

Stress at the Workplace: The Occurrence among Human Resources Senior Personnel in Nairobi Metropolitan, Kenya

Tazmin Alibhai

Email: tazmin@leap.co.ke

PsyD Candidate

United States International University Africa

School of Humanities and Social Sciences

Nairobi, Kenya

Dr. Michelle Karume

Email: mkarume@usiu.ac.ke

Faculty

United States International University Africa

School of Humanities and Social Sciences

Dr. Stella Nyagwencha

Email: snyagwencha@usiu.ac.ke

Faculty

United States International University Africa

School of Humanities and Social Sciences

Abstract

Work-related stress is of major concern due to its adverse impact on individuals, organisations and communities. Globalisation and constantly adapting to new technologies puts additional strain on workers to work faster and on tighter deadlines. The current study investigated the occurrence of work-related stress across a section of human resources directors, managers, assistant managers and supervisors in various organisations in Nairobi Metropolitan, Kenya. Human resources senior personnel were identified due to the critical role they play in wellness programmes in organisations. Nairobi Metropolitan was chosen due to the large number of organisations present. The study was an analytical cross-sectional study and the sampling technique was purposive. Data was collected from 201 participants from a population sample size of 271 indicating a response rate of 74%. Participants were invited via email invitation and on the social media platform LinkedIn. The Cohen Perceived Stress Scale (CPSS) was used to assess the prevalence of stress. Descriptive analysis was conducted to determine the occurrence of stress where 88.6% of respondents indicated elevated levels of stress. The study also found that 80% of respondents recorded moderate stress levels and 11% recorded low stress levels while only 9% of the respondents recorded high levels of stress. Since the research was undertaken during the COVID - 19 pandemic, it may have amplified the results of this research. Findings from the current study will benefit further research in this field and create additional awareness to organisations on this important issue.

Key Words: stress, work-related stress, human resources, COVID – 19, Kenya

Background to the Study

Workplace stress is of major concern according to the Second European Survey of Enterprises on New and Emerging Risks (ESENER) survey (EU-OSHA, 2010; 2015). Work-related stress is defined as any harmful, physical and emotional responses that can happen when there is a conflict between the job demands on the employee and the amount of control the employee has over meeting these demands (Forastieri, 2013). According to Hauke et al. (2011), work-related stress can affect a person psychologically, behaviourally and physically, which in turn has an effect on the wellbeing of the employee and the organizations they represent. Studies have shown that stress in the workplace has a debilitating effect on both employees who experience stress on the job and companies who pay for it either directly or indirectly through loss of productivity (Hassard et al., 2014).

Work, to many individuals, fulfils the need for financial freedom and overall wellbeing (Cox et al., 2004; Waddell & Burton, 2006). However, there are good jobs and bad jobs and when workers perceive their jobs as cumbersome, it has the potential of impacting them in harmful ways (Leka & Jain, 2010). A recent survey by the American Psychological Association (2021) found that some of that factors affecting stress at the workplace were low salaries (56% up from 49% in 2019), long hours (54% up from 46%), and lack of opportunity for growth or advancement (52% up from 44%). Approximately half of the workers (48%) indicated that lack of autonomy contributed to their stress, an increase by 39% from the last time this question was asked in 2019. Additionally, the survey found that 59% of employees reported that due to stress at the workplace, they experienced negative impacts such as lack of interest, motivation or energy (26%), challenges with focusing on tasks (21%) and reduced effort at work (19%). Moss (2019) cites that a study conducted by researchers at Stanford on the impact of workplace stress on health costs and mortality in the United States found that it led to the government spending close to \$190 billion in health care outlays and approximately 120,000 deaths every year.

Globalisation has brought with it many challenges, especially in developing countries where work-related stress is of growing concern. Although there is a host of research available on causes and effects of stress at the workplace in the developed countries, it is still an area of concern since much work still needs to be done on it. Furthermore, there is very little or no precise data available from developing countries, possibly due to lack of recording mechanisms and not enough importance on the issue of work-related stress and its consequences. The disparities amongst developed and developing countries is a factor that also contributes to the levels and types of work-related stress (WHO, 2007). In order to survive and remain relevant, many organisations are having to pivot towards measures such as reorganising their structures and processes and lean management systems. As a result, employees are pressured to deliver at higher expectations (Landsbergis, 2003; Sparks et al., 2001). According to Sonnetag and Frese (2013), any change be it good or bad, involves individuals having to adjust their behaviour which can be stressful. At the workplace, stress can have serious consequences to both, individuals and organisations.

The current study explored workplace stress and its occurrence across a section of human resources directors, managers, assistant managers and supervisors in various organisations in Kenya. According to Andrews (2003), human resources professionals, because they are constantly dealing with the human side of issues in organisations, stress can take a toll on them. For example, in a survey on 154 members of the Society for Human Resource Management, two thirds of the respondents indicated feeling extremely stressed, and four-fifths of the respondents

indicated that the pace of their work was fast or very fast. In addition, human resource managers are responsible for executing employee wellness programmes and involving them in this study will possibly create awareness on mental health issues at the workplace. The findings from this study will enable organisations to take heed of the issue of mental health and make it a pivotal part of their strategic intent.

Statement of the Problem

On average, workers spend 90,000 hours or approximately 50% of their waking hours at the workplace (Clifton, 2017). A report done by the National Institute for Occupational Safety and Health (NIOSH) in America found that of the people surveyed, 40% indicated that their job is “very or extremely stressful” and 75% felt that work-related stress is more prevalent today than a generation ago (Milligan, 2016). New challenges include the increase in use of technology at the workplace (Reyt & Wiesenfeld, 2015), the advent of globalization, and in order to navigate the competitive environment, organizations have had to downsize and reward workers who work harder (Ayyagari et al., 2011).

A study conducted in Kenya among employees in the civil service found that 9.5% and 24.1% had average and high levels of emotional exhaustion and chronic stress respectively (Ojwang, 2012). At a conference on mental health in Kenya, Gakanu (2019) cited that 36% of work-related illnesses in Kenya were due to stress. When the Taskforce on Mental Health in Kenya (Mental Health and Wellbeing: Towards Happiness and National Prosperity, 2020) went on the ground, they found that Kenyans were exposed to high levels of stress where one group cited stress at the workplace, where their managers were responsible for their stressors. It is therefore evident, that there is a gap in Kenya regarding stress at the workplace, mental health and mental illness. Organisations, as key stakeholders, have a responsibility to ensure that in order to meet the Kenya 2015 -2030 mental health goals, action must be taken.

According to Patten (1991), common mental disorders can potentially result from stressful experiences. The Health and Safety Executive (2020) found that work-related stress coupled with anxiety and depression prevailed in 2,400 workers per 100,000 workers in Great Britain. Andrews (2003) posits that human resources professionals have a unique set of challenges and stressors such as laying off employees, restructuring, and trying to maximise talent in their organisations. Other stressors include time pressures, managing conflicts, navigating between human concerns and business interests, the pace of change in the human resources profession and managing mergers and acquisitions.

Recognising workplace stress and other mental illnesses at the workplace can be challenging since although employees may exhibit physical symptoms and physical complaints, often there can be a psychological component present. According to Schott (1999), in many programmes on human resources management and public administration training, and in relevant textbooks, the topic on mental health seems to be lacking. Accepting mental health as part of the overall organisation development by bringing in the human element into is of great importance. Educating managers on relevant mental disorders is therefore critical, and in doing so, managers can incorporate it when dealing with their subordinates and as a result make mental health a part of their organisation culture. By creating a climate where employees feel safe to talk about their mental health concerns, the hesitancy to talk about it and the secrecy around it can be lifted.

Limitations of the Study

There were certain limitations to the study. The Cohen Perceived Stress Scale (CPSS), was a self-reported assessments and although it is widely used in clinical settings and research, it can be prone to bias. Furthermore, the results can also be dependent on the person's psychological state at that time of responding to the survey. Another limitation to the current study was the aspect of individual differences in how one perceives and responds to stress. Certain psychopathologies such a depression and anxiety can run concurrently or can be comorbid with stress and therefore may show higher stress scores.

The impact of COVID-19 may also have had an impact on the findings of the current Study on workplace stress since it was undertaken during a global pandemic. According to Kniffin et al. (2020), numerous challenges are being faced by employers and employees as they adapt to this pandemic. Employees are expected to work from home, organisations are either furloughing or retrenching staff, and there is evidence that for many employees, due to the conditions at work, employees are at greater risk of job burnout – a chronic stress symptom. These factors may have amplified the results of the current study.

Objective of the Study

The objective of the study was to:

Determine the occurrence of workplace stress among human resources directors, managers, assistant managers and supervisors in various sectors in Nairobi Metropolitan, Kenya.

Significance of the Study

It is anticipated that the study will be beneficial to organisations by creating awareness and to destigmatise stress at the workplace so that employees can lead productive lives and organisations can thrive. The study will be beneficial to policymakers in the mental health arena who will have interesting data to lean on when advocating for better mental health policies in order to reduce the burden of disease in Kenya. The study will also add value to clinicians who work with and within organisations to explore workplace stress in order to get better outcomes for their clients. Together with this, the study will add to the research on the topic of stress at the workplace.

Literature Review

At the World Economic Forum (2019) in Davos where global leaders and key influencers gathered to discuss global issues, mental health in organisations had an unprecedented focus. Recognising mental health is now becoming a boardroom issue for it makes good business sense. The workplace therefore becomes a key platform for dealing with the issue of mental health through training and strategically embedding it in their human resources and operations strategies (Cheshire, 2019). Stress, according to the organisation stress theory (Kahn & Byosiere, 1992) happens when one experiences stress as a process and not a single event. The process involves how one evaluates and responds to stressors and how one attempts to cope with it. Stress, as a response to a stimulus, is experienced differently by individuals depending on one's capacity to deal with the incoming stressor. There are individual differences in how one cognitively appraises a stressor, which depends on the individual's capacity to cope, the psychological, physiological and cultural characteristics that define the individual, and the type

of stressor (Hegberg & Tone, 2015). It is these interactions between the type of stressor and individual characteristics of the person that determine how one responds cognitively, behaviourally, psychologically and physiologically. When the type of stressor is beyond one's capacity to cope, it can sometimes lead to serious psychological and physical illnesses (Hegberg & Tone, 2015; Parker & Ragsdale, 2015).

Today, be it individuals or in organisations, stress is of great concern (Richardson, 2017). A study conducted by the European Foundation for the Improvement of Living and Work Conditions (2012) found that some of the psychological risks surveyed that workers faced, were tight deadlines (62%), working under pressure (59%), navigating changes in the organisation (51%) and having to extend their work hours to more than 40 hours a week (24%).

Constant changes in technologies that are being delivered at a faster pace is a key challenge for workers (Hills, 2018; Tarafdar et al., 2007). In a study conducted by the Australian Psychological Society (APS) on 1,109 managers across occupational sectors, the majority reported that they felt moderately stressed by the 20 to 50 work-related emails they had to deal with every day (Mathews et al., 2003). A study done by International Business Machines Corporation (IBM, 2010) on 629 Australian middle/senior level managers on the effect of responding to emails on stress, found that 48% reported that they were stressed. The age of social media (e.g., Facebook and Twitter) although it gives a platform for employees to engage with one another, can also lead to workplace incivility. Technostress and telepressure are terms that indicate that technology, too, can be a source of pressure at the workplace (Richardson, 2017). Studies in the field of information systems indicate that there is a negative correlation between technostress and productivity and job satisfaction (Ragu-Nathan et al., 2008; Tarafdar et al., 2007). Barber and Santuzzi (2015) found that telepressure at work where employees are compelled to instantly respond to work-related issues through technology platforms is linked to poor outcomes in both physical and psychological aspects of the employees' health.

Work characteristics such as insufficient leadership, perceived or real injustice at work, and poor organizational climate have been linked to work-related stress (Head et al., 2007; Kivimäki et al., 2003; Väänänen et al., 2004). The annual cost to organisations in the United States, due to supervisors who are abusive is close to \$23.8 billion. This is mainly due to health costs of workers and resultant loss of productivity and absenteeism (Tepper et al., 2006). A study in the US by Schat et al. (2006) found that 13.6% of workers said that they were exposed to abusive supervision.

While some stress at the workplace is normal for employees, excessive stress can interfere with productivity and performance, impact their physical and mental health, and eventually affect one's success on the job (Harzer & Ruch, 2015b). Work-related stress has consequences on an individual physiologically, emotionally, cognitively and behaviourally. Physiologically, individuals experience an increase in heart rate and blood pressure and an increased secretion of stress hormones namely cortisol and adrenaline. As a response to work-related stress, emotionally, individuals may start to get nervous and irritated, and cognitively, forgetfulness and challenges with attention and perception can occur. Work-related stress also has an effect on the behaviour of workers than can manifest in aggression, impulsive behaviour and making mistakes (WHO, 2007).

Methodology

This was an analytical cross-sectional design in which the target population comprised of human resources directors, managers, assistant managers and supervisors in Nairobi

Metropolitan. The researcher used purposive sampling where the target population was 271 individuals with a response rate of 74%. The data collection tool was the Cohens Perceived Stress Scale (CPSS), a widely used psychological instrument for measuring the perception of stress. The instrument was loaded on a link from Google Docs and sent to the individuals via email and the social media platform LinkedIn directly to their inboxes. The researcher used descriptive statistics and content analysis to analyse the data. Data was presented in frequency tables.

Findings

Of the 201 respondents of the study, 62% were female and 37% male while 1% preferred not to reveal their gender. In addition, 57% of the respondents indicated that they were married. Those who were single, separated and divorced were at 5%, 3% and 2% respectively. Two percent were cohabiting and 1% were widowed. The highest percentage of respondents were managers (55%) followed by assistant managers (24%), directors (15%) and supervisors (6%). Majority of respondents (43%) earned more than 200,000 KSH per month. Twenty-eight percent earned between 100,000 – 200,000 Kenya shillings per month and 18% earned between 50,000 and 100,000 per month while only 9% earned below 50,000 KSH per month. In terms of education level, the majority had bachelor's degrees and master's degrees with combined percentage of 86%, followed by diploma holders with 11% while certificate holders and PhD holders only were only 1% and 3% respectively. The majority of the respondents worked in the private sector, followed by the public sector and finally the NGOs with 70%, 17% and 11% respectively. According to age categories, 53% belonged to the Gen-Xers category which are aged between 40 and 50 years old, followed by Millennials at 39% aged between 25 and 39 years old and finally 7% made up Baby Boomers aged between 55 and 66 years old.

Prevalence of Stress Among Human Resource Managers in Nairobi Metropolitan Area

The study sought to determine the occurrence of stress among human resources directors, managers, assistant managers and supervisors in Nairobi Metropolitan Area. The respondents were asked to respond to statements on Cohen's Perceived Stress Scale on their perceived levels of stress ranging from *never*, *almost*, *sometimes*, *fairly often* and *very often*. The results are shown in Table 1.

Table 1: Occurrence of Stress Among Human Resource Senior Personnel in Nairobi Metropolitan

| Variable | Stress Levels | Frequency | Percent |
|----------|---------------|-----------|---------|
| Stress | Normal | 23 | 11.4 |
| | Elevated | 178 | 88.6 |
| | Total | 201 | 100 |

Table 1 illustrates that 11.4% of respondents showed normal levels of stress, while 88.6% of respondents exhibited clinically significant, elevated stress levels.

Additional analysis on the levels of workplace stress was carried out and is indicated in Table 2.

Table 2: Levels of Stress Among Respondents

| | Stress Levels | Frequency | Percent |
|------------------------|-----------------|-----------|---------|
| Perceived Stress Scale | Low Stress | 23 | 11.4 |
| | Moderate Stress | 161 | 80.1 |
| | High Stress | 17 | 8.5 |

The study further wanted to establish the stress levels among human resources directors, managers, assistant managers and supervisors. Table 2 illustrates that 80% of respondents recorded moderate stress levels and 11% recorded low stress levels while only 9% of the human resource managers interviewed recorded high levels of stress.

Discussion

The current study found that a total of 80% of human resources directors, managers, assistant managers and supervisors recorded moderate stress levels and 11% recorded low stress levels while only 9% of the human resource managers interviewed recorded high stress levels. Overall, 88% of the respondents had elevated levels of stress while 11% recorded normal levels of stress. In a survey by *The Human Resources Executive* on 830 human resources leaders in the United Kingdom, 90% indicated that compared to the previous year, their stress had increased, forty-seven percent of whom revealed that their levels of stress had increased dramatically (Mayer, 2021). In a study conducted by Perkbox (2020), 79% of British adults in employment indicated experiencing work-related stress (20% higher than findings in 2018). In another study on 1,500 workers in senior positions, working in various sectors from 46 countries, found that stress at the workplace is a serious problem. Eighty-nine percent of the respondents indicated that their work life was getting worse. The study also found that 85% and 56% of respondents found that their wellbeing had declined and that their job demands had increased respectively. Only 21% of the respondents indicated that their wellbeing as being “good” and a meagre 2% said that their wellbeing was excellent (Moss, 2020).

Apart from stressors at work, studies have shown that there are other factors that lead to stress, such as individual differences in how people respond to stress and therefore the negative consequences of stress may not be the same for everyone (Abazaid et al., 2009). Furthermore, individuals who have undergone previous stress have a higher probability of being impacted by subsequent stressful encounters due to stress related chemicals being already present in the brain (Anisman et al., 2003). Furthermore, early life experiences may also predispose individuals to stresses later on in their lives (Heim et al., 2008).

These findings suggest that although the current study found the incidence of workplace stress (88%) among human resources directors, managers, assistant managers and supervisors, there are also other factors that may be attributing to these results. The fact that the research was conducted on participants who are currently working and although some of these participants may be predisposed to stress, it is important to note that stress is prevalent at the workplace.

Conclusion

The aim of the current study was to determine the prevalence of stress at the workplace. The literature on workplace stress and the findings from this study suggest that there is a

prevalence of stress at the workplace (88%) among human resources directors, managers, assistant managers and supervisors in Nairobi Metropolitan. Cohen et al. (1983) posit that when interpreting the scores for levels of health concerns, scores ranging from 0 – 7 indicate very low health concerns, scores ranging from 8 – 11 indicate low health concern, scores ranging from 12 – 15 are of average health concern whilst scores ranging from 16 – 20 and 21+ indicate high health concern and very high health concern respectively. Accordingly, the current study found that the majority of the respondents indicated very high health concerns (50.25%) and high health concerns (32.84%). Studies have also shown that workers who scored high on stress scores also had a one-month occurrence of anxiety or mood disorder (6.8%) compared to those who showed low stress scores (1.8%).

Human resources professionals therefore have a critical role to play in the mental wellbeing of workers. Identifying best practise in the management of stress prevention programmes and enabling a culture where there is psychological safety in organisations is an area that needs additional emphasis. A 2021 survey by the Human Resource Executive (HRE) cited that human resources leaders are focusing on improved employee communication (61%) employee wellbeing (53%), improving work/life policies and initiatives (39%) and enhancing capacity-building of their leaders and managers (39%) (Mayer, 2021).

Clinicians can be critical partners to organisations in the mental wellbeing of their workers. Stress management training that includes assertiveness training and relaxation techniques, to name a few, are commonly used programmes in some organisations. However, clinical expertise that psychologists can provide such as working on modalities of cognitive behaviour therapy for stress, and the management of common mental disorder cannot be ignored. Human resources leaders can therefore benefit from engaging with clinicians in their wellness programmes for better outcomes.

Recommendations

The study made the following recommendations:

- 1) Additional research be carried out on workplace stress in other counties together with the Nairobi Metropolis in Kenya and with a bigger sample size in order to validate findings on this topic. Furthermore, the COVID-19 pandemic may have amplified some of the findings from this study and it is therefore suggested that additional research be done not only during the pandemic phase but also post-pandemic.
- 2) Organisations should take heed of the phenomenon of work – related stress. A 2010 World Health Organisation study stated that at the workplace, mental health has serious repercussions on productivity and the survival of organisations due to absenteeism, presenteeism and early retirement.
- 3) Clinicians and physicians to take note that when working with individuals who are employed who may be showing physical and/or mental health related ailments, explore stress at the workplace that may be a possible trigger.

References

Abizaid, A., Anisman, H., Matheson, K., & Merali, Z. (2009). Canadian Centre on Substance Use. Substance abuse in Canada: Concurrent disorders. Ottawa, OM: Canadian Centre on Substance Abuse (CSSA).

- American Psychological Association. (2008). Stress in America. Retrieved October 7, 2008, from: <http://apahelpcenter.mediaroom.com/file.php/163/Stress+in+America+Executive+Summary+10-02-08+NO+Embargo.doc>
- American Psychological Association (2021). The American workforce faces compounding pressure APA's 2021 Work and Well-being Survey results. https://www.apa.org/pubs/reports/work-well-being/compounding-pressure-2021?utm_source=linkedin&utm_medium=social&utm_campaign=apa-workplace&utm_content=work-wellbeing-survey-employers#employers
- Andrews, L. (2003). Avoiding HR Burnout. <https://www.shrm.org/hr-today/news/hr-magazine/pages/0703covstory.aspx>
- Anisman, H., Hayley, S., Turin, N., & Merali, Z. (2003). Cytokines as a stressor: Implications for depressive illness. *The International Journal of Neuropharmacology*, 5 (4), 357 – 73.
- Ayyagari, R., Grover, V., & Purvis, R. (2011). Technostress: Technological antecedents and implications. *Management Information Systems Quarterly*, 35, 831–858.
- Barber, L. K., & Santuzzi, A. M. (2015). Please respond ASAP: Workplace telepressure and employee recovery. *Journal of Occupational Health Psychology*, 20, 172–189.
- Cheshire, S. I. (2019). Davos finds a new issue to champion: Mental health. *Thrive Global*. Retrieved February 19, 2019. from <https://thrivglobal.com/stories/davos-new-issue-mental-health-prince-william/amp/>
- Clifton, J. (2017). The World's Broken Workplace. <https://news.gallup.com/home.aspx>
- Cohen, S., Kamarck, T., & Mermelstein, R. (1983). A global measure of perceived stress. *Journal of Health and Social Behavior*, 24(4), 385–396.
- Cox, T., Leka, S., Ivanov, I., & Kortum, E. (2004). Work, employment and mental health in Europe. *Work & Stress*, 18(2), 179–185.
- EU-OSHA – European Agency for Safety and Health at Work. (2010). *European survey of enterprises on new and emerging risks: Managing safety and health at work. European Risk Observatory Report*. Luxembourg: Office for Official Publications of the European Communities.
- EU-OSHA – European Agency for Safety and Health at Work. (2015). *Second European Survey of Enterprises on New and Emerging Risks (ESENER-2)*. Luxembourg: Publications Office of the European Union.
- European Foundation for the Improvement of Living and Working Conditions (Eurofound). (2012). *Fifth European working conditions survey*. Luxembourg: Publications Office of the European Union.
- Forastieri, V. (2013). Psychosocial risks and work-related stress. *Medicina y seguridad del trabajo*, 59(232), 297–301.
- Gakanu (2019). Kenyan companies are losing billions to reduced productivity at the workplace due to stress and Burn out. <https://www.capitalfm.co.ke/business/2019/11/kenyan-companies-losing-due-to-a-stressed-and-burnt-out-workforce-experts>
- Hassard, J., Teoh, K., Cox, T., & Cosmar, M. (2014). Calculating the cost of work-related stress and psychosocial risks.
- Harzer, C., & Ruch, W. (2015a). The relationship of character strengths with coping, work related stress and job satisfaction. *Frontiers in Psychology*, 6, 165.

- Hauke, A., Flingtrop, J., & Rugulies, R. (2011). The impact of work-related psychosocial stressors on the onset of musculoskeletal disorders in specific body regions: A review and meta-analysis of 54 longitudinal studies. *Work & Stress*, 25(3), 243–256.
- Head, J., Kivimaki, M., Siegrist, J., Ferrie, J., Vahtera, J., Shipley, M., & Marmot, M. (2007). Effort–reward imbalance and relational injustice at work predict sickness absence: The Whitehall II study. *Journal of Psychosomatic Research*, 63(4), 433–440.
- Heim, C., Newport, J., Mletzko, T., & Miller, A. (2008). The link between childhood trauma and depression: Insights from HPA axis studies in humans. *Psychoneuroendocrinology*, 33 (6), 693 – 710.
- Health and Safety Executive. Work-related stress, anxiety or depression statistics in Great Britain, 2020. <https://www.hse.gov.uk/statistics/sources.pdf>
- Hegberg, N. J., & Tone, E. B. (2015). Physical activity and stress resilience: Considering those at-risk for developing mental health problems. *Mental Health and Physical Activity*, 8, 1–7.
- Hills, T. T. (2018). The dark side of information proliferation. *Perspectives on Psychological Science : A Journal of the Association for Psychological Science*, p.1745691618803647.
- IBM. (2010). Study reveals Australian office workers stressed by irrelevant e-mail overload: IBM survey finds Aussie workers think organisations should offer more collaboration tools to increase flexibility and reduce workload. Retrieved April 2010, from <http://www-03.ibm.com/press/au/pressrelease/32913.wss>.
- Kahn, R. L., & Byosiore, P. (1992). Stress in organisations. In M. D. Dunette & L. M. Hough (Eds.), *Handbook of industrial and organisational psychology* (Vol. 3, pp. 571–650). Palo Alto, CA: Consulting Psychologists Press.
- Kenya Mental Health Policy, 2015 – 2030 (August 2015). Towards Attaining the Highest Standards of Mental Health. Published by Ministry of Health. <http://www.health.go.ke>.
- Kivimaki, M., Nyberg, S., Batty, G., Franson, E., & Theorell, T. (2012). Job strain as a risk factor for future coronary heart disease: Collaborative meta-analysis of 2358 events in 197,473 men and women. *The Lancet*, 380, 1491–97.
- Kniffin, K. M., Narayanan, J., Anseel, F., Antonakis, J., Ashford, S. P., Bakker, A. B., Bamberger, P., Bapuji, H., Bhawe, D. P., Choi, V. K., Creary, S. J., Demerouti, E., Flynn, F. J., Gelfand, M. J., Greer, L. L., Johns, G., Kesebir, S., Klein, P. G., Lee, S. Y., Ozelik, H., Petriglieri, J. L., Rothbard, N. P., Rudolph, C.W., Shaw, J. D., Sirola, N., Wanberg, C. R., Whillans, A., Wilmot, M. P., & Vugt, M. v. (2020, August 10). COVID-19 and the Workplace: Implications, Issues, and Insights for Future Research and Action. *American Psychologist*. Advance online publication. <http://dx.doi.org/10.1037/amp0000716> (citation).
- Landsbergis, P. A. (2003). The changing organization of work and the safety and health of working people: A commentary. *Journal of Occupational and Environmental Medicine*, 45, 61–72
- Lazarus, J. (2000). *Stress relief and relaxation techniques*. Keats Publishing. Los Angeles, CA: NTC/Contemporary Publishing Group, Inc.
- Leka, S., & Jain, A. (2010). *Health Impact of Psychosocial Hazards at Work: An Overview*. Publisher: World Health Organisation. ISBN: 9789241500272.
- Mathews, R., Grant, E., & Littlefield, I. (2003). E-mails communications survey. A National Psychology Week initiative. *Inpsych: The bulletin of the Australian Psychological Society*. 25, 13 – 16. Mental Health Foundation (2007). The fundamental facts.

- <http://www.mentalhealth.org.uk/publications/fundamental-facts/>.
- Mayer, K. (2021). Benefits trends to watch in 2021. <https://hrexecutive.com/mayer-7-benefit-trends-to-watch-in-2021/>
- Mental Health and Wellbeing: Towards Happiness and National Prosperity (2020). Ministry of health, Kenya. Afya House, P O Box 30016 – 00100, Nairobi.
- Milligan, S. (2016). My job at my vacation. *HRMagazine*, 61, 28–36.
- Moss, J. (2020). The rise of chronic stress and how we can fix it. Harvard Business Review Press. Boston, Massachusetts. Harvard Business School publishing, 60 Harvard, Boston, Massachusetts 02163.
- Ojwang, H. A. (2012). *Prevalence of occupational stress among employees in the civil service in Nairobi and their perceived coping styles*. Kenya: University of Nairobi, Kenya.
- Parker, K. N., & Ragsdale, J. M. (2015). Effects of distress and eustress on changes in fatigue from waking to working. *Applied Psychology: Health and Well-Being*, 7(3), 293–315.
- Patten, S. (1991). Are the Brown and Harris “vulnerability factors” risk factors for depression? *J Psychiatry Neurisci*. 16 (5), 267 – 271.
- Ragu-Nathan, T. S., Tarafdar, M., Ragu-Nathan, B. S., & Tu, Q. (2008). The consequences of technostress for end users in organizations: Conceptual development and empirical validation. *Information Systems Research*, 19, 417–433. Retrieved from <http://www.eurofound.europa.eu/surveys/ewcs/2010/>.
- Reyt, J. N., & Wiesenfeld, B. M. (2015). Seeing the forest for the trees: Exploratory learning, mobile technology, and knowledge workers’ role integration behaviors. *Academy of Management Journal*, 58, 739–762.
- Richardson, K. (2017). *Journal of Occupational Health Psychology*, 22(3), 423–428.
- Schat, A. C. H., Frone, M. R., & Kelloway, E. K. (2006). Prevalence of workplace aggression in the U.S. workforce: Findings for a national study. In E. K. Kelloway, J. Barling, & J. J. Hurrell (Eds.), *Handbook of workplace violence* (pp. 47–89). Thousand Oaks, CA: Sage.
- Schott, R. (1999). Managers and mental health: Mental illness at the workplace. *Public Personnel Management*. 28, 2.
- Sonnetag, S., & Frese, M. (2003). *Stress in Organizations*. In W.C. Borman, D.R. Ilgen & R. J. Klimoski (Eds.), *Comprehensive handbook of psychology*
- Sparks, K., Faragher, B., & Cooper, C. L. (2001). Well-being and occupational health in the 21st century workplace. *Journal of Occupational and Organizational Psychology*, 74, 489–509.
- Tarafdar, M., Tu, Q., Ragu-Nathan, B. S., & Ragu-Nathan, T. S. (2007). The impact of technostress on role stress and productivity. *Journal of Management Information Systems*, 24, 301–328.
- Tepper, B. J., Duffy, M. K., Henle, C. A., & Lambert, L. S. (2006). Procedural Injustice, Victim Precipitation, and Abusive Supervision. *Personnel Psychology*, 59, 101–123.
- Väänänen, A., Kalimo, R., Toppinen-Tanner, S., Mutanen, P., Peiró, M., Kivimäki, M., & Vahtera, J. (2004). Role clarity, fairness, and organizational climate as predictors of sickness absence: a prospective study in the private sector. *Scand J Public Health*. 32(6):426-34.

Waddell, G., & Burton, A. K. (2006). *Is work good for your health and well-being?* London: The Stationary Office.

World Health Organisation (2007). Raising awareness of stress at work in developing countries. A modern hazard in a traditional working environment. *Protecting Workers* (6).
https://www.who.int/occupational_health/publications/raisingawarenessofstress.pdf