Stressful situations in cancer nursing are common and are increasingly impacting on nurses’ health, well-being and performance, and consequently on patients’ outcomes. Nurses need to understand what stress really is and how it can be addressed and prevented.

The literature shows how stress arises in nurses from the mismatch between their perception of the demands on them and their perception of their own ability to meet those demands.¹ Many studies have highlighted the detrimental role of stress on both organisational and clinical outcomes.² For this reason, stress is an insidious enemy that must be recognised, prevented and addressed. This is especially important in a field where the achievement of any outcomes could make all the difference, as in cancer nursing.

Cancer nursing places significant demands on nurses, especially in relation to their emotional work. Moreover, some interpersonal stressors in the patient-nurse interaction, e.g. understanding and empathising with cancer patients, can significantly contribute to the emotional burden on nurses. Indeed, nurses have to face a wide variety of stressors coming from their everyday working
life, such as demanding patient contacts, time pressure, work overload, sophisticated technologies, budget cuts, changing treatments, misunderstandings with colleagues and many others. Stress should be regarded as a continuum along which an individual may pass, from feeling of eutress, i.e. beneficial stress, to those of distress or even severe distress. Eutress refers to more positive responses, while distress describes negative aspects, which could culminate in emotional burnout or serious physiological disturbance, such as gastric disorders, hypertension or asthma. It is the transition towards severe distress that is likely to be most harmful for nurses, as it is closely linked to staff absenteeism, poor staff retention and overall nurses’ ill-health.

Considering the above, nurses need to understand what stress is and how it can be managed.

Job demands and job resources
To better understand the nuances of stress/distress in nurses’ everyday working life, the literature shows some interesting conceptual frameworks tested in the nursing field. For instance, according to Le Blanc et al., the job demands are conceptualised as the antecedent of some organisational or clinical outcomes, e.g. well-being on performance, and their relationship is mediated by the strain and moderated by the personal and/or situational resources.

Considering the Job Demands-Resources model, the relationship between job demands and job resources is important for the development of job strain and motivation as well as predicting organisational outcomes. Job strain is a negative predictor of outcomes while motivation is a positive predictor. Moreover, job resources may buffer the impact of job demands on job strain, including burnout. The results of research that has tested the Job Demand-Resources model, using a series of structural equation modelling analyses, show that when job demands and resources are both high, we expect employees to develop strain and motivation, and when both are low we expect the absence of strain and motivation.

Consequently, the more detrimental situation consists in a high demands/low resources condition which results in high strain and low motivation. Job demands and resources may also be affected by employees’ perception of the working environment. Considering how important it is to know and to prevent the stress in cancer nursing, the efforts for effective stress management have to be addressed at every level of the profession, from the bedside to the management, crossing the whole nursing educational path.

Educational strategies
Summarising research about the preventive stress management, we can highlight the main results and suggestions, which can be used at all levels of the profession:

- To balance job demands with situational job resources, e.g. rewards, recovery at/after work;
- To enhance personal resources, e.g. coping strategies, nurses’ stress perception; and
- To support evidence-based interventions when the organisational well-being/health is poor.

It seems that post-graduate education has a positive effect on nurses’ stress perception, even if it is not sufficient to improve coping mechanisms. Education in cancer nursing could be useful to enhance nurses’ personal resources; however, the evidence about which educational approach is more effective is weak. Probably the most useful educational strategy is the simulation of peer group relationships, using the sharing of personal working experiences and role plays. This strategy could also be useful in the ward management to stimulate nurses’ learning behaviours.

Stressful situations in cancer nursing are common, and appear to be extremely important for nurses’ health, well-being, performance, and also patients’ outcomes. A workplace change is necessary and possible to address stress and to enhance evidence-based stress management. Maybe we do not know everything about stress and its many nuances, but we know enough to take evidence-based action.

*See also, staff wellbeing article, p28.*