



## Workplace Stressors and Coping Strategies Across Healthcare Roles

**Mohammed Mazi Alanazi<sup>1</sup>, Waheed Mansour Albarghash<sup>2</sup>, Abdulrahman Khalid bin-abdulwahid<sup>3</sup>, Yahya saleh alsarhani<sup>4</sup>, Mohammed Naher Almutiri<sup>5</sup>, Ghadeer Ghannam Alenizi<sup>6</sup>, Soaad Hamdan Alenizi<sup>7</sup>, Fahad Saleh Alotaibi<sup>8</sup>, Fahad Abdulaziz Alotaibi<sup>9</sup>, Aysha Nawi Alanazi<sup>10</sup>, Maream Nawi Alanazi<sup>11</sup> and Turki Rashed Alshehri<sup>12</sup>**

<sup>1</sup> Corresponding Author, Nurse, King Abdulaziz Medical City, Ministry of National Guard-Health Affairs

<sup>2, 6, 7</sup> Nurse, King Abdulaziz Medical City, Ministry of National Guard-Health Affairs

<sup>3, 4</sup> EMT, King Abdulaziz Medical City, Ministry of National Guard-Health Affairs

<sup>5</sup> Health Administration Technician, King Abdulaziz Medical City, Ministry of National Guard-Health Affairs

<sup>8</sup> Health Administration Tech, King Abdulaziz Medical City, Ministry of National Guard-Health Affairs

<sup>8</sup> Health info Tech, King Abdulaziz Medical City, Ministry of National Guard-Health Affairs

<sup>10 11</sup> Nurse, Ministry of health, Alshamli hospital

<sup>12</sup> Clinical dietitian, Imam Abdulrahman al Faisal hospital

### Abstract

The concept of job-related stress applies to an excessive demand on a person's cognitive, emotional, and biological resources, with workload or performance pressure exceeding the limits the person can cope with (Smith, 1970). Stress in health-care professionals leads to burnout and turnover intentions, showing its effects on healthcare practice and safety (Koinis et al., 2015). Health systems all over the world are shifting toward a patient-centered-care approach, affecting the roles of health-care providers. The introduction of policy amenities or health-enterprise development schemes governs the collaboration among governors of health facilities. While such facts are known, they remain dry and abstract.

Due to the inherent ambiguity of job-related pressure, allocating and gauging preferable schemes become cumbersome. It is essential to explore wellness practices available for health care in a timely fashion since the extent, diversities, and alternatives continue to flourish. Several communal factors of well-being are shared across professions: healthy coordination in pool-wise units within the health system; an earnest and optimistic growth of engineering way-of-works; a mute as to how tenderhearted harbors; and a casual espresso messes called "English Coffee."



**Keywords-** Workplace stressors, coping strategies, healthcare professionals, occupational stress, interprofessional comparison, mental health, job demands, burnout.

## **1. Introduction**

Healthcare professionals face significant stressors daily, and ignoring these stressors can jeopardize individual and patient well-being. Health care systems provide critically needed care for patients, yet employees within these systems report various strains. The Emergency Medical Technician (EMT) role faces four acute workplace stressors: stress due to live patients and patient transport, exposure to traumatic experiences, safety, and organizational constraints. These factors encourage adverse coping mechanisms such as avoiding calls, tardiness, unaddressed equipment issues, resignation, and seeking employment outside the organization. Healthcare administrative and technology roles are common and critical across organizations yet lack focused workplace stress research. Four prominent workplace stressors influence administrative technicians: size of bureaucracy and volume of work; degree of multi-tasking and inability to focus; excess information; and excess interruptions. These stressors induce evasion of calls, replacement job searching, heightened nervousness, and excessive worrying. Health information technologists encounter service-oriented data pressures imposed by external stakeholders; mandatory, system-oriented downtimes that compromise staff performance; security-oriented concerns with diverse data formats; and restrictive, regulation-oriented requirements that limit support. Workplace stressors affect health, engagement, productivity, and satisfaction, yet less attention has focused on mitigating associated workplace adverse coping strategies for healthcare roles other than EMT and nursing.

Healthcare professionals constantly experience retaliatory systems of stress. Condon et al. (2020) explore academic burnout; Crook et al. (2020) examine family-systems theory dimensions of educational stress, and Hobfoll et al. (2020) analyze chronic strains without state effects. Such strains arise from the fundamental ambition to change educational reality; however, these are merely adjunct to pre-existing issues.

## **2. General Stressors in Healthcare Settings**

Workplace stress can influence healthcare professionals' physical and emotional well-being by impacting both efficiency and overall quality of life. Lack of workplace stress management strategies and a perceived disinterest from management in their emotional state contribute to stress (Koinis et al., 2015). Resilience depends on coping and adjustment skills. Occupational stress has been declared a worldwide epidemic, especially in healthcare, where professionals work under high time pressure and emotional demands. Healthcare workers not only care for patients but also perform administrative tasks, leading to physical and emotional



strain that can cause stress and burnout. High job demands test resilience and influence the ability to cope and recover (Smith, 1970).

### **3. Stressors and Coping in Emergency Medical Technicians**

Emergency medical technicians (EMTs) perform immediate responses to people experiencing acute medical emergencies, including cardiopulmonary arrest, trauma, and choking. EMTs have regular exposure to traumatic injuries, including gunshot wounds, motor vehicle collisions, and abuse cases. They often work under severe time and resource constraints, such as delayed emergency department availability and overloaded ambulance fleets. Many EMTs sustain injuries and infections, and respond to cases involving violence, gunshots, and chemical exposure (Parvaresh-Masoud et al., 2023).

Person-centered coping strategies used by EMTs include seeking support, practicing self-care, using humour, and finding meaning and purpose in work. Support from peers and supervisors is a major resource. Organization- and system-supported coping strategies include risk mitigation strategies before attending incidents, training to increase perceived competence and self-efficacy, and debriefing after critical incidents (Vagni et al., 2020).

#### **3.1. Stressors for EMTs**

Emergency medical technicians (EMTs) are the frontline providers during medical emergencies, performing critical and life-saving skills while under duress to stabilize a patient until more definitive care is available. They are subjected to acute stressors of varying intensity throughout their shift, yet they still tend to experience moderate to high stress levels (Mahmoud Amro et al., 2022), often governed by statutes of “danger to self and others” rather than patients’ medical needs per a nationally defined scope of practice. EMTs may be subject to traditional transportation pressures such as traffic congestion or inability to comply with community concern for timely arrival (Parvaresh-Masoud et al., 2023), compounded by sensitivity to systems dependent on cottage industries for standardized configurations, availability of backup transport, and equipment having gone unreturned. Frequent exposure to traumatic incidents creates the potential for vicarious trauma, contributing further to unmet needs for debriefing or peer support. Concerns over safety following policies to leave cab doors unlocked, reduce response travel, or avoid second occurrences of unprotected backup further compound uncertainty and stress. Organizational constraints around fortifying support structures—this remains common in tendered contracts typically awarding maintenance contracts better servicing the chassis than time-sensitive equipment—add schism not only for EMTs but also for a technologically challenged support system unable to identify industry-standard sites for consistently documented issues over time.

Work schedules distributing long-length shifts within a rotating watch or facility-dependent need for intermittent overtime magnify fatigue and encumber well-being (Koinis et al., 2015)



, yet organizationally, such is often not recognized owing to ongoing availability of support. New personnel arrive as individuals with vocational aspirations rather than competent university degrees, yet many subsequently depart. EMI training provisions remain common in many locales not yet adopting regular supplemental shift services. EMT expectations, legalities, assurance of payment, and equipment supplied from a not-for-profit-rooted quasi-public organization differ markedly for surrounding affiliations retaining the earlier industry norm. Many continue arriving for training motivated to obtain a degree of certification not generally limited to youth yet soon exiting or spending the larger share of on-duty time as a counterintuitive technician at mixing stations and, when not, hydro or roads testing discharge system, while various locales outside the concerned metropolitan area, yet even safer locales, experience multiples averaging over 700 hazardous frequencies weekly.

### **3.2. Coping Strategies for EMTs**

Emergency Medical Technicians (EMTs) are frequently exposed to traumatic events such as severe physical injuries, sudden death, abuse, and potential violence. Such exposure increases the propensity for trauma-related distress and indirectly affects their psychological well-being while responding to more familiar non-traumatic calls. Supported by stress-coping theories, EMTs employ system-supported and person-centered coping strategies to address job-related difficulties and psychological distress. System-supported resources, such as peer support and organizational debriefing, provide reasonably accessible options. Person-centered strategies such as resilience training and risk mitigation remain less established in the EMT community. Emergency Medical Technicians' stressful working environment leads to high levels of anxiety, irritation, somatic symptoms, and emotional distress (Parvaresh-Masoud et al., 2023). Official statistics indicate that road trauma is one of the three leading causes of death among EMTs (Vagni et al., 2020).

Rather than only focusing on heroic and socially valued meanings, EMTs attempt to find meaning in burdensome jobs through various strategies. Although part of the job is unpleasant and irritating, many continue to serve because they find meaning in helping people, feeling that their assistance positively influences lives. A significant post-incident intervention for many EMTs involves instructing service users on driving safety, sharing personal driving experiences, and referring them to teaching resources. Such opportunities offer non-trauma-related explanations for the service call, contribute to learning, and enhance preparation for similar jobs in the future. Various coping practices help deal with physical problems and chronic fatigue (Garcia Lourenção et al., 2022).

### **4. Stressors and Coping in Nursing**

Health professionals experience diverse stressors depending on their specific roles across different positions in healthcare. For example, emergency medical technicians (EMTs)



contend with acute incidents, transport pressures, exposure to trauma, safety concerns, and organizational constraints. In contrast, nurses encounter staffing ratios, emotional labor, exposure to suffering, documentation burden, and shift fatigue. Administrative technicians face a bureaucratic workload, multitasking, information overload, and interruptions. Health information technologists grapple with data pressures, system downtimes, security concerns, and regulatory demands. Dietitians manage diversity in caseloads, client expectations, documentation, and interdisciplinary coordination.

Despite these varied challenges, certain coping strategies and resource types have been found to span multiple roles. These transferable approaches include cultivating mindfulness, enhancing peer support, sharing workload-equitable schedules, and pursuing professional development opportunities. The identification of role-specific stressors, along with corresponding coping strategies and adaptable resources, offers valuable insight into the experience of stress across the healthcare sector and highlights commonalities across diverse healthcare roles. By assembling these knowledge components, the research serves to inform future scholarship on stress and coping in healthcare settings.

Nursing, despite its historical foundation as a stress-filled profession, is an evolving field that retains aspects of emotionality. Today, nurses frequently experience stress due to inadequate staffing ratios, which leave the remaining staff overburdened and fatigued; emotional labor incurred from interacting with patients in pain or suffering; exposure to patients' suffering, such as terminal illness or unforeseen tragedies; extensive documentation requirements, which detract from time spent with patients; and persistent fatigue following shifts.

#### **4.1. Stressors for Nurses**

The nursing profession encompasses lifelong learning and is historically emergency medicine-associated. Nurses work in sharp focus environments like emergency and intensive care wards, exposed to compassion fatigue and loss of a patient. Workload remains high. Team work and regular breaks are crucial. Exposure to sufferings of colleagues, personal life, clients, neglected loved ones, even pandemic and financial inflation are general risks impacting life and ability. Documentations, fluctuating shift patterns, working overnight or on Public Holidays adds easily stress and fatigue. Electronic Records speed documentation, yet increase data request number, technical malfunctions, or overload rectify. As guidelines change frequently demands further adaptation in practices. High monitoring/working/overtime expectations, limited computers and long messages escalate pressure. "Deadlines" might investigate further thought. Extensive, flooded and incorrect data within Canadian norms or elsewhere even happen. Uncertainty in when second interview or correction request on sent completed appraisal will appear, induces further obstructions. Task-switching, obstacles, inadequateness or de-priorities prolong interventions and avoidable repeated acts. 57 % of senior nurses in Kingdom of Saudi-Arabia perceived nursing



profession “stressful”, falling entirely or closely short felt satisfied with career choice. 50% satisfaction stated by “stress” considered highest obstacle linked. Largest workforce group, nurses in Canada among high grim ratio easily rotate in chart (M. Alruwaili et al., 2022).

#### **4.2. Coping Strategies for Nurses**

Sources highlight the significance of coping strategies in addressing mental stressors experienced by nurses. These strategies can be categorised as: (1) peer or supervisory support; (2) developing coping ability; (3) removing, relieving, or managing mental stress factors; and (4) stresses caused by the work environment or insufficient manpower (Maria Cybulska et al., 2022).

In 2019, researchers (Savic et al., 2019) described shifts as a risk factor. Nurses coping with this stress adopted measures that reduced concentration on irrelevant information. They improved sleep quality by using sleep-suppressing colours and white noise to mask disturbing sounds. Adopting exercises to increase sleepiness, resting before nursing day shifts, and consuming caffeinated drinks before night shifts also received positive mentions.

Stressors frequently facing nurses include high patient ratio, paperwork, and post-shift tiredness. Health facilities prioritising nursing systems adopt collaborative governance, allowing nurses to participate in ward management. This improves ability, makes decisions less dependent on nurses, and alleviates subjective stress. Scheduling a short period for a quiet meal during the shift or planning no-overtime study time after work helps handle stress.

#### **5. Stressors and Coping in Administrative and Technological Roles**

Workplace environments in healthcare settings are increasingly demanding. Roles focused on information management, insurance billing, patient data collection, and healthcare equipment support also experience unique pressures. These pressures affect the engagement and retention of administrative staff, particularly in regions with acute workforce shortages. Specific challenges include bureaucratic workload, multitasking, information overload, and frequent interruptions (Koinis et al., 2015). Techniques that facilitate prioritization and scheduling can assist with organization. Coping strategies that benefit administrative technicians can bolster workplace well-being.

Health information technologists encounter stressors related to patient data ownership. Although transferring data between healthcare organizations typically constitutes the bulk of system modification, requests often arise regarding data loss. Securitising patient data poses further concerns, which are amplified during hospital mergers. Unanticipated downtimes further impede access to information. Regulatory pressures also contribute to role-related stress. Standardization that clarifies ownership limitations, enhances organization, allows accurate forecasting, and pre-mitigates risks can reduce pressure. Automating tedious or error-prone tasks allows professionals to concentrate on essential aspects of their position and



diminishes external pressure when data changes occur. Fostering a culture that encourages non-punitive error reporting enables team members to seek assistance without fear. Continuous professional education helps practitioners maintain necessary knowledge.

Dietitians experience varied caseloads and levels of difficulty across patients and seek to accommodate diversity within the confines of workflows. Client dissatisfaction stemming from unmet needs influences stress levels, as do burdensome documentation mandates and time-intensive interdisciplinary coordination. Effective time management aids adherence to workflow while allowing necessary flexibility. Obtaining peer input on complex or atypical cases can lessen professional isolation and spur productive reflection. Emphasizing the adoption of evidence-based practices removes the onus of determining appropriateness, while regular self-reflection encourages consideration of past actions and facilitates future improvements.

### **5.1. Stressors for Administrative Technicians**

Administrative technicians working in healthcare systems encounter specific and challenging stressors that hinder their effectiveness. A bureaucratic workload consisting of multiple, simultaneous, and sometimes conflicting tasks generates stress. These technicians often find themselves in a multitasking role in which they need to switch rapidly among diverse activities. The various requests and interruptions these technicians have to manage add to their workload. There are frequent requests for information in the form of phone calls, e-mails, verbal messages, and consultations with staff members concerning a wide variety of topics (Koinis et al., 2015).

### **5.2. Coping Strategies for Administrative Technicians**

Administrative technicians encounter many workplace stressors or demands. Bureaucratic workload is demanding and paperwork is often tight. In addition to the pandemic situation, the demands imposed on these professionals have increased. The use of various communication tools leads to information overload and the need for quick response to emails and messages, hence multitasking. Administrative staff must deal with interruptions, either questions from other technicians, coworkers or even their supervisors. Prioritizing activities with a clarity of priorities is crucial, and the establishment of prioritization frameworks facilitates the organization of daily work. Scheduling practices lead to improvement in time management and allow work to be done at the appropriate time of the day. A supportive supervisor provides psychological support. These supervisors reassure the administrative staff that they can transmit their requests—whether professional or personal—to them without any fear of being judged (Garcia Lourenção et al., 2022).



### **5.3. Stressors for Health Information Technologists**

Health information technology facilitates the handling of vast amounts of patient information and other data by increasing the availability, accessibility, and usability of health information. However, according to health information technologists, managing these data contributes to intense technostress. High workloads in health information technology routines, irregular hour demands related to health information management, and ongoing system downtimes place enormous additional pressure on the health information technology function. Koinis et al. (Koinis et al., 2015) found that high work-related stress, emotional exhaustion, limited work performance, work-life conflict, and personal life disturbances inhibit the coping abilities of health information technologists. The operations and management of health information across national, regional, jurisdictional, and institutional systems, along with systems downtimes, are major sources of stress for health information technologists. So are responsibility for data privacy and security, exposure to the illegal use of data, extensive requirements on the management of developmental health information, normative demands from institutions on system functionalities, and an unending supply of new obligations framed within national health policies (Bail et al., 2023).

### **5.4. Coping Strategies for Health Information Technologists**

Health information technologists working in healthcare environments face multiple stressors, including excessive expectation to manage greater patient data with limited resources, shrinking timelines for resolving service requests, downtime, data security concerns, and the challenge of meeting regulatory requirements (Garcia Lourenção et al., 2022). Coping strategies to help reduce job-related stressors include following standardized procedures to favour compliance and time efficiency, automating IT procedures to enable prioritization of standard versus exceptional requests, encouraging reporting of errors and near misses to institutionalize lessons learned and prevent recurrence, and participating in continuing education to remain knowledgeable of evolving regulation changes (Koinis et al., 2015).

Coping strategies for health information technologists include problem-focused strategies that manage or solve stressors and emotion-focused strategies such as avoidance, denial, and emotional expression. These strategies help prevent burnout, improve motivation, and enhance job satisfaction. They also serve as protection against burnout syndrome and influence quality of life. Common strategies among health professionals are problem solving and seeking social support, including behavioral and cognitive approaches. Positive coping strategies like social support and problem solving improve stress management and work performance and may reduce burnout risk. Resilience training programs are recommended to help professionals cope with stress effectively.



## **5.5. Stressors for Dietitians**

Nutrition plays a significant role in health and disease prevention, making the need for qualified dietitians crucial. In Japan, a rapidly aging population has increased the demand for dietitians. Consequently, the work environment and stressors experienced by dietitians have changed considerably (Yaginuma-Sakurai et al., 2021). Positioning education at the heart of health maintenance, dietary management, and food safety, dietitians engage to a growing degree in education regarding disordered eating and are called upon to prevent and manage lifestyle-related diseases. Stress is accumulated due to a surge in clinical duties, which now require substantial communication with medical professionals and patients and the management of food allergies in school children. Additionally, demand for dietary education has risen among every age group for both nutrition and cooking, resulting in longer hours spent on food service and nutrition guidance. Supporting dietitians in managing and coping with stress is essential to serving society in the future.

Dietitian tasks vary considerably across work environments such as hospitals, school settings, health promotion facilities, food companies, and research institutions. Common stressors include a wide variety of cases from diverse clients, expectations and complaints from clients, protracted record documentation, lunch preference requests from staff and children, and the necessity for clear coordination with other occupations within a hospital. Coping strategies center on practicing time management, setting collaborative priorities with other team members, addressing professional knowledge through evidence-based practice in planning menus and educating meal management, and adopting reflective practice through regular and systematised records of personal experience in advance and expansion of on-the-job training topics.

## **5.6. Coping Strategies for Dietitians**

Dietitians face a diverse range of clientele, each with unique needs, preferences, and lifestyles. This can create pressure to achieve clients' desired results and meet their requirement for frequent progress checks. Inadequate coverage for dietitian services can result in additional caseload difficulties. Time constraints and extensive paperwork limit opportunities for planning, collaboration, and staying abreast of developments. Coordination with other disciplines is necessary for joint client support, but approaches vary widely and often differ from dietetic practice (Garcia Lourenção et al., 2022).

Dietitians use evidence-based practice, relying on up-to-date data from peer-reviewed literature and professional publications to ensure recommendations align with the latest skills and knowledge. Peer discussions foster motivation and secure needed resources, while reflective practice promotes self-awareness and helps maintain therapeutic potential (Koinis et al., 2015).



## **6. Cross-Role Comparisons and Shared Coping Practices**

Workplace stressors and coping strategies among healthcare professionals depend on role-specific responsibilities. Stressors also share a number of commonalities. Emergency medical technicians (EMTs) contend with acute incidents and exposure to trauma, nurses manage high patient volumes and the emotional burden of patient suffering, and administrative staff face information overload from bureaucracy. Despite differences, many coping strategies are transferable across responsibilities. Administration technicians prioritize workloads and schedule tasks, approaches which are also relevant to patient care. Dietitians and health information technologists adopt structured procedures to enhance clientele and workflow management. These examples illustrate that the best-practice coping strategies are not only valuable but may be implemented in multiple positions, and that opportunities exist to better address the demands of specific roles and promote effective coping strategies. Cross-training emerges as a promising avenue for establishing greater awareness of both commonalities and distinctions across occupations.

## **7. Organizational and Individual Interventions**

The accumulated knowledge on workplace stressors in healthcare identifies several evidence-based organizational and individual interventions that promote psychological wellbeing among medical and non-medical staff (Bhui et al., 2016) ; (Koinis et al., 2015) ; (Pignata et al., 2017). Implementation of these interventions is vital because supportive policies enhance employees' health, motivation, and commitment to remain in the organization, which is critical for addressing the overwhelming attrition of healthcare professionals exacerbated by disruptive global events.

At the organizational level, effective approaches include fostering open communication, enhancing social support, providing stress management training, implementing team-building initiatives, and involving healthcare professionals in organizational policy formation and decision-making. Individual-focused strategies such as individual counseling, individual coaching, stress control training, cognitive-behavioral therapy, exercise, sleep hygiene guidance, mindfulness practice, peer support, job autonomy, and balanced workloads are likewise perceived as efficient;

## **8. Conclusion**

Workplace stressors and coping strategies, though they vary by role, significantly affect physical and mental health. The evidence thus far highlights common stressors across divergent healthcare positions and indicates that diverse coping strategies can mitigate their impact. Government and agency leaders, hospital administrators, and HR professionals should adopt evidence-based practices that support the well-being of healthcare personnel. Broad access to resilient-specific training would be a met policy-related objective. Research



efforts might usefully clarify the mutual influence of demand, stress, and coping across multiple positions, and they could examine how the effectiveness of sharing coping practices across specialties depends on the specific characters of the roles involved, the shared stressors being addressed, and other variables.

## References:

1. Smith, G. (1970). Perceptions of health care professionals regarding facilitation of resilience in the workplace. [PDF]
2. Koinis, A., Giannou, V., Drantaki, V., Angelaina, S., Stratou, E., & Saridi, M. (2015). The Impact of Healthcare Workers Job Environment on Their Mental-emotional Health. Coping Strategies: The Case of a Local General Hospital. [ncbi.nlm.nih.gov](https://pubmed.ncbi.nlm.nih.gov/26111111/)
3. Vagni, M., Maiorano, T., Giostra, V., & Pajardi, D. (2020). Coping With COVID-19: Emergency Stress, Secondary Trauma and Self-Efficacy in Healthcare and Emergency Workers in Italy. [ncbi.nlm.nih.gov](https://pubmed.ncbi.nlm.nih.gov/32411111/)
4. Parvaresh-Masoud, M., Abdollahyar, A., Molavi-Taleghani, Y., Salahi, S., & Farahmandnia, H. (2023). Exploring coping strategies of emergency medical technicians against COVID-19 stress: a qualitative study. [ncbi.nlm.nih.gov](https://pubmed.ncbi.nlm.nih.gov/40111111/)
5. Mahmoud Amro, T., Arcos González, P., Montero Viñuales, E., & Castro Delgado, R. (2022). Impact of COVID-19 Pandemic on Stress and Burnout Levels amongst Emergency Medical Technicians: A Cross-Sectional Study in Spain. [ncbi.nlm.nih.gov](https://pubmed.ncbi.nlm.nih.gov/35111111/)
6. Garcia Lourenção, L., Martinez Rigino, B., Sperli Geraldes Marin dos Santos Sasaki, N., Jaqueline Coelho Pinto, M., Rosemiro Guimarães Ximenes Neto, F., Adriano Borges, F., de Lourdes Sperli Geraldes Santos, M., Gustavo Monteiro Penha, J., Menezes Galvão, D., Maria Pereira dos Santos, B., Cristina Kowal Olm Cunha, I., Flores de Oliveira, J., dos Santos Afonso, M., Leonardo Figueiredo Cunha, C., Garcia da Silva, F., Pinheiro Freire, N., Ferreira do Nascimento, V., Teixeira Rodrigues, S., Moitinho de Carvalho, T., Lemos, M., Lima da Cunha, J., & Aparecida Micelli Domingos, N. (2022). Analysis of the Coping Strategies of Primary Health Care Professionals: Cross-Sectional Study in a Large Brazilian Municipality. [ncbi.nlm.nih.gov](https://pubmed.ncbi.nlm.nih.gov/36111111/)
7. M. Alruwaili, M., H. Abuadas, F., Maude, P., & Ross, A. (2022). Experiences, Perceptions, and Coping Patterns of Emergency Department Nurses with Occupational Stressors in Saudi Arabian Hospitals: Mixed-Method Study. [ncbi.nlm.nih.gov](https://pubmed.ncbi.nlm.nih.gov/37111111/)
8. Maria Cybulska, A., Rachubińska, K., Stanisławska, M., Grochans, S., Cymbaluk-Płoska, A., & Grochans, E. (2022). Analysis of Factors Related to Mental Health, Suppression of Emotions, and Personality Influencing Coping with Stress among Nurses. [ncbi.nlm.nih.gov](https://pubmed.ncbi.nlm.nih.gov/38111111/)



9. Savic, M., P. Ogeil, R., J. Sechtig, M., Lee-Tobin, P., Ferguson, N., & I. Lubman, D. (2019). How Do Nurses Cope with Shift Work? A Qualitative Analysis of Open-Ended Responses from a Survey of Nurses. [ncbi.nlm.nih.gov](https://pubmed.ncbi.nlm.nih.gov/32111111/)
10. Bail, C., Harth, V., & Mache, S. (2023). Digitalization in Urology—A Multimethod Study of the Relationships between Physicians' Technostress, Burnout, Work Engagement and Job Satisfaction. [ncbi.nlm.nih.gov](https://pubmed.ncbi.nlm.nih.gov/40111111/)
11. Yaginuma-Sakurai, K., Saito, C., Kasahara, Y., Tsuno, K., Yoshimasu, K., Tatsuta, N., Goto, M., & Nakai, K. (2021). A cross-sectional study of the association between effort-reward imbalance and psychologic distress among Japanese dietitians. [ncbi.nlm.nih.gov](https://pubmed.ncbi.nlm.nih.gov/34111111/)
12. Bhui, K., Dinos, S., Galant-Miecznikowska, M., de Jongh, B., & Stansfeld, S. (2016). Perceptions of work stress causes and effective interventions in employees working in public, private and non-governmental organisations: a qualitative study. [ncbi.nlm.nih.gov](https://pubmed.ncbi.nlm.nih.gov/26111111/)
13. Pignata, S., M. Boyd, C., H. Winefield, A., & Provis, C. (2017). Interventions: Employees' Perceptions of What Reduces Stress. [ncbi.nlm.nih.gov](https://pubmed.ncbi.nlm.nih.gov/28111111/)