A systematic review of stress and stress management interventions for mental health nurses

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CRD summary
This review aimed to assess stress management interventions for mental health nurses. The authors concluded that there was a lack of research on the impact of interventions that attempt to moderate, minimise or eliminate stress. The lack of methodological information and population details make the reliability of the results uncertain.

Authors' objectives
To determine the effectiveness of stress management interventions for those working in mental health nursing.

Searching
PubMed, EMBASE, the Science Citation Index, Pascal, CINAHL, ASSIA, PsycLIT, ClinPSYC, HealthSTAR, the Cochrane Library, British Nursing Index, SIGLE and the National Research Register were searched up to 2000; the search terms were reported. The Journal of Advanced Nursing, Journal of Psychiatric and Mental Health Nursing, International Journal of Nursing Studies, Journal of Psychosocial and Mental Health Nursing Services were handsearched. The bibliographies of retrieved articles were also checked, and key authors were contacted. Only primary research papers published in English were included in the review.

Study selection
Study designs of evaluations included in the review
There were no specific inclusion criteria for the study design. Interventional and non-interventional studies were included in the review. Only the results from the interventional studies are discussed in this abstract.

Specific interventions included in the review
There were no specific inclusion criteria for the interventions. The interventions included in the review were training in behavioural techniques, training in relaxation techniques, stress-management workshops, social support programmes, training in therapeutic skills, and psychosocial interventions.

Participants included in the review
Studies of mental health nurses were eligible for inclusion.

Outcomes assessed in the review
Studies reporting stress outcomes were eligible for inclusion. The outcomes reported included levels of sickness, burnout, job satisfaction, psychological distress, and coping. A variety of scales and questionnaires were used to assess the outcome measures in the included studies.

How were decisions on the relevance of primary studies made?
Two reviewers assessed the relevance of each article independently. Where disagreements occurred, the articles were reassessed by the reviewers.

Assessment of study quality
The authors did not state that they assessed validity. They provided some details of the 'rigour' of the included studies, which gave some indication of their quality, although they did not state how this assessment was performed.

Data extraction
The authors did not state how the data were extracted for the review, or how many reviewers performed the data extraction.
Methods of synthesis
How were the studies combined?
The studies were combined in a narrative summary.

How were differences between studies investigated?
Differences between the studies were discussed in the text.

Results of the review
Seventy-seven studies were included in the review, of which eight were interventional studies (n=1,186).

Social support-based interventions (1 study) for psychiatric nurses showed no advantage over feedback alone.

Behaviour training therapy (1 study) for psychiatric nurses improved work satisfaction and levels of sickness, reduced strain, and helped develop skills and knowledge for dealing with patient problems more effectively.

A 15-week training in therapeutic skills (1 study) decreased the levels of psychological distress and burnout.

Personal stress management (1 study) improved the ability of psychiatric nurses to cope with anxiety and stress, while stress-management workshops (1 study) reduced the levels of burnout.

Psychosocial intervention training (1 study) improved the level of burnout in forensic mental health nurses.

Assertiveness training and behavioural rehearsal (1 study) improved job satisfaction and increased assertiveness and professional self-image.

The change in nursing care delivery to primary care (1 study) did not change the levels of burnout.

Authors' conclusions
A great deal is known about sources of stress at work, how to measure it, and its impact on a range of outcomes. However, research on the impact of interventions that attempt to moderate, minimise or eliminate stress was lacking.

CRD commentary
The authors addressed a broad research question with poorly defined inclusion criteria. They undertook an extensive search and made efforts to identify published and unpublished research. However, only full articles published in English were included, which might have led to the introduction of publication and language bias. Since the methods for the data extraction and validity assessment were not reported, it is unclear whether attempts were made to minimise error and bias. This, along with the lack of details about study design and the populations evaluated, make the reliability of the results of the review and the conclusions drawn from them uncertain.

Implications of the review for practice and research
Practice: The authors stated that the most effective way to manage stress is to tackle the problem on several levels, and to achieve this, management strategies must be proactive rather than reactive.

Research: The authors stated that there was a lack of research on interventions at the organisational level.

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This is a critical abstract of a systematic review that meets the criteria for inclusion on DARE. Each critical abstract contains a brief summary of the review methods, results and conclusions followed by a detailed critical assessment on the reliability of the review and the conclusions drawn.