in the nursing... Poor psychological wellbeing in nurses is
particularly linked to bullying and harassment and to working shifts which are not a nurse’s preferred
pattern of work

Conclusion
Workplace stress has gained interest by various researchers for several years. The concept of job stress
and employees performances is highly associated with the nursing profession. Some researchers are
still investigating the effect of stress on patient outcomes, patient safety and quality nursing care. This
is of great need to establish the causes and effect of workplace stress and have evidence based process
in the nursing profession. Surveys have identified overwork as one of the top safety and health concern.
The next chapter deals with research methodology, Validity and reliability, construction and
distribution of questionnaires and ethical considerations.

RESEARCH METHODOLOGY
Introductions
According to McNabb (2013), research methodology is the approach the researcher takes to acquire the
necessary information regarding the topic under study. In addition, research methodology can be
understood as a science of studying how research is systematically done. In order to employ suitable
remedies for a problem, researchers are requiring to design and employ suitable methodologies. This
section presents an overview of the methods used in the study area covered. It also includes methods of
data collection and instruments of validation of the techniques, the target population as well as the
respondents and the simple size. This study is to identify the contributing factors to stress among the
registered nurses, and the effect of stress on the nursing staff performances at the Katutura State
Hospital in Windhoek, Namibia.

Target Population
According to Cresswell (2012:142) a target population is an identified group with some common
defined characteristic a researcher can identify and study. Terre Blanche et al (2006:133) define a
population as a larger pool from which the elements for a particular study are going to be drawn and to which the findings are going to be generalized. Bryman (2008:697) defined population as the universe of units or elements from which a sample is to be selected. The study population consisted of 284 registered nurses full time employed and working at the Katutura State Hospital.

Data analysis
Data analysis is a process of inspecting, cleansing, transforming and modelling data with the aim of finding conclusions and support decision making. According to Leech and Onwuegbuzie (2007:564), data analysis is a systematic search for meaning. (Leech et al, 2007) also stated that data analysis is a way of processing data so that what has been learned can be communicated to others. Macnee and McCabe (2008:25) define data analysis as the organization and compiling of data to obtain a clear picture of the information gathered which is valuable to the organization. Data can be gathered through interviews, questionnaires and observations methods (Briggs, Coleman and Morrison 2012:115), while Secondary data can be obtained from existing literature, book and journals. The qualitative data gathered from the interviews was analysed by thoroughly reading the notes from the interviewers. The data was then categorized into meaningful parts, this also allowed for the data to be more manageable. The research questions, aims and objectives guided the identification of categories. A theoretical and descriptive approach was used to organize and direct the process of data analysis. The data was analysed and reported by means of statistical reports and a summarized narration.

The quantitative data gathered from the questionnaires and the secondary data sources was analysed and explored by means of tables and diagrams. The type of tables and diagrams used were purely influenced by the research objectives and aims. The tables show specific values, while the pie and bar charts attempts to show the nurse’s perception of their working environment and relates it to workplace stress.

RESULTS, DISCUSSION, AND INTERPRETATION OF FINDINGS
Response Rate
From the population of two hundred and eighty four 284, the researcher selected ninety (90) respondents who took part in the survey. The questionnaires were delivered to them by hand at their particular work station and some were distributed through their supervisors.

Analysis of Data
The findings are presented according to the questions, numbered from one to twenty one.
Demographics of the respondents

Figure 4.1 Age Group

A large proportion of the respondents were in the 31-40 age groups. This is important to the management of the hospital also an indication that a large number of Registered Nurses have 20-30 years more ahead to work. A considerably large proportion of the respondents were in the 51-60 age groups. This shows that the hospital has highly experienced nurses also mentor the inexperienced nurses hence their workload becomes heavy. So the Ministry of Health in Namibia should employ more and young Registered Nurses (Debisette and Judith 2010:13). Previously a promotion, salary, seniority, rank in nursing was granted according to the years of experience. With the new restructuring and regrading process, a small fraction of Registered Nurse falls in the category of Senior Registered Nurses. Registered Nurse in the age group 50-60 feel that young Registered Nurse should do most of the energy consuming work since that they are young. This causes some disruptions to the nurses team’s ability to render quality nursing care. Some junior Registered Nurses feel that they work under too much pressure when compared to senior Registered Nurses.

Gender of Respondents

Figure 2 Gender

A survey done by the Kenexa Research Institution in America (2007) revealed that female workers are vulnerable to stress than male workers. Nursing is a female dominated profession, so the majority (86, 3%) of Registered Nurse is females. At the hospital, nurses have to do heavy duties which require a lot
of physical energy. Due to the shortage of staff, female nurses have to turn heavy patients, push patient on beds or trollies to the investigation stations or to and from operation rooms. After work, the same nurses have to do their domestic chores at home. This implies that nurses may not have time to rest and this may increase their exposure to stress. The respondents highlighted that heavy workloads are causing physiological problems such as backaches and anxiety which leads to low turnover rate, shortage of staff and stress.

**Current post of Respondent**
A collection of 89.7% responded that they are Registered Nurse, while 10.2% of the respondents are Senior Registered Nurse. With the staff establishment for the MOHSS of 2009, some Registered Nurse posts were eliminated. This has resulted in having only four posts for Registered Nurse in the hospital set-up, namely, Chief, Control, Senior and RN. Although their salary scales differs, a large number of Registered Nurse falls in the category of Registered Nurse. There is still some more post to be filled for Registered Nurse. Job dissatisfaction, loss of moral, stress, poor quality nursing care and poor performances occur when staff has to carry the additional workload of others. Unhappy Registered Nurse and other nursing staff are frequently booked off sick and absent from work.

**Relationship with Colleagues**

**Figure 3 Relationship**

Hughes (2008:10) asserts that interpersonal and intrapersonal collaboration through multi-disciplinary teams reduces the problem of making conflict among staff and possibly work related stress. Good communication among staff members, enhance the development of new skills, staff empowerment and improvement of work efficiency. Registered Nurse will lead their teams effectively using planned and standardized processes. The figure above shows that a total of 50% of the registered nurses feel that interpersonal relationships at the workplace are poor. This shows that there is strong evidence to suggest that interpersonal stressors are prevalent at the hospital. Stress for an individual and her interaction with internal and external environments has been noted as a tough and complex concept (Clarke 1984). Clarke recommends that fostering healthy relationships among employees is very effective in reducing work related stress.
Level of work related stress at the hospital

Figure 4 Work Related Stress

A total of 95% of the respondents perceive the level of work related stress as high. The respondents cited that some nurses have to come in on their off days, which also exhaust them and will not be able to perform their well on their normal shift days. It is also gangrenous to the patients because this exhausted nurse will just do what she can and leave some work for the next shift.

Rating of Working Conditions

Figure 5 Work Conditions

Questions 6, 9 and 15 were aimed at establishing the main causes of work related stress at the hospital. The figure above shows that a large proportion of the respondents (70%) rated their working conditions as poor. The factors given as contributors to the current stress levels, also lead to poor working conditions. According to Hughes (2008:3) decision making and outcomes are play an important role in ensuring job satisfaction among employees.
Decision making processes at the hospital

Figure 6 Decision making

The Registered Nurse (87%) cited that they are not involved in decision making to the extent that some equipment are ordered without consulting the particular nurse in charges. This result is that some of the critical equipment is not procured timeously hence nurses cannot effectively execute their duties. The result is that the nurses are blamed for poor performance. The management however should not involve all nurses in the decision making processes but should ensure that nurses are properly represented. Xue, Bradley and Liung (2011; 302) asserted that encouraging and engaging employees in decision-making, increases their commitments to their organization and allows the flow of information and encourages learning. According to Tucker et al (2002:124), Organisational learning occurs through problem-solving which is the identification and resolving of problems that arise in the daily work actions and routines.

Equal treatment at Workplace

Figure 7 Equal Treatment

Almost 63% of respondents have agreed that employees are not being treated equally at their workplace. Some Registered Nurse has been working hard and for quite a long time at the KSH but they were never promoted or thanked for their work. Some have furtheered they study and improve their skills on their own cost, but not being rewarded or remunerated accordingly. Training, especially in-service-training is of great importance in any organization. Some Registered Nurse are complaining that they are never given chances to attend training workshops or courses while others are repeatedly enjoy such privilege.
Management is doing enough to deal with stress at the hospital

A total of 98% disagree that the management of KSH is doing enough to deal with stress at work. The Registered Nurse highlighted that there are ineffective stress management programs in the hospital. Nurses highlighted that they could not confide in each other whenever they encounter problems at work citing lack of confidentiality and. In addition, the study established that there are no regular staff meetings where nurses can express themselves and share ideas collectively. Suntharamont (2009:51) asserts that feed backs assist employees to resolve work related problems and this result in greater job satisfaction.

Leisure activities

A proportion of 87% of the respondents cited that there are no sufficient leisure times for nurses to reduce stress. Due to the extensive shortage of staff, Registered Nurse and other nurses categories have to extend their shifts to cover the shortages. Nurses who are doing night duty sometimes only get one night of and work six nights per week, so there is really not enough time for themselves or to spend with their families. This results in loss of interest in execution of duties, lack of communication,
tiredness stress and poor performances and nursing care. Some Registered Nurse end up being booked off sick due to the physiological strain they are experiencing at work.

Stress as the main barrier to nurses executing their tasks

![Figure 10 Main stress barrier]

The pie chart above shows that the majority of the respondents (86%) perceive as the major barrier to them executing their duties. Nurses can lose their grip on acceptable social skills when they are under stress and this is dangerous because they are dealing with people’s life. Stress causes nurse to experience feelings of burnout, exhaustion and ultimately performances will be impaired (Wright & Woe 1996:698).

Workload at the hospital

![Figure 11 Workload]

A proportion of 99% agreed that there is no enough staff to handle the nurse’s workload. Nurses have never been enough, so the available staff should just have to stretch their arms for the sake of the patients. Most of the time, nurses at KSH have to extend their shifts to cover the shortages. The respondents cited that there is a chronic shortage of Registered Nurse at KSH. Functions like dishing of food, accompanying patients to other department are also left to the nurses at the expense of their official duties. According to Whetten and Cameron (2002:107), time-stressors are experienced when a person has a lot to do in a short time. Work overload and lack of control are two most stressors identified. There effect heavy workloads on an employee’s state of mind may result in higher stress levels at KSH. The management of KSH should employ more staff to reduce the existing workload. Some Registered Nurse is reported to be just employed for a short period and leave for greener pastures. Measures should also be taken to select Registered Nurse carefully and to retain them
Ability of Registered Nurse to deal with work related stress

Figure 12 Registered Nurse deal with stress

About 98% of the respondents agreed that there are not trained in stress management or stress prevention program. The Registered Nurse responded that they know what stress is, what the signs and symptoms are, the effects of stress but know little about how to deal with it. Moreover, there are no training program or stress prevention sessions in the hospital. Nurses have to see their own doctors if they experience problems and other health related issues, sometimes be booked off sick. This again increases the already existing workload and lead to poor performances from the Registered Nurse. Hughes (2008:1) asserts that high reliable organizations that have a culture of internal and external customer care and who capitalize on healthy employees, offer favourable working conditions to their employees. Such Organisations are also dedicated to improve performances and render quality products and service.

Interpersonal Relationships at the hospital

Figure 13 Relationships

Only 10% of the respondents stated that they were harassed by other employees. The particular Registered Nurse who was involved in harassment were disciplined and warned. The management of KSH is doing well to minimize interpersonal stressors in this regard. High levels of harassment are related to least negative outcomes. Relationships can be one of the biggest sources of stress, especially when there are problems like bullying and harassment. Bullying may be characterized as an offensive intimidating, malicious or insulting behavior on abuse or misuse of power through means intended to undermine, denigrate or injure the recipient (Noberg, 2010).
Task Allocation

The figure above shows that a proportion of 73% indicated that they are comfortable with the assigning and allocation of task by their supervisor. Employees are said to experience stress if they are assigned tasks and there is no proper control to direct them in the right way (Karasek, 2008). This is an indication that Registered Nurse is enjoying what they are doing. According to Knoll and Gill (2011:315), assert that if the employer and employees trust each other’s, employees will feel safe and positive and this results in higher job satisfaction. Work should be delegated and allocated to the nurses according to their ability and experience. Currently at the State Hospital under study and other state hospitals in Namibia the Ministry of Health is busy changing the manual paper work to a unique information system. Most of the nurses find it difficult to operate and feed the computer with the necessary information about the patients, like admissions, discharge, follow-ups, dispensing of medicine and other processes around patient care.

Conclusion
Stress and its related factors is a concern to nurse managers and researchers for many years. The hospital is a most stressful work environment as nurses are controlling severe health and death. Nursing is a stressful occupation and the hazard of nursing work can negatively impact the nurse performances, and impair health both acutely and in the long run. The research questions are numbered from one to twenty one and were analysed separately. By analyzing the questions one by one, according to the respondents, it was possible to uncover answers to the initial research question. The overall findings from this study were work related factors contributing to stress, some as, workload, staff shortage, less involvement in decision making and interpersonal relationship. The results were graphically presented. In order to gain more knowledge about the topic, a more detailed study is needed.

CONCLUSIONS AND RECOMMANDATION
The Objectives of the Study
- To identify the sources of Stress at Katutura State Hospital.
- To identify the strategies used to manage stress at Katutura State Hospital.
- To assess the stress levels at Katutura State Hospital.
- To assess the effect of stress on the performance of nurses at Katutura State Hospital.
Findings from the Secondary Research

The findings from the study are discussed in two parts as follows: key findings from the existing literature and key findings from the primary research. The following are the findings extracted from the existing literature.

Work overload and lack of control are time stressors generally experienced as a result of too much to do in a short time, Karasek (2009), Whetten and Cameron (2002:107). Tasks that are not well planned can be a source of stress. A variety of studies have indicated that quantitative work overloads are potential sources of stress in the workplace, in which individuals like Registered Nurse, are expected to complete some work within a given time Kassar and Tattersall, (1998:85). A nurse should be time conscious, since that much of her work is timetabled. If not so, the negative impact of her performances will be past to her client or patient. Mustafa (2012) contents that nursing is demanding and the workload placed on nurses are intense. Mostly everything nurses do is time-sensitive, and each task must be performed within very short timelines and intensive deadlines.

According to Karasek Demand Control Model of (1979), workplace stress is a function of how much pressure and demands a person experiences at work, while control, is the discretion, authority or job decision latitude people have over their own responsibilities Nel et al (2008:313). Employees are said to experience stress if they are assigned tasks and there is no proper control to direct them in the right way Tomey (2004:33). Karasek (2008) reviewed The Demand Control Model and concluded that there is interaction of objective workload demand in the environment, and employee’s decision latitude, to meet the demand. According to Perrew, Ganster (2010:3), Sutherland, Cooper and Bond (2010:3) employees can be dissatisfied and perform poorly if they have no say over how and when they have to do their work or involved in decision making regarding their work. In other words, when the job demand is high, the level of control should be intensified in order to prevent the risk of stress-related illnesses, Nel et al (2008:316).

Interpersonal stressor is the third cause of stress. Stress for an individual and her interaction with internal and external environments has been noted as a tough and complex concept work environment is very important to the employer and customers. Positive behavior improves interpersonal relationships and is important in the workplace Perrew et al (2010:240. It is vital for the managers of organizations to create an environment which is conducive to the employees and customers. In the medical environment, interpersonal relationship has also to do with interaction with patients, their relatives and other medical teams’ members. The hospital is a stressful environment, but nursing professionals should also remember that, there is no perfect work environment, but it is what a person makes it. Searle (2006:264), points out how important the work environment is, for the nursing staff and patient-nurse-relationship. Healthcare organizations should employ up to date methods, in such a way that workload is alleviated and the nursing staff has got enough time to maintain the desired nurse-patient care relationship at all level, Nel ET all. Poor relationship with colleagues and supervisors is potential source of stress and leads to loss of trust, and low interest in problem-solving activities Khan, Byosiere, (1995:198). Being responsible for other people demands a stressful and extensive period of time spent on interacting with people (Baron & Grenbry 1990:229). Furthermore, nurses are expected to enhance their communication techniques to create a more conducive working relationship when attending to patients, although there is a staff shortage. Lack of autonomy and feedback, conflict with co-workers are some of the leading factors to interpersonal stressor.
Results from the Primary Research

Gender distribution at the hospital was found to be a contributing factor towards work related stress at the hospital. This is suggested by the fact that the majority (86.3%) of Registered Nurse are females. At the hospital, nurses have to do heavy duties which require a lot of physical energy. Due to the shortage of staff, these female nurses have to turn heavy patients, push patient on beds or trollies to the investigation stations or to and from operation rooms. After work, the same nurses have to do their domestic chores at home.

Another contributing source of stress at the hospital is inadequate leisure activities available for the nurses to manage stress. A proportion of 87% of the respondents cited that there are no sufficient leisure times for nurses to reduce stress. The key informants highlighted that there are no stress management techniques at the hospital. The respondents highlighted that they cannot turn to their colleagues when they are stressed because the hospital is a busy environment hence there is little time to discuss personal problems.

Heavy workloads were found to be the major source of stress at the hospital. This was evidenced by a proportion of 99% agreeing that there is no enough staff to handle the nurse’s workload. Nurses have never been enough, so the available staff should just have to stretch their arms for the sake of the patients. Most of the time, nurses at KSH have to extend their shifts to cover the shortages. The respondents cited that there is a chronic shortage of Registered Nurse at KSH hence functions like dishing of food; accompanying patients to other department are also left to the nurses at the expense of their official duties.

Lack of nurses’ involvement in decision making was also found to be a major source of work related stress. The Registered Nurse (87%) cited that they are not involved in decision making to the extent that some equipment are ordered without consulting the particular nurse in charges. This result is that some of the critical equipment is not procured timeously hence nurses cannot effectively execute their duties. The result is that the nurses are blamed for poor performance.

The study concludes that the level of stress at the hospital is perceived to be high. This is evidenced by 95% of the respondents who perceive the level of work related stress as high. The respondents cited that some nurses have to come in on their off days, which also exhaust them and will not be able to perform their well on their normal shift days. Furthermore the fact (70%) rated their working conditions as poor suggests that stress levels at the hospital are high.

The study revealed that stress is a major barrier to nurses effectively executing their duties. A proportion of (86%) cited stress as the major barrier to them executing their duties. Nurses can lose their grip on acceptable social skills when they are under stress and this is dangerous because they are dealing with people’s life.

Recommendations

Registered Nurse employment and retention

Although the various Nurses training Centers in Namibia are trying to produce as many qualified Registered Nurse as possible, the shortage still exists. The findings from this, study indicates that the highest percentage of respondents is in the 20-30 age groups. It is also noticed that this is the age group which leaves the hospital for greener pastures or for other careers. It is important for the management to apply measures to attract, maintain and retain these nurses. Training should be strengthened for them to tap from the retiring staff member’s knowledge. Provision should be made for them to grow and being innovative. The management should also encourage older staff to transfer their knowledge and
skills to the young Registered Nurse. The young Registered Nurse should know that the combined effort of all the nurses and other medical staff that make the organization reach its goal successful, so the success lies in their hands.

**Attracting more male Nurses in the Profession**

According to Williams (1989:6), male nurse, according to the societally order, have been rewarded masculine qualities more than feminine qualities. This permits male nurses to benefit from the perpetuation of gender. Currently, male Registered Nurse who and better pay administrative and leadership positions Williams (1989::9). The management when employing Registered Nurse in future is recommended to give privilege to male nurses. In the introduction process of the advanced information system for all the procedures and processes in the hospital, male nurses will be the right people to utilize in the exercise of training other staff members, since that they are up to date with the new technology.

**Fair and Equal treatment for all Nurses**

80% of the respondent strongly agreed that Registered Nurse is not treated equally at KSH. Workshops and trainings regarding work are only attended by some nurses, who also do not give feedback to the remaining large group. Some Registered Nurse, who is employed for more than 30 years, did not attend a single workshop so far for their skill improvement. Most of the Registered Nurse who is close to their retirement was never promoted at all. This discourages the Registered Nurse to transfer their rich knowledge for years to the young ones.

**Involvement in decision-making regarding Registered Nurse Work**

In all the organization, communication is a key to success. Registered Nurse should come together to discuss regarding their work, and seek for the way forward. Management should provide such a platform for Registered Nurse to air their views. Employees feel valued when they are recognized and they will try to accomplish more. A contribution from different divisions will bring more ideas and changes.

**Area for Further Study**

The study revealed that there is a need for the exploration of the workforce work-related stress. It is necessary for such a study to be conducted in all state hospital and introduce a stress management program in all state hospitals Namibia.

**Conclusion**

Stress in the workplace is a problem for nurse managers and researchers. The hospital is a most stressful environment, where nurses are controlling severe health problems and fighting death. Nursing is a stressful occupation and the nursing work can negatively affect the Registered Nurse performances and impair health both acutely and in the long run. The research questions are numbered from one to twenty one and were analysed separately. By analyzing the questions one by one according to the respondents, it was possible for the researcher to uncover answers to the initial research questions. The overall findings from this study were factors contributing to work-related stress some as workload, staff shortage, lack of involvement in decision-making and interpersonal relationship.
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