

## **Stress Management Training**

Stress management programs have become popular in the workplace over the last two decades. Not all are effective, but evaluation research suggests that the ones that have been well-designed and carefully implemented not only in reduce employee stress and improve health, but also result in bottom-line benefits.

One example is Corning's holistic stress management program. The program evolved out of a collaborative partnership between Corning, Inc. and the National Institute for Occupational Safety and Health (NIOSH). Like most such programs, it impacted social and emotional competencies such as self-confidence, self-control, communication, and adaptability. Developed by Jeff Monroy, Hank Jonas, and Joseph Mathey from Corning, Inc., and by Lawrence Murphy from NIOSH, the program took place in approximately 50 locations and involved about 3,000 individuals. The initial goal of the program was to address the sources of non-value-added stress on the job.

One of the first tasks of this initiative was to assess the level of stress in the organization, which was accomplished via a climate survey that allowed comparison with national benchmark data. The program's planners soon discovered "that the relationships between organizational practices and organizational effectiveness outcomes (i.e. job satisfaction, satisfaction with the company) were weaker among high stress employees" (Monroy, Jonas, Mathey, & Murphy, 1997, p. 6). It was here that Corning identified the need to improve workers' coping abilities.

Initial individual interventions focused on educating employees about the basic nature, sources, symptoms, and consequences of stress. The dissemination of this information took on various forms from "simple in-house media communications to

formal symposia featuring well-known researchers and personalities.” The company also held a few “kick-off” events, which focused on certain topics related to stress. For example, one event focused on helping people become more comfortable with talking about stress as an issue. The goal was to give people permission to talk about skill building, while creating an environment and a culture where it was more comfortable for people to sign up for training. Another valuable tactic used by the organizers was to give the participants as many immediately positive experiences as possible such as innovative and exciting demonstrations or fun exercises that would lead participants to spread the word that the program was enjoyable. The organizers also tracked carefully from which departments in the organization people were coming, and they encouraged the leaders of those various departments to promote the program.

One of the main components of this phase of the intervention was the establishment of various training classes, which focused on teaching well-established stress management skills such as muscle relaxation, tai chi, biofeedback, meditation, yoga, guided imagery, and cognitive restructuring. The goal of these classes was to promote and strengthen the individual’s potential to understand and experience work situations and life events in a way that compelled one to act constructively rather than adopt a more non-assertive, blaming perspective. These free, weekly, open-enrollment training classes each lasted anywhere from sixty to ninety minutes and took place outside of working hours, sometimes during lunch. The participants had the opportunity to choose the stress management techniques they wanted to learn.

At the onset of the training, these groups met once a week, for 12 weeks; however, the organizers eventually reduced the number of sessions to eight. Each

participant had to sign an agreement that they would share the knowledge that they obtained from the workshops with at least one person in their lives. A 25-item behavioral checklist that the participants filled out at the onset of training was used as a form of feedback, providing the participants with an opportunity to see what changes took place during the program.

The trainers were typically professional psychologists who had at least 10 years of experience in their particular area of interest. These programs were open to all of the employees of Corning at all levels. Therefore, the organizers needed to obtain trainers who could relate to the wide variety of groups that work in the company, from hourly wage-earning factory workers to top executives in research and development. The trainers were encouraged to create their own programs, which helped them feel more comfortable with the material. This comfort allowed them to focus more closely on the reactions and feelings of the participants.

As participants were typically reluctant to talk about personal issues at the onset of the program, the psychologists who led the groups talked about real life examples from their practice in a broad and generic way, attempting to help the trainees take more risks and try new experiences. At the first class, the trainers typically discussed what was “reasonable” to expect in these sessions. They tried to instill in people a sense of confidence by presenting the techniques in a way that empowered the participants. Trainers presented the message that these behaviors were not overly complicated or difficult to learn; in fact the trainers would usually say something like, “these are techniques that you have probably used before, but you have not necessarily stayed with them, practicing in a consistent way.”

Most of the sessions were designed for the participants to learn and practice their techniques and new skills during the sessions. Each session gave the participant some new approach to the particular skill that was learned earlier. Once the participants were able to gain some understanding of one technique, they would continue to practice that technique in class and at home. For example, the trainers gave participants tapes on guided imagery to take home to practice. They were encouraged to do homework and practice their techniques on a daily basis so that they would be better prepared with questions or concerns during the next session. The organizers also set up an arrangement with a local health club where participants could use the services of massage, tai chi, yoga, etc. for only \$5 per hour, making it easier for participants to continue practicing their techniques both during and after the program. People voluntarily gave their names to be put on a list that was used as a support system for participants. People could call each other with questions or comments about the groups between sessions. This typically took place in the form of dyads.

A standard symptoms checklist was used to evaluate individuals as they went through the program, particularly focusing on weeks one (baseline), eight, and twelve. The questionnaire assessed the individual's symptoms of stress, stress management skills (i.e. the ability to identify stress and to relax), and other life areas (i.e. using physical exercise). An analysis of the data comparing weeks eight and twelve to week one revealed significant changes on measures of stress symptoms, stress management skill, and other life areas. The largest changes occurred in selected stress symptoms (e.g. restlessness, depressed feeling, trouble sleeping, excessive worry), followed by stress management skills (e.g. ability to relax)" (Monroy et al., 1997, p. 9).

Similar stress management programs implemented in other settings have been evaluated in an even more rigorous fashion. Several of the evaluations have employed pre/post-test control group designs with follow-ups of six to 12 months or even longer. They also have assessed change on a number of different types of outcomes. Several studies, like the Corning one, have shown that stress management training can produce significant improvements in measures of subjective well-being and physical symptoms (Backman, Arnetz, Levin, & Lublin, 1997; Cecil & Forman, 1990; Charlesworth, Williams, & Baer, 1984; Friedman, Lehrer, & Stevens, 1983; Tsai & Crockett, 1993). A few studies also have shown that stress management training, of the sort offered at Corning, can have a positive impact on objective physiological measures such as electromyograph (Murphy & Sorenson, 1988), adrenaline levels (McNulty, Jefferys, Singer, & Singer, 1984), and blood pressure (Charlesworth et al., 1984). In one study, a 10-week program for hypertensive employees in a large corporation led to a sharp cut in health care claims: the average value of claims for the year following the program were half the annual averages for the previous 2-1/2 years (Charlesworth et al., 1984). In another study, a program for highway maintenance workers led to a significant improvement in attendance records (Murphy & Sorenson, 1988). And a study involving 44 hospitals found that a comprehensive stress management program led to a significant reduction in malpractice claims (Jones et al., 1988).

For more information, see:

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