

## **Stress in Organizations**

Sabine Sonnentag  
University of Konstanz

Michael Frese  
University of Giessen

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**Sabine Sonnentag**  
**University of Konstanz**  
**Germany**

**Michael Frese**  
**University of Giessen**  
**Germany**

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Address for correspondence:

Sabine Sonnentag

Department of Psychology

University of Konstanz

Postbox D42

D-78457 Konstanz

Germany

Phone: +49 7531 88 3742

Fax: +49 7531 88 3017

Email: [sabine.sonnentag@uni-konstanz.de](mailto:sabine.sonnentag@uni-konstanz.de)

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## INTRODUCTION

Stress in organizations is a wide-spread phenomenon with far-reaching practical and economic consequences. A report published by the National Institute for Occupational Safety and Health (1999) in the USA summarized findings from various surveys on organizational stress and found that between 26 and 40 percent of all surveyed workers experienced their work as very stressful. Similarly, 28 percent of the workers in the European Union reported that their work causes stress (Levi & Lunde-Jensen, 1996). In Japan, the percentage is even higher (Harnois & Gabriel, 2000).

Experiencing organizational stress is related to health problems and their associated costs. A study based on more than 46,000 US employees showed that health care costs were 46 % higher for workers who experienced high levels of stress (Goetzel et al., 1998). Moreover, organizational stress is assumed to be related to increased absenteeism. For example, estimates from the US and the UK suggest that about the half of all lost days within organizations are related to workplace stress (Cooper, Liukkonen, & Cartwright, 1996; Elkin & Rosch, 1990). Absenteeism costs organizations billions of dollars a year (Cox, Griffiths, & Rial-González, 2000). In the long run, stress might lead to disabilities. Data from the Netherlands show that 30 % of all cases of disability pensions are due to stress-related disorders (Van der Hek & Plomp, 1997) and similar findings exist for other countries. Moreover, mortality rates were found to be related to occupational groups, i.e. to work-specific stressors (Fletcher, 1991).

Because of this practical relevance of workplace stress, there is an enormous and still ongoing research activity within the field of organizational stress (Beehr, 1995). Findings from past research have been summarized in previous review chapters and journal articles (Beehr & Newman, 1978; Danna & Griffin, 1999; Ganster & Schaubroeck, 1991; Kahn & Byosiere, 1992; McGrath, 1976; Sullivan & Bhagat, 1992). Many researchers criticized organizational stress studies for methodological weaknesses (Frese & Zapf, 1988; Kasl, 1978; Kasl, 1986). Their main concerns referred to the following issues: The overwhelming majority of the empirical studies are cross-sectional in nature and do not allow inferences on causality. In many studies the independent and dependent measures share common method variance and overlap in content. Most studies focus on bivariate, linear relationships and neglect possible moderator and non-linear effects.

Nevertheless, over the years researchers witnessed methodological improvements in organizational stress studies (Beehr, 1998; Kahn & Byosiere, 1992), particularly during the past ten years the improvements include (a) a better operationalization of basic concepts which allow a better test of theoretical models (e.g. Edwards & Harrison, 1993; Wall, Jackson, Mullarkey, & Parker, 1996); (b) an increasing number of studies which use “objective” measures of stressors (Greiner, Ragland, Krause, Syme, & Fisher, 1997; Melamed, Ben-Avi, Luz, &

Green, 1995); (c) a steady increase in longitudinal studies with many of them using a structural equation modelling approach for data analysis (e.g., Bakker, Schaufeli, Sixma, Bosveld, & van Dierendonck, 2000; Dormann & Zapf, 1999; Schonfeld, 1992); (d) exploration of curvilinear effects (e.g., de Jonge & Schaufeli, 1998; Dollard, Winefield, Winefield, & de Jonge, 2000; Warr, 1990); and (e) use of innovative approaches such as multi-level designs (e.g., Jex & Bliese, 1999) and growth curve models (e.g., Barnett & Brennan, 1997; Garst, Frese, & Molenaar, 2000).

This chapter reviews research on stress in organizations and its practical implications. It aims at an extension of previous reviews by focusing more strongly on methodologically sound – although not perfect – studies. This gives us the opportunity to examine more deeply the processes and consequences associated with organizational stress. Specifically, we address the question whether methodologically improved studies contribute to a better understanding of organizational stress. Most of the more recent review chapters and articles have exclusively looked at health and well-being consequences of organizational stress (Danna & Griffin, 1999; Ganster & Schaubroeck, 1991; Kahn & Byosiere, 1992). We broaden the view by including performance and other organizational behavior issues (e.g., organizational commitment and absenteeism).

In the first section of this chapter we describe the stress concept and give an overview of stressors and stress reactions. In the second section we present theories of organizational stress. The third section is devoted to empirical findings in organizational stress research. We describe the empirical evidence of main and moderator effects on the relationship between stressors and individual health and well-being. We summarize research findings on the relationship between stress and performance. Moreover, we refer to the effects of stress on other aspects of organizational behavior. In the fourth section we describe stress management interventions. In conclusion, we suggest a few research questions for the future.

## THE STRESS CONCEPT

### Overview over Conceptualizations of Stress

On the most general level, one can differentiate between four stress concepts: (a) the stimulus concept; (b) the response concept; (c) the transactional concept; and (d) the discrepancy concept. The stimulus concept focuses on situational conditions or events. Within this conceptualization certain stimuli are stressful, for example high time pressure, interpersonal conflict at work, or accidents. However, the stimulus concept is problematic because not all individuals react in a uniform manner to the same stressor. Nearly every situational condition or every event may evoke strain in some individuals. Although the stimulus conceptualization leads to

conceptual problems, many researchers agree that there are subsets of stimuli which evoke strain in most individuals (Brief & George, 1995; Kahn & Byosiere, 1992).

The reaction concept focuses on physiological reactions as the crucial constituent of stress, i.e. stress exists if an individual shows a specific reaction pattern, irrespective of situational characteristics (Selye, 1956). However, this conceptualization also has its shortcomings. It does not take into account that very different situations can result in the same physiological responses and that an individual's coping efforts may have an effect on this individual's reactions, thus altering the stress response.

Another class of concepts refers both to the situation and the person when defining stress. The transactional concept brought forward by Lazarus (1966) assumes that stress results from a transaction between the individual and the environment, including the individual's perceptions, expectations, interpretations, and coping responses. In terms of operationalization and measuring stress in empirical studies this concept did not fully develop its potential yet. Often, proponents of the transactional concept actually rely in their research practice exclusively on verbal responses or physiological measures of strain as indicators of stress. By doing so, they implicitly apply the reaction concept. The discrepancy concept describes stress as an incongruence between what individual's desires and the environment (Edwards, 1992). However in operationalizing such a discrepancy, researchers face great difficulties.

Thus, 'stress' is a broad term which conveys a variety of meanings. To avoid ambiguity, we refer to 'stressors' and 'stress reactions' 'strain' throughout this chapter. For 'stress reactions' we use the term 'strains' synonymously.

### Stressors

Stressors are conditions and events that evoke strain (Kahn & Byosiere, 1992). Stressors can be single events such as critical life events or traumatic experiences and chronic problems which continue over a longer period of time. The latter often are micro stressors, so-called 'daily hassles' (Kanner, Coyne, Schaefer, & Lazarus, 1981) which include for example daily difficulties with finishing one's work in time or daily problems in dealing with difficult clients.

Stressors can be grouped into the categories physical stressors, work-related job stressors, role stressors, social stressors, time-related stressors, career-related stressors, traumatic events, and stressful change processes (Table 1).

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Insert Table 1 about here

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Physical stressors refer to aversive physical working conditions including noise, dirt, heat, vibrations, chemical, or toxic substances. They also include poor ergonomic conditions at the work place and accidents. Physical stressors have psychological effects (Seeber & Iregren, 1992). Task-related job stressors appear while doing a task and they include high time pressure and work overload, high complexity at work, monotonous work, and disruptions (e.g., caused by an unexpected computer shutdown). Role stressors fall into role ambiguity and role conflict. Social stressors express themselves in poor social interactions with direct supervisors, co-workers, and others. These stressors include interpersonal conflicts at the work place, (sexual) harassment, and mobbing/bullying (Zapf, Knorz, & Kulla, 1996b). Additionally, having to deal with extremely difficult customers can also be conceptualized as social stressor. Work schedule -related stressors stem from working time arrangements. The most prominent and well-researched stressors in this category are night- and shiftwork . Additionally, long working hours and overtime belong to this category (Sparks, Cooper, Fried, & Shirom, 1997). Career-related stressors include job insecurity and poor career opportunities. Traumatic stressors are single events such as the exposure to disasters, major accidents, or extremely dangerous activities. Soldiers, police personnel and fire fighters are assumed to be particularly prone to the exposure of traumatic stressors (Cornell, Beaton, Murphy, Johnson, & Pike, 1999). Organizational change can also be regarded as a stressor. Examples include mergers, downsizing, or the implementation of new technologies. They are stressful because they may result in other stressors such as job insecurity, overtime, and conflicts.

These categories make sense intuitively, but largely lack an explicit theoretical foundation. There are only a few theoretically-derived taxonomies of stressors. These taxonomies cover parts of potential stressors. Probably the most prominent taxonomy is the delineation of role stressors from role theory (Katz & Kahn, 1978). Role stressors comprise role overload, role conflict and role ambiguity. Role overload occurs when individuals have to do too much or too complicated work, role conflict refers to situations with conflicting role expectations, and role ambiguity refers to situations with unclear role expectation. There are ample of studies on this successful model. Jackson and Schuler (1985) and Tubbs and Collins (2000) meta-analyzed findings from these studies and showed clear relationships between role stressors and impaired well-being.

Semmer (1984) and Leitner, Volpert, Greiner, Weber, and Hennes (1987) proposed a taxonomy of stressors based on action theory (cf. Frese & Zapf, 1994; Hacker, 1998). This taxonomy clusters stressors on the basis of how they disturb the regulation of goal-oriented action. Specifically, this taxonomy differentiates between regulation obstacles, regulation uncertainty, and overtaxing regulations. Regulation obstacles such as interruptions or organizational constraints make action regulation more difficult - if not impossible. Regulation uncertainty refer to uncertainties about how to reach the goal and include stressors such as lack of appropriate



feedback, role conflicts and role ambiguity. In the case of overtaking regulation the speed and intensity of the regulation is the major problem. Typical examples are time pressure and requirement to concentrate. This taxonomy has been successfully used in some studies (e.g., Frese, 1985; Greiner et al., 1997; Leitner, 1993).

There is a long and ongoing debate on “objective” versus “subjective” approaches to the study of work stress (Frese & Zapf, 1988; Frese & Zapf, 1999; Kasl, 1998; Perrewé & Zellars, 1999; Schaubroeck, 1999). Often, subjective approaches have been linked to the use of self-report measures while measures not using self-report were labelled ‘objective’. However, the distinction between objective and subjective approaches is not such a simple one. Frese and Zapf (1988) suggested another distinction: objective approaches focus on events, processes and workplace characteristics that are not related to the job holder’s perceptions and that exist irrespective of this individual’s cognitive and emotional reactions. Subjective approaches in contrast refer to events, processes and workplace characteristics as perceived and appraised by the job holder. This debate is particularly important with respect to practical implications: It makes only sense to redesign jobs when strains can be attributed to objective stressors – and not only to appraisal processes.

#### Stress Reactions

Stress in organizations affects both the individual and the organization (e.g., increased turnover rates). Individuals can be affected at the physiological, affective, and behavioral level, and in their leisure time and family life. Stressors affect individuals and organizations within different time frames, stress reactions can occur immediately (short-term reactions) and or may take longer time to develop (long-term reactions). Table 2 gives an overview over stress reactions.

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Insert Table 2 about here

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With respect to physiological responses, stress has an effect on the cardiac system. For example, individuals in so-called high-strain jobs (i.e., job with high demands and low job control, cf. Karasek, 1979) show higher blood pressure than individuals in other types of jobs (Schwartz, Pickering, & Landsbergis, 1996). Also heart rate increases in stress situations (Frankenhaeuser & Johansson, 1976). Moreover, experiencing a stressful work situation is associated with increased levels of cholesterol and other metabolic and hemostatic risk factors for cardiovascular disease (Vrijkotte, van Doornen, & de Geus, 1999).

The cardiac system is partly affected by hormones. Stress affects the excretion of hormones such as catecholamines and corticosteroids (e.g., cortisol). With respect to catecholamines, it is well documented that the excretion of epinephrine (adrenaline) and norepinephrine (noradrenaline) increases as stress increases (Aronsson

& Rissler, 1998; Frankenhaeuser & Johansson, 1976; Frankenhaeuser, 1979). The excretion of catecholamines seems to increase most when stressful working conditions are combined with inflexible working arrangements (Johansson, Aronsson, & Lindström, 1978; Melin, Lundberg, Soederlund, & Granqvist, 1999). With increasing work demands, the excretion of cortisol increases (Aronsson & Rissler, 1998). This increase in cortisol is most prominent when stress becomes chronic (Schulz, Kirschbaum, Prüssner, & Hellhammer, 1998). These physiological reactions, particularly the excretion of catecholamines and effects on the cardiac system help in mobilizing additional effort for completing work assignments and upholding performance (Lundberg & Frankenhaeuser, 1978). However, when experienced repeatedly and over a longer period of time, these physiological reactions may contribute to the development of illnesses, including coronary heart diseases.

Stress also has an effect on the immune functioning (Herbert & Sheldon, 1993). Experiencing high levels of stress is detrimental for an individual's immune system. Although the exact underlying processes are still unclear, stress is associated with an increased risk of physical illnesses in the long run. Individuals experiencing high work stress are more likely to develop cardiovascular problems (Schnall, Landsbergis, & Baker, 1994) or musculoskeletal diseases (Bongers, de Winter, Kompier, & Hildebrandt, 1993). The experience of stress is associated with affective reactions. In the short-term, mood disturbances can occur (Zohar, 1999). Such affective reactions seem to result mainly from specific aversive events and stressful achievement settings (Pekrun & Frese, 1992; Weiss & Cropanzano, 1996). In the long run, well-being and mental health can suffer. There is evidence from longitudinal studies that stressful work situations are associated with an increased level of depressive symptoms (Schonfeld, 1992), psychosomatic complaints (Frese, 1985; Parkes, Menham, & Rabenau, 1994) and other distress symptoms (Leitner, 1993). Burnout is another long-term stress reaction. It is characterized by emotional exhaustion, depersonalization (cynism), and reduced personal accomplishment (Maslach & Jackson, 1981). Burnout has been largely studied in human service and educational occupations, but there is increasing evidence that often members of other occupational groups also react with burnout symptoms to stressful work situations (Maslach, Schaufeli, & Leiter, 2001).

Stressors can also have negative effects on the behavioral level. For example, under stressful situations attention is narrowed and working memory capacity is reduced. Moreover, reduced performance accuracy can be observed (Searle, Bright, & Bochner, 1999). When confronted with a stressor, individuals often increase their effort (Hockey, 1997). As a consequence, overall performance does not necessarily suffer from stressful situations (Tafalla & Evans, 1997). Moreover, it has been observed that stressors in the work situation is related to violence such as sabotage, interpersonal aggression, and hostility (Chen & Spector, 1992).

Stressors encountered at work are also related to other aspects of organizational behavior. There is clear evidence that individuals who experience stressors are less committed to the organization (Mathieu & Zajac, 1990). Stressors are associated with turnover intentions (Chen & Spector, 1992) and actual turnover.

Stress experienced at work can also become obvious outside the work situation. Mood disturbances associated with stressful working situations generalize to the individual's private life (Doby & Caplan, 1995; Repetti, 1993; Totterdell, Spelten, Smith, Barton, & Folkard, 1995). There is increasing evidence from time sampling studies that mood experienced in one domain (e.g., work) spills over to another domain (e.g., family; e.g., Williams & Alliger, 1994).

Moreover, experiencing a stressful work situation has effects on unwinding processes. For example, Frankenhaeuser (1981) examined adrenaline excretion rates during periods of high work load and showed that adrenaline excretion rates remained elevated during leisure time in the evening. This high level of adrenaline excretion during the evening makes it difficult for individuals to unwind and recover from their stressful work situation (cf. also Meijman, Mulder, & Van Dormolen, 1992 for similar findings).

Additionally, stress reactions might not be limited to the person who him- or herself is exposed to the stressful situation. For example, an observational study showed that mothers' behavior towards their preschool children differed between stressful and unstressful work days (Repetti & Wood, 1997).

## THEORIES ON ORGANIZATIONAL STRESS

Theories can be differentiated in models that describe the stress process itself and models that explain stress reactions, i.e. the relationship between stressors and strains. The first type of models describes what happens when an individual is exposed to a stressor, while the second type of models specifies configurations of stressors that are associated with strains. Typically, this second type of models neglects process aspects.

It is beyond the scope of this chapter to provide an exhaustive presentation of all theories and models. Instead, we shall concentrate on those models that have been influential in past theorizing and empirical research and on those which offer promising prospects for future research and practice. Interested readers may refer to Cooper (1998) and Kahn and Byosiere (1992) for descriptions of more models.

### Theoretical Models Focussing on the Stress Process

These models aim at a detailed description of what happens during the stress process. Major models in the area are the transactional stress model (Lazarus, 1966; Lazarus & Folkman, 1984) and (other) cybernetic models (Edwards, 1992).

The Transactional Stress Model. One of the most prominent models which on stress process is the transactional model by Lazarus (1966; Lazarus & Folkman, 1984). Lazarus and Folkman define psychological stress as “a particular relationship between the person and the environment that is appraised by the person as taxing or exceeding his or her resources and endangering his or her well-being” (p. 19). Thus, Lazarus and Folkman assume that cognitive appraisals play a crucial role in the stress process. Appraisal processes refer to an individual’s categorization and evaluation of an encounter with respect to this individual’s well-being. Specifically, primary and secondary appraisal can be differentiated. By primary appraisal, encounters are categorized as irrelevant, benign-positive or stressful. Stress appraisals comprise harm/loss, threat, and challenge. By secondary appraisals, individuals evaluate what can be done in the face of the stressful encounter, i.e. they tax their coping options. On the basis of primary and secondary appraisals, individuals start their coping processes which can stimulate reappraisal processes.

To arrive at a better understanding of the stress process and how it develops over time, Lazarus (1991) suggested putting more emphasis on an intra-individual analysis of the stress phenomenon, for example by studying the same persons in different contexts over time. A few studies followed such an approach (Folkman, Lazarus, Dunkel-Schetter, DeLongis, & Gruen, 1986), the majority of empirical studies in the area of organizational stress however, did not adopt such a process perspective but treated stressful situations and individuals’ reactions to them as stable. Moreover, it has been questioned whether a focus on individual processes offers much to the understanding of workplace stress (Brief & George, 1995).

Cybernetic Model. Edwards (1992) proposed a cybernetic model of organizational stress (cf. for a related model, Cummings & Cooper, 1979, 1998). Edwards summarized earlier approaches on stress which implicitly assumed cybernetic principles (e.g., Kahn, Wolfe, Quinn, Snoek, & Rosenthal, 1964; McGrath, 1976) and explicitly built on Carver and Scheier’s (1982) work on cybernetics as a general theory of human behavior. Crucial components in Carver and Scheier’s model are an input function, a reference value, a comparator, and an output function. The input function refers to perceptions of one’s own state or of situational features in the environment. The reference value comprises the individual’s desires, values, or goals. The comparator compares the input function with the reference value. The output function refers to behavior which is activated when a discrepancy between the input function and the reference value is detected.

Edwards (1992) defines stress as “a discrepancy between an employee’s perceived state and desired state, provided that the presence of this discrepancy is considered important by the employee” (p. 245). Thus, stress occurs when the comparison between an individual’s perception and his or her desire results in a discrepancy. The perception is assumed to be influenced by the physical and social environment, personal

characteristics of the individual, the individual's cognitive construction of reality, and social information. The discrepancy between perception and desires (i.e., stress), affects two outcomes: the individual's well-being and his or her coping efforts. Additionally, reciprocal effects between well-being and coping are assumed. Moreover, coping may have an effect on the person and the situation, the individual's desires, and the duration of the stressful situation and the importance attached to it. The effects of the discrepancy on well-being and coping efforts are moderated by additional factors such as the importance of the discrepancy and its duration.

Although there is empirical research on isolated aspects of the cybernetic model (e.g., on the effects of discrepancies between perceptions and desires on well-being (cf., Edwards, 1991), to our knowledge, no study on organizational stress has yet examined the cybernetic framework as a whole. One reason is that it is difficult to examine the crucial assumptions of this model in one single study. Such a study must include separate measures of perceptions, desires, importance, duration, well-being, and coping. The greatest challenge will be to design non-confounded measures of individual perception, objective characteristics of the environment, of the individual's cognitive construction of reality, and social information processes.

#### Theoretical Models on the Relationship Between Stressful Situations and Strains

These models specify the configuration of work place factors which are associated with strains, i.e., stress reactions. Major models include the person-environment-fit theory (Harrison, 1978), job demand-job control model (Karasek, 1979), the vitamin model (Warr, 1987) and the effort-reward imbalance model (Siegrist, 1996).

Person-Environment Fit Theory. Person-environment (P-E) fit theory assumes that stress occurs because of a misfit between the individual and the environment (for an overview cf., Edwards, 1998; Harrison, 1978). Thus, it is neither the person nor the situation alone which cause stress experiences and strains. There are two types of misfit between an individual and the environment. The first type refers to the fit between the demands of the environment and the abilities and competencies of the persons. The second type refers to the fit between the needs of the person and supplies from the environment.

At the conceptual level, P-E fit theory differentiates between the objective and the subjective person as well as between the objective and the subjective environment (Harrison, 1978). Objective person and objective environment refer to the individual needs, abilities and competencies and to environmental supplies and demands as they actually exist, i.e. independently of the person's perceptions. Subjective person and environment refer to the individual's perceptions. Therefore, fit can refer to the congruence between (1) objective environment and objective person, (2) subjective environment and subjective person, (3) subjective and objective environment (i.e., contact with reality) and (4) subjective and objective (i.e., accuracy of self-assessment).

The theory argues that the objective person and environment affect the subjective person and environment and that a misfit between the subjective environment and the subjective person produces strain. Strain increases as demands exceed abilities and as needs exceed supplies. When abilities exceed demands, strain may increase, decrease or remain stable. Similarly, when supplies exceed needs, strain may increase, decrease or remain stable. The exact picture of the relationships depends of the content and importance of the dimension in question.

In a classic study, French, Caplan, and Harrison (1982) explicitly tested P-E fit theory. Indeed, P-E misfit was associated with psychological, physical and biological strains. Subsequent studies on P-E fit resulted in similar findings and identified a needs-supplies misfit as the strongest predictor of strain (Edwards, 1991). However, many of these studies have been criticized for methodological shortcomings, particularly the operationalization of P-E fit as a difference score (Edwards, 1995). More recent studies – most of them published after 1990 – overcame these problems by examining three-dimensional relationships of the person and environment with strain measures. These studies partially confirmed the basic assumption of P-E-fit theory, i.e. that strain increases as fit between the person and his or her work environment decrease (Edwards, 1996; Edwards & Harrison, 1993). These studies also pointed to complex patterns including curvilinear relationships. Taken together there is some empirical support for the P-E-fit model. However, longitudinal studies are still missing. Therefore, a final conclusion about this model would be premature.

Job Demand-Job Control Model. The job demand-job control model differentiates between two basic dimensions of work place factors, namely job demands and job decision latitude (Karasek, 1979). Job demands are the work load demands put on the individual. Job decision latitude refers to the employee's decision authority and his or her skill discretion. Karasek combined the two dimension of job demands and job decision latitude in a 2x2 matrix of jobs: Jobs low on demands and low on decision latitude ('passive' jobs), jobs low on demands and high on decision latitude ('low strain' jobs), jobs high on demands and low on decision latitude ('high strain' jobs) and jobs high on demands and high on decision latitude ('active' jobs).

With respect to stress reactions, Karasek (1979) states that the combination of high demands and low decision latitude in the 'high strain' jobs is most detrimental for people's health and well-being. The combination of high demands and high decision latitude in the 'active jobs' however, are assumed produce little harm for the individual. Stated differently, the model basically assumes that high decision latitude attenuates the negative effects of high demands.

During the past two decades, the job demand-job control model stimulated a large amount of empirical research. There is substantial, although not unequivocal support for the model. We will discuss findings from this research in more detail later in this chapter. A theoretical critique is given by Kasl (1996).

Vitamin Model. Warr (1987) proposed a “vitamin model” to specify the relationships between stressors and employee health and well-being. The vitamin model claims non-linear relationships between work characteristics and individual outcomes. Drawing an analogy to the effects of vitamins on the human body, Warr assumes that there are two types of work characteristics. First, some features of the work situation have a ‘constant’ effect on the individual, i.e. have an effect that increases with level up to a certain point, but then any added increase of the level of this work characteristic does not have any further effects (neither beneficial nor detrimental effects). Warr likens these to characteristics to the vitamin C. Examples are salary, safety, and task significance. For example, people need the “vitamin” of salary up to a certain point. Therefore, people’s well-being increases with having more income. But at a certain level, any additional salary increase will not have any further increase of people’s well-being. Second, other work features have a curvilinear relationship between the level of this work characteristic and well-being. Warr likens these to the vitamin D which is positive to a certain dose but then every further increase has a negative effect. Examples of these work features are job autonomy, social support, and skill utilization. For example, a low degree of job autonomy is detrimental to well-being. Therefore, up to a certain level, job autonomy increases well-being. If job autonomy is further increased, job autonomy becomes negative because people are overwhelmed with the responsibilities that job autonomy implies.

In terms of ‘stress’ this model implies that a specific amount of job autonomy, job demands, social support, skill utilization, skill variety, and task feedback is beneficial for the individual, but a very high level of these job characteristics creates a stressful situation. In contrast, high levels of salary, safety, and task significance do not show this detrimental effect.

Empirical studies on the vitamin model are still rare and support for the curvilinear relationships between work place factors and strain variables is mixed. Some studies did not find any significant curvilinear relationship (e.g., Parkes, 1991), others gave support to the Vitamin model (e.g., de Jonge & Schaufeli, 1998; Warr, 1990). Warr found curvilinear relationships between job demands and several strain measures such as job-related anxiety, job related depression, and low job satisfaction, and autonomy and job satisfaction. De Jonge and Schaufeli found evidence for curvilinear relationships between job demands, job autonomy, and social support on the one hand and employee well-being on the other hand.

Effort-Reward Imbalance Model. A variant of a P-E fit model is Siegrist's (1996) effort-reward imbalance model. Basically, the effort-reward imbalance model assumes that a lack of reciprocity between costs and rewards are experienced as stressful and result in strains. More specifically, the model states that the degree to which an individual's efforts at work are rewarded or not is crucial for this person's health and well-being. Effort may be the response to both extrinsic and intrinsic demands. Extrinsic demands refer to obligations and demands inherent in the situation. Intrinsic demands result from a high need for control or approval. Rewards comprise money, esteem, and status control, such as job stability, status consistency and career advancement. In essence, the model assumes, that situations in which high efforts do not correspond to high rewards result in emotional distress situations, particularly high autonomic arousal.

A number of studies showed that a combination of high effort and low reward predicted self-reported health complaints, cardiovascular risk factors and manifestations of coronary heart disease (Bosma, Peter, Siegrist, & Marmot, 1998; de Jonge, Bosma, Peter, & Siegrist, 2000; Peter, Geissler, & Siegrist, 1998; for a summary cf. Siegrist, 1998). Most interestingly, a longitudinal study with blue collar workers showed that experiencing an effort-reward imbalance was associated with a 6.15times higher risk of developing coronary heart disease 6.5 years later (Siegrist, Peter, Junge, Cremer, & Seidel, 1990; cf. also the similar results by Bosma et al., 1998).

Comparison of Models. Unfortunately, there are few empirical studies that directly compare different models. This is unfortunate because only a direct comparison can tell which theories are superior. Moreover, modern analysis methods – as structural equation analysis – allow and encourage such comparisons. For example, Elsass and Veiga (1997) tested the job demand-job control model and the P-E fit model with the same sample. Their data supported the P-E fit model, but not the job demand-job control model. Similarly, de Jonge et al. (2000) compared the job demand-job control model and the effort-reward imbalance model. These authors also reported better fit indices for the effort-reward imbalance model than for the job demand-job control model. This might suggest that the P-E fit and the effort-reward imbalance model is superior to the job demand-job control model in explaining employee well-being. In the future, more such analyses are needed.

## EMPIRICAL EVIDENCE

### Main Effects of Stressful Situations on Individual Well-Being and Health

There is consistent evidence that perceived stressors at work are related to indicators of poor health and well-being (for meta-analyses cf., Jackson & Schuler, 1985; Lee & Ashforth, 1996). However, most of these studies are cross-sectional in nature and based on same-source self-report measures. Many researchers criticized



these predominant features of organizational stress research (Frese & Zapf, 1988; Kasl, 1978; Zapf, Dormann, & Frese, 1996a). Cross-sectional designs allow no inference about causality, empirical relationships between stressors and strains might be due to third variables such as social class or negative affectivity, and strains may affect stressors, for example in the sense of the 'drift-hypothesis'. A drift-hypothesis implies that individuals with poor health are unable to retain favorable working conditions in the long run while healthier individuals are promoted into better, i.e. less stressful jobs (Frese, 1985). Health and well-being might also affect the perception of stressors, as individuals with poor health overestimate the stressfulness of their jobs (Zapf, 1989). Additionally, same-source measures often used in organizational stress research suffer from common method and therefore may result in an overestimation of true relationships.

Evidence from Studies with Objective Measures of Stressors. To examine whether the relationship between stressors and strains can be primarily explained by the use of self-report measures and the associated methodological problems, studies are needed in which stressors are assessed by non-self report measures. There is an increasing number of such studies. In some of these studies, researchers inferred objective stressors from occupational titles and similar information. Analyses revealed significant relationships between stressful jobs and poor health and well-being. For example, Tsutsumi, Theorell, Hallqvist, Reuterwall, and de Faire (1999) reported increased odd ratios of plasma fibrinogen concentrations – a physiological indicator assumed to be associated with coronary heart disease – in study participants working in highly demanding jobs.

Other researchers assessed objective stressors by means of observations. These studies also showed association between objective stressors and impaired health and well-being. For example, Frese (1985) found correlations of  $r=.18$  and  $r=.19$  between observer ratings of psychological stressors and psychosomatic complaints. Melamed et al. (1995) measured monotony with observational ratings and found that short-cycle and medium-cycle repetitive work was significantly associated with psychological distress, particularly in women. Greiner et al. (1997) reported increased odd ratios of psychosomatic complaints in observed high-stress jobs.

In summary, these findings show that stressors at work are related to poor health and well-being – even when objective measures of stressors are used. Often, the correlations between objective stressor measures and strains are smaller in size than the correlations between self-report measures of stressors and strains (cf., Frese, 1985), but they do not break down completely. This suggests that common method variance inflates the relationships between self-reported stressors and self-reported strains, but does not fully explain the empirical relationship between organizational stressors and strains. For methodological reasons, the correlations found between objective stressors and self-reported strains present the lower boundary of the stressor-ill health relationships (Frese, 1993).

Evidence from Longitudinal Studies. To arrive at a clearer picture about the causal processes between stressors and strains, longitudinal studies are needed. Although they do not solve all the methodological problems (Zapf et al., 1996a), they at least allow researchers to rule out some of the alternative interpretations. Table 3 gives an overview over longitudinal studies published between 1981 and 2000 that meet the following criteria (1) data collection on work-related stressors and strains (2) control for initial level of strains in the analyses.

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Insert Table 3 about here

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Table 3 shows the number of time lags, the time interval between the various measurement point, sample size, type of stressors assessed, type of strains assessed, results with respect to lagged effects, concurrent effects, reverse effects (i.e., effects of strains on stressors), and non-significant findings. Most of the studies assessed data at two measurement points. Time lags ranged between one month and 180 months, with most studies using time lags of 12 month or less. A wide range of stressors were assessed including workload, social stressors, and job insecurity. Also strain measured covered a large variety of indicators, including physiological measures, distress symptoms, depression, psychosomatic complaints and physical illnesses. Most researchers analysed their data with variants of cross-lagged panel correlations (CLPC), multiple regression analyses or structural equation approaches, e.g. LISREL.

We shall discuss the study findings separately for concurrent, lagged and reverse effects. Concurrent effects refer to synchronous effects of stressors (time 2) on strain (time 2) with controlling for strain (time 1). Lagged effects imply effects of stressors (time 1) on strain (time 2) when controlling for strain (time 1). Reverse effects refer to effects of strains (time 1) on stressors (time 2) with controlling for stressors (time 1)(drift hypothesis).

Most studies which examined concurrent effects focused on psychological strains (exceptions: Howard, Cunningham, & Rechner, 1986; Spector, Chen, & O'Connell, 2000 which looked at physiological strain). About half of the studies found concurrent effects of all measured stressors on strains. The other half of the studies found support for relationships between some combinations of stressors and strains. Stressors with concurrent effects on strains included work load, role conflicts and role ambiguity. Strains affected were depressive symptoms, burnout, and fatigue spillover into leisure time. There was no systematic pattern of stressor-strain relationships for which concurrent effects were found.

Studies which addressed lagged effects of stressful work situations examined both psychological and physical strain symptoms. Psychological symptoms included strains such as distress, anxiety, depressive symptoms, and exhaustion. Physical symptoms included mainly (psycho-)somatic health complaints, cardiovascular disease, and other illnesses. Lagged effects of stressors on psychological strain symptoms appeared in more than half of the studies, at least for some of the stressors or strains tested. Significant effects were more often found when stressors such as high demands and high workload were examined (as opposed to social stressors), when the time lag was relatively short (not longer than 12 months), and when no concurrent effects were tested simultaneously.

There is rather strong evidence that stressors at work have a lagged effect on physical strain symptoms, particularly (psycho-)somatic health complaints (Carayon, 1993; Frese, 1985; Leitner, 1993; Parkes, et al., 1994; for an exception cf. Mauno & Kinnunen, 1999). Stressors have lagged effects on cardiovascular disease, particularly in men (Hibbard & Pope, 1993; Karasek, Baker, Marxner, Ahlbom, & Theorell, 1981). However, stressors seems to have none or only a minor lagged effect on other illnesses such as cancer (Hibbard & Pope, 1993). Taken together, these longitudinal studies suggest that there are lagged effects of stressors on strains, particularly if the time lag between two measurement points does not exceed 12 months.

Most of the studies tested either concurrent or lagged effects. The majority of these studies found evidence for an effect of stressors on strains, at least for some of the stressor or strain indicators. There are only a few studies which analyzed both lagged and concurrent effects within the same data set (Glickman, Tanaka, & Chan, 1991; Kohn & Schooler, 1982; Moyle, 1998; Roy & Steptoe, 1994; Schonfeld, 1992; Wolpin, Burke, & Greenglass, 1991). All these studies found concurrent effects (at least for some of the indicators). However, more than the half of the studies failed to find lagged effects when concurrent effects were present. Only Wolpin et al. (1991) and Schonfeld (1992) reported lagged effects in the presence of concurrent effects. These findings indicate that individuals develop distress reactions to stressful situations rather quickly. This implies that having experienced stressful work situations in the past may have little effect on one's psychological well-being unless the stressful situation continues into the present. We assume however, that the situation is different for physical symptoms. More studies on physical indicators are needed which examine concurrent and lagged effects simultaneously.

There is a growing number of studies which tested reverse effect. These studies addressed the question whether strains lead to an increase in stressors as suggested in the 'drift hypothesis' (cf., Zapf et al., 1996). In eight out of eleven studies no such reverse effects were found (Carayon, 1993; Frese, 1985; Garst et al., 2000; Leitner, 1993; Mauno & Kinnunen, 1999; Moyle, 1998; Roy & Steptoe, 1994; Schonfeld, 1992). Three studies

reported reverse effects for (some of the) strain symptoms on (some of the) stressors (Bakker et al., 2000; Glickman et al., 1991; Kohn & Schooler, 1982). Interestingly, in most of the studies which found such reverse effects, both types of effects were present – effects of stressors on strains, and effects of strains on stressors. This suggests that – at least for some individuals – experiencing organizational stress may be linked to a negative spiral: stressors increase strain which in turn increase stressors. Moyle (1998) and Garst et al. (2000) however, found an effect opposite to the drift hypotheses (a sort of refuge model). People with high strain eventually received work places that had fewer demands and stressors.

In summary, there is good and increasing evidence that stressors at work have a causal effect on health and well-being. The support for concurrent effects is stronger than for lagged effects, at least for psychological strains. Consistent lagged effects were mainly found for physical strain symptoms. This implies that an individual's present work situation seems to be more relevant for developing psychological disturbances, while an individual's past work situation may also have long-term effects on his or her physical health and well-being. Clearly more research is needed which examines concurrent versus lagged effects more systematically. Moreover, more attention should be paid to the time intervals at which data are gathered (cf. Dormann & Zapf, 1999). Differential effects of different stressors and different models of stressor-strain relationships should be examined (Frese & Zapf, 1988; Garst et al., 2000).

#### The Role of Resources

Stressors do not necessarily have a negative effect on the individual. The degree to which a stressful work situation impacts the individual might be contingent on the availability of resources. Hobfoll (1998) defines resources as “objects, conditions, personal characteristics, and energies that are either themselves valued for survival, directly or indirectly, or that serve as a means of achieving these ends” (p. 54). With respect to organizational stress, resources refer to conditions within the work situation and to individual characteristics that can be used to attain goals. Both with respect to the advancement of stress theory and practical implications it is highly relevant to establish whether these resources buffer, i.e. moderate the effects of stressors on strains.

Resources at work most often studied were control at work and social support. Individual resources are coping styles, locus of control, self-efficacy, and competence. Additionally, we shall briefly refer to other factors such as Type A behavior pattern, hardiness, and sense of coherence.

Control at Work. Control at work refers to an individual's opportunity to influence one's activities in relation to a higher-order goal (Frese, 1989). Jackson, Wall, Martin, and Davids (1993) differentiated between control over timing and methods to do the work. Many studies addressed the question whether high control at

work buffers the negative effects of a stressful work situation on an individual's health and well-being. Most of these studies have been conducted within the framework of Karasek's (1979) job demand-job control model.

Epidemiological studies on cardiovascular diseases as an outcome variable, tended to confirm the major assumptions of Karasek's model (for reviews cf., Kristensen, 1995; Schnall et al., 1994; Theorell & Karasek, 1996). Individuals in high strain jobs often suffered from cardiovascular illnesses. Moreover, in about half of the studies, high strain jobs were associated with cardiovascular risk factors such as high blood pressure and smoking (Schnall et al., 1994).

With respect to other outcomes including psychological well-being and mental health, the findings are less conclusive. Several reasons for these inconsistent findings can be mentioned. First, there are many studies which did not explicitly test the interaction effect but which compared high demands/low control subgroups (i.e., high strain jobs) with high demands/high control subgroups (i.e., active jobs). This comparison often revealed significant differences in health and well-being between high strain jobs and active jobs (e.g., Eriksen & Ursin, 1999; Landsbergis, 1988). Theorell and Karasek (1996) have recently suggested that this procedure be used in general (for a critique cf., Kasl, 1996).

In a qualitative review of empirical studies on the job demand-job control model published between 1979 and 1997, Van der Doef and Maes (1999) examined whether individuals in high strain jobs experience poorer psychological well-being than individuals in other jobs. Their review revealed that in 28 of the 41 studies with general psychological well-being as dependent variable, individuals in high strain jobs indeed showed the lowest well-being scores. For job-related well-being such as job satisfaction, burnout and job-related mood as dependent variables a similar picture emerged. Strictly speaking, such a comparison between high strain and other jobs examines the main effects of job demands and job control and not the hypothesized interaction effect. When testing the interaction effect with the more appropriate moderated regression analysis the job demand-job control model was supported less frequently. Some researchers reported support for the model (Fox, Dwyer, & Ganster, 1993; Sargent & Terry, 1998), while others did not (Landsbergis, 1988; Schaubroeck & Fink, 1998).

In the above mentioned review by Van der Doef and Maes (1999), eight of 31 studies showed (partial) evidence for the interaction effect. An additional seven studies confirmed the interaction effect for subgroups of individuals, dependent on their personality, type of organization and hierarchical position. A more recent study found support for the postulated interaction effect when using a multi-level analysis approach (VanYperen & Snijders, 2000). It is noteworthy, that significant interaction effects were also found in longitudinal studies (Parkes et al., 1994; Sargent & Terry, 1998).

A second reason for failing to find the postulated interaction effect between demands and control may lie in the operationalization of the core variables. For example, Wall et al. (1996) argued that Karasek's (1979) measure of decision latitude (used in many studies) is a conglomerate of many aspects of control such as decision over working methods, decision over scheduling of one's tasks, aspects of skill use, and task variety. Probably only proper job control attenuates the negative effects of high demands, while skill use and task variety do not. Wall et al. (1996) tested this assumption explicitly and found the hypothesized interaction effect for a relatively narrow job control measure but not for the broader decision latitude measure (for similar findings, cf. De Croon, Van der Beek, Blonk, & Frings-Dresen, 2000; Sargent & Terry, 1998).

A third reason for the inconsistent finding on the job demand-job control model lies in the effects of additional variables such as social support or self-efficacy. For example, Johnson and Hall (1988) incorporated social support into the model. This extended demand-control-support model showed social support to buffer the negative effects of the combination of high demands and low control. Stated differently, the detrimental effects of a high strain job unfolded only when social support was low, but not when social support was high. Thus, a 3-way interaction was found.

Van der Doef and Maes (1999) suggested that field studies testing the hypothesized 3-way interaction - and which controlled for main effects and 2-way interactions - resulted in inconclusive findings. For example, Parkes et al. (1994) reported support for the demand-control-support model. Most studies found no evidence for a 3-way interaction between demands, control and support (Dollard et al., 2000; Furda et al., 1994; Melamed, Kushnir, & Meir, 1991; for a summary, cf., Van der Doef & Maes, 1999). Some authors even reported findings which are in opposite to the demands-control-support model (Landsbergis, Schnall, Deitz, Friedman, & Pckering, 1992; Schaubroeck & Fink, 1998). Recent research suggests even more complex interactions and stresses the importance of coping (Daniels, 1999).

Fourth, Warr (1987) and Frese (1989) have argued that at work it should be very difficult to find interaction effects of stressors and control: control implies that people can do something about the stressors. If people are bothered by stressors, they reduce them; but they can only reduce stressors if they have control. If stressors continue to exist this may be because they are non-controllable by definition. Because non-controllability and stressors are intertwined, it is difficult to show an interaction effect. It should be much easier to find an interaction effect if people are confronted with a new situation, such as in an experiment.

Fifth, experimental research tends to support the job demand-job control model. In such experiments interaction effects of perceived demands and perceived control on dependent measures such as anxiety, task satisfaction, and subjective task performance were found (Jimmieson & Terry, 1997; Perrewé & Ganster, 1989),

although there is also disconfirming evidence (Perrewé & Ganster, 1989; Searle et al., 1999). There is a large body of literature on the learned helplessness paradigm (Seligman, 1975) which also posits an interaction effect of stressors and control. Experimental research in this tradition has repeatedly replicated the interaction effects of bad events and non-control on reduction in well-being (Peterson, Maier, & Seligman, 1993).

In summary, there is strong empirical evidence for the additive main effect of job demands and job control. Individuals in high strain jobs show the lowest well-being scores and suffer most from illnesses. However, the interaction effect has received far less support. Adequate operationalization of job control may be crucial for finding significant interaction effects. Experimental findings tended to support the helplessness concept with its interaction effects of stressors and non-control. In all, Karasek's model (1979) has contributed to a fair amount of empirical controversy which has been fruitful. Given the arguments above and the experimental findings, the fact that non-control and stressors produce at least additive effects and that a number of field studies find an interaction effect after all, we tend to think that Karasek's model has not done that badly.

Social Support and Work Group Factors. Social support is important for protecting an individuals's health and well-being. It can be characterized as "resources provided by others" (Cohen & Syme, 1985) and comprises emotional support, informational and instrumental, i.e. tangible support (House, 1981). In general, the literature assumes that the beneficial effect of social support works both via main and interaction effects. A recent meta-analysis based on a total of 68 effect sizes addressed the main effect and has shown that social support is negatively associated with strains (Viswesvaran, Sanchez, & Fisher, 1999). Interestingly, it was also negatively related to stressors at work.

With respect to the interaction effect, Cohen and Wills (1985) pointed out that social support functions only as a buffer in the stressor-strain relationship if the available support matches "the specific need elicited by a stressful event" (p. 314). A number of cross-sectional studies suggest that social support buffers the negative effects of stressors (for a review, cf. Kahn & Byosiere, 1992).

Longitudinal studies are needed to arrive at a conclusion about causality. Dormann and Zapf (1999) reviewed 10 long-itudinal studies published between 1985 and 1999 which examined the interaction effect of social support. Three of these studies found no moderator effects. In some of the other studies, moderator effects missed the conventional significance level or were only significant for a small part of all the effects tested. Thus, the evidence for an across-the-board moderator effect of social support is not very strong. A closer look at some of the recently published studies suggests that there might be specific mechanisms underlying the stress-buffering potential of social support. For example, in correspondence to the stress matching hypothesis (Cohen & Wills, 1985), Frese (1999) found the strongest effects for social stressors and socially-related aspects of

psychological dysfunctioning. Dormann and Zapf (1999) found a lagged moderator effect of social support only with an 8 months time lag, but neither for shorter nor for longer time lags. More research is needed which examines in more detail how the effects of social support unfold over time.

Moreover, there is increasing evidence that social support does not have unequivocal positive effects. A number of authors reported that a high degree of social support or related variables increased the relationship between stressors and strain symptoms (Schaubroeck & Fink, 1998). Peeters, Buunk, and Schaufeli (1995) showed that a high level of instrumental social support may induce feelings of inferiority that are detrimental for an individual's well-being.

Additionally to social support group work factors such as group cohesion or team climate play a role when it comes to stress in organizations. First, research suggests that individuals who work in teams experience better well-being than individual working in no team or a pseudo team (Carter & West, 1999). Second, group cohesion and favorable team climates were found to be associated with team members' well-being (Carter & West, 1998; Sonnentag, Brodbeck, Heinbokel, & Stolte, 1994; for an overview cf. Sonnentag, 1996). Third, work group factors such as psychological safety (Edmondson, 1999) or collective efficacy (Schaubroeck, Lam, & Xie, 2000) might buffer the negative effects of stressors. However, empirical studies are still rare (cf. for a related recent study Bliese & Britt, 2001). Fourth, there is increasing evidence that emotional contagion occurs in work groups (Bakker & Schaufeli, 2000; Totterdell, Kellett, Techmann, & Briner, 1998). Emotional contagion refers to processes by which an individual's mood is 'transmitted' to other persons, for example other team members. On the one hand, this phenomenon implies that a stressful events can impact more persons than those directly faced with the stressor. On the other hand, other team members' positive mood can serve as a resource when confronted with a stressful situation. Linking group work factors to stress issues seems to be a fruitful avenue for future research.

Coping Styles. A favorable coping style can be a core resource for bolstering an individual's health and well-being. Lazarus and Folkman (1994) defined coping as "constantly changing cognitive and behavioral efforts to manage specific external and/or internal demands that are appraised as taxing or exceeding the resources of the person" (p. 141). They differentiated between problem-focused and emotion-focused forms of coping. Problem-focused coping includes problem-solving behaviors which aim directly to change the stressor, other aspects of the environment, or one's own behavior. Emotion-focused coping refers to attempts to manage cognitions or emotions directly (for a critique and extension cf. Semmer, 1996).

Problem-focused coping has been found to be positively related to mental health and well-being while emotion-focused coping and an additional style of avoidance coping were often found to be associated with



poorer well-being (Guppy & Weatherston, 1997; Hart, Wearing, & Headey, 1995; Leiter, 1991; Sears, Urizar, & Evans, 2000).

With respect to moderator effects, empirical findings are less conclusive. Many studies did not find the hypothesized moderator effects of coping on the relationship between stressors and strains (e.g., Ingledeu, Hardy, & Cooper, 1997). Most studies which found a moderator effect of coping, identified problem-solving coping as a favourable coping style, while emotion-focused coping turned out as an unfavourable coping style (Parkes, 1990). This implies that individuals who approach the stressors directly or engage in other problem-solving behaviors are better off than individuals who concentrate on the management of their emotions and cognitions.

Authors like Perrez and Reicherts (1992) have argued that coping behavior should match the situation in order to be effective. A recent study in a hospital setting supports this assumption (de Rijk, Le Blanc, Schaufeli, & de Jonge, 1998). Problem-focused coping was found to be only superior in situations in which nurses could exert control over their work situation. In low-control situations, attempts of problem-focused coping were negatively associated with individuals' well-being.

Locus of Control. Locus of control (Rotter, 1966) – an individual difference concept - refers to whether individuals see themselves as primarily able to control their lives and their major experiences (internal locus of control) or whether individuals think that other people or forces beyond themselves (e.g., luck) determine what happens to them (external locus of control). At the most general level it is assumed that individuals with an internal locus of control exert more direct action against the stressor than externals. Therefore, it is expected that they will suffer less from work related stressors (Cohen & Edwards, 1989). Indeed, individuals with an internal locus of control experience better mental health than individuals with an external locus of control (for reviews cf. Glass & McKnight, 1996; Kahn & Byosiére, 1992). Such a positive effect of an internal locus of control was also confirmed in longitudinal studies (Daniels & Guppy, 1994; Newton & Keenan, 1990).

Additionally it was tested whether a high internal locus of control buffers the negative effects of a stressful work situation. Findings from cross-sectional studies seem to support such a moderator effect (for a review cf. Kahn & Byosiére, 1992). However, results from longitudinal studies are less conclusive. For example, in the study by Newton and Keenan (1990), only a small portion of the tested moderator effects reached their significance level. Longitudinal studies by Parkes (1991) and Daniels and Guppy (1994) reported more complex three-way interactions between stressors in the work situation, job control and locus of control.

Taken together, research suggests that locus of control has a main effect on well-being. However, longitudinal studies did not provide evidence for a simple moderator effect of locus of control on the relationship between stressors and strains.

Self Esteem, Self-Efficacy, and Competence. Self esteem and self-efficacy are important for an individual's health and well-being. There is consistent empirical evidence for a main effect of self esteem and self-efficacy (for reviews cf., Kahn & Byosiere, 1992; Sonnentag, in press-a). Evidence for a moderator effect of self-esteem is weak (Jex & Elacqua, 1999). With respect to self-efficacy there is more evidence – although not unequivocal - for a moderator effect. Some studies show that the relationship between stressful work situations and poor well-being is stronger for individuals low on self-efficacy than for individuals high on self-efficacy (Jex & Bliese, 1999; VanYperen, 1998). There are additional studies which reported this moderator effect for some, but not all of the studied stressor or strain measures (Bhagat & Allie, 1989; Jex & Elacqua, 1999). Jex and Gudanowski (1992) and Saks and Ashforth (2000) did not find an interaction effect for self-efficacy. Parker and Sprigg (1999) provide evidence that proactive personality – a concept closely related to self-efficacy – attenuates the stressor-strain relationship, particularly when job control is high. Also recent work by Schaubroeck and his co-workers suggests a more complex picture with three-way interactions between stressors, job control and self-efficacy (Schaubroeck, Lam, & Xie, 2000; Schaubroeck & Merritt, 1997).

Because self-efficacy is an individual's belief that he or she is competent, the issue of subjective competence can be discussed within the self-efficacy framework. Surprisingly, there are no studies on objective competence and skills as resources in the stress process to our knowledge. This is all the more surprising because skills needed at work should be the prime candidates for dealing with stressors.

Other Person Factors. In the past, researchers paid attention to the Type A behavior pattern as one important individual difference variable in explaining negative effects of stressful work situations, particularly with respect to cardiovascular diseases. Type A individuals are competitive, hostile, impatient and hard driving. Ganster and Schaubroeck (1991) and Kahn and Byosiere (1992) summarized the findings of studies on Type A behavior pattern. There is some support for a main effect of Type A behavior on strain. More specifically, the hostility component was found to be closely related to physiological reactivity (Ganster, Schaubroeck, Sime, & Mayes, 1991). In contrast, the evidence for a moderator effect of Type A behavior pattern is weak (Kahn & Byosiere, 1992). More recent longitudinal studies are inconclusive. Type A behavior enhanced the relationship between stressors and strains in one study (Moyle & Parkes, 1999) whereas it attenuated this relationship in another study (Newton & Keenan, 1990).

Hardiness is another individual difference variable assumed to moderate the stressor-strain relationship. Hardiness comprises the dimensions commitment, control and challenges (Kobasa, Maddi, & Kahn, 1982).

There is some evidence for a main effect of hardiness on individual health, but support for a moderator effect was found only in some studies (e.g., Howard et al., 1986), but not in others (e.g., Tang & Hammontree, 1992)

Sense of coherence (Antonovsky, 1991) is a concept closely related to hardiness. Its central aspects are perceived comprehensibility, manageability, and meaningfulness of the environment. Recently, researchers included sense of coherence has a potential moderator in studies on work-related stress. Cross-sectional research suggests that sense of coherence can attenuate the negative impact of high strain jobs (Söderfeldt, Söderfeldt, Ohlson, Theorell, & Jones, 2000). Longitudinal tests are needed to substantiate this effect.

Conclusions About Moderator Effects. Methodological reasons make it difficult to detect moderator effects, particularly in non-experimental studies. Moderated regression analysis is a conservative procedure which makes it hard to establish moderator effects. Thus, the field of moderators in stress research may very well have to deal with a large type B error (i.e., not finding in research what exists in reality). First, main effects are entered first into the regression equation, and therefore not much variance remains to be explained by the interaction term. This problem is enhanced in longitudinal studies in which the initial level of the strain measure, i.e. dependent variable, is also entered into the regression equation as a control variable. Because individual strain measures are fairly stable over time, a large proportion of the variance of the dependent variable is already explained. Thus, there is little variance left to be explained by the interaction effect. Second, most stress studies rely on relatively small sample sizes. This implies that the studies do not have enough power for detect the moderator effects, even if they exist (Aiken & West, 1991).

Consequently, empirical findings on moderator effects are mixed. There are some studies, including those using longitudinal designs which speak for a moderator effect of control, social support, and coping styles. Cross-sectional findings on a moderator effect of self-efficacy are encouraging. However, support for a moderator effect of locus of control, Type A behavior or hardiness are weak.

If we analyse these findings in the light of methodological problems associated with the test of moderator effects, it seems warranted to continue research in this area. However, we think that the following recommendations may make it more likely to find moderator effects: First, more attention should be paid a match between specific stressors and specific moderators (cf. Cohen & Wills, 1985). For example, it is plausible to assume that social support which provides additional information on role requirements will attenuate the negative impact of role ambiguity, but not the negative impact of high time pressure. Second, large sample sizes are needed for ensuring sufficient power for detecting effects. Third, design issues are important as well. Given

the power issues involved, one can select work places with the extremes of stressors (high, low stressors) and resources (e.g., very high versus very low control) and test for interactions within such a design (Aiken & West, 1991). Fourth, it is necessary to understand better whether or not the resources have an impact on stressors (and vice versa). One reason may be that, for example, control at work leads to a reduction of certain stressors (particularly those that match the control). If this is the case, then we would know why resources are sometimes negatively related to stressors. One way to deal with the problem of confounding between resources and stressors is to get people who are new in their jobs. Finally, we suggest to combine experimental and field studies to a larger extent, attempting to simulate in the experiment, the same type of stressors and resources that are studied in the field.

In summary, research on resources has revealed main effects of resources on health and well-being. This implies that the availability of resources is helpful and beneficial in itself and across a wide range of situations. Additionally, there is some – although not unequivocal - evidence that certain resources can attenuate the negative effects of stressors on health and well-being. Particularly important are control at work, social support, coping styles, and self-efficacy.

#### Stress and Performance

Stress in organizations may not only impact individual health and well-being but also performance. Performance refers to individuals' actions that are relevant for organizational goals (Campbell, McCloy, Oppler, & Sager, 1993). Borman and Motowidlo (1993) differentiated between task and contextual performance. Task performance refers to in-role behaviors which contribute to the organization's 'technical core'. Contextual performance refers to extra-role, discretionary behaviors which do not directly contribute to an organization's technical core but which are assumed to support its broader organizational, social, and psychological environment.

There are several contradictory assumptions about how stressors in organizations affect performance. It is plausible to assume that stressors have a negative linear effect on performance. Such a negative effect can be explained by direct and indirect effects. The direct effect implies that stressors, particularly situational constraints make task accomplishment more difficult, if not impossible. For example, in case a task has to be accomplished with a specific technical equipment and this equipment is not available because of a computer breakdown, task performance will suffer directly. Moreover, stressors may indirectly affect performance by for example decreasing alertness or motivation which in turn negatively affects performance.

There is a long tradition in conducting laboratory studies on the task performance-effects of stressors (Postman & Bruner, 1948). These studies show that the exposure to stressors leads to cognitive reactions such as

narrowed attention (including a focus on salient cues) and reduced working memory capacity (Baddeley, 1972; Hamilton, 1982; for summaries cf. Hockey, 1986; Wickens, 1996). A reduced working memory capacity is associated with a speed/accuracy tradeoff when working under stressful conditions, particularly under time pressure (Hockey, 1986; Lulofs, Wennekens, & van Houtem, 1981). Moreover, narrowed attention and reduced working memory capacity have an impact on decision making strategies. More specifically, they result in simpler decision strategies, recognitional rather than analytical strategies, and less complete mental simulations (Klein, 1996). Recent studies suggest that the effects of stressors on performance are mediated by fatigue (Hockey, Maule, Vloogh, & Bdzola, 2000; Lorist et al., 2000).

Some of these effects of stressors were also found in more realistic simulations of work environments. For example, simulated workload resulted in a performance decrease in some studies (Glaser, Tatum, Nebeker, Sorenson, & Aiello, 1999; Jimmieson & Terry, 1999), although not in all (Shaw & Weekley, 1985). When using a mail sorting task, Searle et al. (1999) found that high job demands (i.e., high work load) were associated with an increase in performance attempts, but also with a reduction in performance accuracy, particularly in situations with low control.

In contrast to these findings from laboratory and simulation studies, findings from field studies are far less consistent. With respect to task performance, some stressors were found to be related to impaired performance, while others were not. For example, in a study on secretaries' job performance Spector, Dwyer, and Jex (1988) reported a negative relationship between secretaries' perceptions of constraints and ambiguity with supervisory performance ratings. But no significant relationships between secretaries' perceptions of workload or conflict and supervisory performance ratings emerged. Similarly, Beehr, Jex, Stacy, and Murray (2000) found negative relationships between specific stressors (i.e., acute stressful events, chronic occupation-specific stressors and workload variability) and an objective financial performance measure of door-to-door book sellers, but a positive relationship between role overload and job performance. In a classic study of engineers and scientists, Andrews and Farris (1972) reported that experienced time pressure increased subsequent performance. One of the best studies (Jones et al., 1988) showed that stressors at work increase the likelihood of errors and that an organization wide stress management program and changes in management of the hospitals reduced malpractice. All these results point to the need to develop a more specific theory of how stressors are related to performance.

Evidence from meta-analyses suggests that there is no substantial relationship between role stressors such as role ambiguity or role conflict and job performance, at least when job performance is assessed by objective measures or supervisory/peer ratings (Jackson & Schuler, 1985; Tubbs & Collins, 2000). Findings

from field studies on the performance effects of situational constraints are inconclusive as well. Some studies found performance deteriorating effects of situational constraints, while others did not (for a summary, cf. Jex, 1998).

There are several explanations for the lack of substantial linear relationships between stressors and job performance in field studies. First, one might assume a curvilinear relationship between stressors and performance. This would imply that the performance effects of stressors are not uniform across all degrees of stressor intensity. For example, similarly to the Yerkes-Dodson Law (1908) on the relationship between arousal and performance, performance might increase as stressors increase up to a moderate degree; when stressors become too high, however, performance might decrease. Studies which tested the assumed curvilinear relationship between stressors and performance failed to find such a relationship however (e.g., Jamal, 1985; Westman & Eden, 1996). Second, the relationship between stressors and job performance might be moderated by other variables. Such moderator variables might include individual competence (Payne, 1991) or work commitment (Jamal, 1985). However until now, empirical evidence for the existence of such moderator effects is weak (for a summary, cf. Jex, 1998). Third, the performance measures used in most of the field studies might be too global for showing a performance deterioration effect of work stressors. For example, a study by Kjellberg, Sköldström, Andersson, and Lindberg (1996) suggests that specific performance measures such as reaction times show decrements under stress in a field setting.

Fourth, possibly there is essentially no – or no large - effect of stressors on performance in field settings. This interpretation would contradict findings from laboratory studies that showed stressors to impair basic cognitive processes. However, impairment of basic cognitive processes may not necessarily translate into a decrease in overall job performance in real-life work settings. Individuals are able to compensate for the effects of stressors, for example by switching to different task strategies (Sperandio, 1971). Hockey (2000) offers an additional explanation for the inconsistency between laboratory and field study results: Many laboratory tasks are relatively simple, trivial and under-learned. If stressors occur in such a situation, study participants have little possibilities to switch to different strategies, be it because of a lack of skills in the specific task, or because of the restrictions of the laboratory setting. Real-life work tasks however, are usually well-learned and complex. If stressors occur in these real-life situations, individuals often possess the necessary skills to pursue different strategies. Moreover, in organizational settings, goal attainment has high priority. This implies that task performance must be protected, if necessary, at the expense of increased effort or neglect of subsidiary activities. Klein (1996) additionally argues that some of the cognitive strategies affected by stressors in laboratory settings play a minor role in real-life settings. For example, analytical decision strategies suffer from time pressure, but

such strategies are rarely used in naturally decision making; therefore, the negative impact of performance is limited.

There are a few studies which examined the relationship between stressors and contextual performance. For example, Motowidlo, Packard, and Manning (1986) reported negative relationships between the intensity and frequency of stressful events on the one hand and interpersonal aspects of job performance of nurses on the other hand. Kruse (1995, cited in Jex, 1998) tested whether situational constraints were related to organizational citizenship behavior (OCB) and reported negative relationships between situational constraints and three aspects of OCB. These findings suggest that in stress situations individuals assign priority to maintain task performance, at the expense of discretionary behaviors such as contextual performance. However, a longitudinal study by Fay and Sonnentag (2001) suggests that the experience of stressors at work can even have an enhancing effect on one extra-role performance - personal initiative. Similarly, Bunce and West (1994) reported that health care professionals responded with innovations to the experience of stressors at work.

Taken together, laboratory studies showed that stressors impair basic cognitive processes. However, as field studies indicate, this impairment does not necessarily result in a decrease in overall job performance. Particularly workload was found to be associated with higher job performance. These findings suggest that individuals spend more effort, prioritize the most relevant tasks and use compensatory strategies for upholding their performance under stressful situations. It remains unclear if and how such a 'performance management' strategy is associated with health or well-being effects. It might be that such an approach exhausts an individual's resources in the long run and, therefore, affects an individual's health and well-being in a negative way.

#### Stress and Other Aspects of Organizational Behavior

Organizational stress is related to low organizational commitment, high turnover rates and - under specific conditions - to increased levels of absenteeism. Organizational commitment refers to an individual's bond or link to the organization (Mowday, Porter, & Steers, 1982). It comprises attitudinal, normative, and continuance aspects (Allen & Meyer, 1990). In a meta-analysis on organizational commitment, Mathieu and Zajac (1990) reported mean weighted corrected correlations between role stressors (role overload, role conflict, role ambiguity) and various aspects of organizational commitment ranging between  $r=-.206$  and  $r=-.271$ . Thus, individuals perceiving a more stressful work situation reported lower organizational commitment.

There is clear meta-analytic evidence that work-related strains including impaired health are positively related to absence behavior (Farrell & Stamm, 1988; Martocchio, Harrison, & Berkson, 2000). However, this does not necessarily imply that stressors at work are related to absenteeism. Stressors may overlap with strain

and strain may overlap with absenteeism but strain may not be the mediator between stressors and absenteeism. A variance decomposition idea explains how such a relationship may appear. There is common variance between stressors and strain and between strain and absenteeism. But the two common variance fields do not overlap. Thus, it is that part of strain that is not related to stressors that may contribute to absenteeism. As a matter of fact, the data on the relationship between stressors and absenteeism are inconclusive. Cross-sectional studies found weak and often non-significant relationships between work stressors and absence data (Chen & Spector, 1992; Hemingway & Smith, 1999; Peter & Siegrist, 1997). Some studies revealed positive relationships between stressors and absenteeism (e.g., Kristensen, 1991), while others showed negative relationships (e.g., North, Syme, Feeney, Shipley, & Marmot, 1996).

Also longitudinal studies resulted in inconsistent findings. Tang and Hammontree (1992) found that work stress in police officers was a significant predictor of self-reported absence, also when controlling for prior absence (time lag was six months). Vahtera, Kivimäki, Pentti, and Theorell (2000) analyzed absence data from more than 500 Finnish municipal employees over a period of seven years. They found that initially healthy employees who experienced high psychological job demands in 1990 had a 21% higher risk of long absence spells (more than 3 days) than employees with low psychological job demands in 1990. For physical demands, the risk of long absence spells was even 66% higher. The experience of downsizing and perceived job insecurity also increased the risk of absence spells (Kivimäki et al., 1997).

Smulders and Nijhuis (1999) collected data on absence frequency and rate of 1755 male employees of a Dutch technical maintenance company. In their analyses, Smulders and Nijhuis controlled for employee health and absenteeism in the first year of their study. Results showed that high job demands were not associated with higher absence frequency or absence rate during the following three years. Contrary to what one might expect, high demands predicted a lower absence rate, particularly when using the Poisson regression method. Similarly, in a natural experiment (Parkes, 1982) found lower absence rates in high demand work settings.

These cross-sectional and longitudinal findings suggest that the relationship between stressful work situation and absenteeism does not follow a simple pattern. First, it might be that the relationship is contingent on moderator variables. In line with the job demand-job control model (Karasek, 1979) one might argue that job control is such a moderator. However, although there is some support for this assumption (e.g., Dwyer & Ganster, 1991) most empirical studies did not confirm the hypothesized interaction effect of job control on the demands-absenteeism relationship (Smulders & Nijhuis, 1999; Vahtera, Pentti, & Uutela, 1996).

Moreover, person factors such as organizational or professional commitment might play a role in the stressor-absenteeism relationship. It might be that in stressful work situations absenteeism increases in



employees with low commitment but decreases in highly committed employees. Data reported by Jamal (1984) partially supported this assumption. Gender might also play a role. For example, Melamed et al. (1995) found substantial correlations between objective monotony and sickness absence in women, but not in men.

Additionally, a study by Peter and Siegrist (1997) suggests that it is not the stressfulness of a situation per se that affects an employee's absence behavior. In accordance with the effort-reward-imbalance model, the authors found that status incongruence (i.e. a mismatch between effort and career achievements) was positively related with both short-term and long-term absenteeism in middle managers, while effort alone (i.e. time pressure and interruptions) was not related to absenteeism. These findings can be explained in the context of a psychological contract interpretation (Rousseau, 1995): Stressors increase absenteeism if employees feel that their efforts are not rewarded adequately. Longitudinal studies are needed which explicitly test this assumption.

Stressful work situations are positively related to turnover intentions and turnover behavior. There is rather consistent evidence from numerous studies that stressors in the work situation are positively related to intentions to quit the organization and to job search behavior (Cavanaugh, Boswell, Roehling, & Boudreau, 2000; Chen & Spector, 1992; Gupta & Beehr, 1979). With respect to actual turnover behavior, a recent meta-analysis by Griffeth, Hom, and Gaertner (2000) reported effect sizes ranging from  $\rho=.10$  to  $\rho=.21$  (corrected for measurement error in the predictors and sampling error) between stressors and turnover behavior.

Taken together, there is empirical support for the assumption that stressors in the work situation are related to low organizational commitment, turnover intentions and turnover behavior. However, with respect to organizational commitment and turnover intentions the issue of causality remains unclear. Although it makes intuitive sense to assume that experiencing a stressful work situation increases the intention to quit the organization, individuals who plan to leave the organization might perceive more stressors than their co-workers who in fact experience the same work situation but intend to stay. Longitudinal studies are needed in this area.

In general, research in this area suggests that organizational stress is not only detrimental for individuals' health and well-being. It can also harm the organization by increasing turnover rates and – possibly, although not proven – absenteeism.

## STRESS INTERVENTIONS

Stress prevention can be achieved with different sorts of programs (Ivancevich & Matteson, 1988; Murphy, 1988; Murphy, 1996; Theorell, 1993). In the USA, stress interventions are often only directed at the individual in the sense of stress management programs. In Europe, there has been a bit more emphasis on job oriented stress interventions, such as job restructuring (which increases the resources control and skills; Cooper

& Payne, 1992). Table 4 displays organizational and personal approaches to stressors, strains, and resources.

While the differentiation in various approaches is convenient, in many cases multiple approaches are combined, for example, institutional resource enhancement and individual stress-management programs (cf. Kompier, Aust, Van den Berg, & Siegrist, 2000a; Kompier, Cooper, & Geurts, 2000b).

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Insert Table 4 about here

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### Stressor Reduction

Stressors can be reduced by individuals or by institutions (or some combination). Examples for the latter are reduction of noise, change of assembly line speed in accordance with the circadian rhythm, reduction of interruptions at work. Individual stressor reduction is often an outgrowth of stress management programs that alert people to the fact that they can change certain parts in their work environment. However, individual stressor reduction often presupposes a certain amount of control over work (or in general, a certain amount of resources). Certainly, people have an impact on what the job looks like – including the stressors and the resources (Ilgen & Hollenbeck, 1991). As discussed above, we do not know of any studies, however, that have looked at how resources affect stressors or vice versa. These studies are necessary to understand how people change stressors as individuals.

Institutional stressor reduction approaches may take many different forms. A general stressor reduction approach (or better exposure time reduction) is to decrease the number of working hours which seems to have positive effects, as reported in some company reports (Kompier et al., 2000a) and in a meta-analysis (Sparks, Cooper, Fried, & Shirom, 1997). Other institutional approaches reduce specific stressors that are suspected to be problematic. For example, an organization may reduce noise, may assure a better flow of material and, thereby, reduce organizational problems, or there may be a reduction of time pressure, task ambiguity, or task difficulty. Such institutional stressor reduction approaches are useful, although problems may arise if such an approach is used singly and without combining it with other approaches: First, reducing stressors may sometimes lead to a reduction of challenges. If there is high qualitative overload, one may be tempted to reduce overload by decreasing the cognitive demands of a job. This can, however, not only reduce overload but also challenges and resources. A case in point was the effort to reduce external disturbances in secretaries by introducing central typing pools. In this case, interruptions and disturbances – stressors that secretaries frequently complain about – were reduced, but this also reduced control over how and when to do a job and a clear and reliable relationship between a secretary and her/his “boss”. Second, because technological and organizational changes are quite

frequent and increasingly rapid, research is too slow to tell us which stressors are particularly problematic and need to be taken care of. Therefore, reduction of stressors should be accompanied by an increase in resources.

#### Increase of Resources

Two important resources at work are control at work and competencies/skills. Resources in the sense of control or participation in decision making help individuals to have an influence on how to do their work and to increase or reduce stressors appropriately. Stressors that come about through new technology can best be dealt with when resources are given to influence one's work. Thus, restructuring work by increasing job content and responsibilities often has a stress preventive function as well. At least two careful studies on the effects of institutionally increasing control have been done (Jackson, 1983; Wall & Clegg, 1981). Jackson (1983) used a four group Solomon control group design to study the effects of enhanced participation (increase of group meetings) in decision making that she hypothesized to increase power, information, and social support. An increase of participation in decision making decreased emotional stress, absence frequency, and turnover intention. Wall and Clegg (1981) showed that increase in autonomy and control by introducing semi-autonomous work groups led to short and long term (12 months after the study was ended) increases in mental health. Unfortunately, this effect could not be replicated in another study (Wall, Kemp, Jackson, & Clegg, 1986).

Increasing individual competence and skills is also an aspect of resources, although it has not been typically discussed as a stress prevention technique. Without the necessary skills it is not possible to use control (Frese, 1989). Three arguments speak for the importance of competence as a resource in the stress process. First, "working smarter, not harder" is a good description of what superworkers, i.e. excellent performers do (Frese & Zapf, 1994; Sonnentag, 2000); since working smart implies using efficient rather than inefficient action strategies, this means that there is less stress when working smart. Second, it follows from the Person-Environment fit model (cf. our discussion of this model above) that people can increase the fit by developing their competence to deal with environmental demands. When a person is supposed to produce a certain amount of products, development of skills helps him or her to actually do this – the person environment fit will be high and strain low. Third, self-efficacy is intimately related to competence. Bandura (1997) has argued for the strain reducing function of self-efficacy in various domains and has shown that self-efficacy (e.g., via mastery experiences that increase the competence to deal with difficult situations) plays an important role in the strain reduction process.

An additional resource is social support (mainly by supervisors; Frese, 1999) which may be increased by management training. However, to our knowledge, strain reducing nature of management trainings has not been shown yet.

### Combination of Stressor Reduction and Increase of Resources

In general, Elkin and Rosch (1990) suggested that the following interventions can be used to decrease stress: Redesign the task and work environment, flexible work schedules, participative management, analyze work roles and establish goals, social support, cohesive teams, fair employment policies, and shared rewards. More specifically, Bunce and West (1996) showed that an approach encouraging people to innovatively deal with work stressors, led to a reduction of strain (this was also replicated by Bond & Bunce, 2000). Bunce and West's concept increased the subjective resources to deal with stressors because it encouraged innovative approaches. It is similar to the German concept of health circles (quality circles applied to health issues) that discuss stressors and work problems that can potentially lead to ill-health (Beermann, Kuhn, & Kompier, 1999; Slesina, 1994). A program on reduction of burnout with a similar element of suggesting innovative approaches to deal with the stressors has also been suggested by Van Dierendonck, Schaufeli, and Buunk (1998). They combined their approach to changing the work place with enhancing the individual's "realistic" orientation towards investments and outcomes so that the impression of equity was increased. Van Dierendonck et al. found their training to reduce emotional exhaustion, although it did not positively affect depersonalization and personal accomplishment.

### Strain Reduction

Individually oriented strain reduction programs belong to the most frequently used programs in business; as a matter of fact, in some reviews, individual strain reduction programs are the only ones discussed when presenting evidence on stress management. A large body of studies exists and reviews find clear and positive effects. Stress management programs attempt to influence employees to interpret a situation not as stressful but as a challenge. They also teach a person to improve one's coping strategies and to reduce strain (stress immunization or relaxation techniques). Since there are excellent reviews (e.g., Bamberg & Busch, 1996; Murphy, 1996; Van der Klink, Blonk, Schene, & Van Dijk, 2001), we do not need to discuss studies on stress management in detail.

Two techniques stand in the foreground (Murphy, 1996): Relaxation techniques and cognitive-behavioral techniques (cf. also Bellarosa & Chen, 1997). Relaxation is most often based on progressive muscle relaxation (Jacobson, 1938) as well as meditation and biofeedback. By and large, progressive muscle relaxation has been shown to be effective (e.g., Murphy, 1996). It is particularly effective for psychophysiological outcomes; for other outcomes, the effect size for cognitive-behavioral techniques is higher (van der Klink et al., 2001).

Cognitive behavioral techniques are based on cognitive therapy for depression (Beck, 1967; Whisman, 1998), on Rational-Emotive Therapy (Ellis, 1962), and on stress immunization or stress inoculation (Meichenbaum, 1985). Cognitive therapy has been shown to be a highly useful procedure for depressives in clinical trials (Robinson, Berman, & Neimeyer, 1990) and in stress management for working populations (Bamberg & Busch, 1996; Murphy, 1996; van der Klink et al., 2001). Most studies do not really differentiate in detail between cognitive and Rational-Emotive Therapy and a combination is usually preferred. Similar positive effects appear for Rational-Emotive Therapy. Rational-Emotive Therapy works by helping the person to use rational self-instructions. For example, a person might have a tendency to exaggerate a given stress situation and catastrophize when something went wrong. Alternative self-instructions are then trained (for example, it is not catastrophic if something goes wrong, because mistakes happen to most people). Stress inoculation training is “designed to impart skills to enhance resistance to stress” and its objective is “to prepare the individual to respond more favorably to negative stress events.” (Saunders, Driskell, Johnston, & Salas, 1996, p. 171). Stress inoculation works via three phases: First, conceptualization and education, second, skill acquisition and rehearsal, and, third, application and follow-through (Saunders et al., 1996). The first phase – conceptualization and education – teaches people to have a more sophisticated view of the nature of stress. Second – acquisition and rehearsal – provides a stronger repertoire of coping skills and rehearses them either in vivo (e.g., role-play) or in guided imagery. Third – application and follow-through – works also via role play and guided imagery to deal with the real life threats and stressors. A meta-analysis of 37 studies showed that performance anxiety was strongly affected ( $r=.509$ ), state anxiety was also affected ( $r=.373$ ) and, finally, there was also a positive performance effect ( $r=.296$ ) (Saunders et al., 1996).

One meta-analysis of 16 work-related stress management studies found an average effect size of 0.41 (Bamberg & Busch, 1996). A second more recent meta-analysis (Van der Klink et al., 2001) found somewhat different effect sizes for 18 cognitive-behavioral studies ( $d=.68$ ), 17 relaxation studies ( $d=.35$ ), and 8 so-called multimodel approaches (acquisition of passive and active coping skills) ( $d=.51$ ). Thus, stress management programs increase health by about a half of a standard deviation. The study by Murphy (1996) corroborates these results by showing that published reports on 64 stress management interventions show on average between 59% (for job/organizational outcome measures) and 68% (for physiological and biochemical outcome variables) positive and significant results. Further, those interventions that used a combination of approaches (e.g., relaxation and cognitive-behavioral techniques) tended to lead to the best results. Murphy (1996) and van der Klink et al. (2001) also reported results to be better for more “disturbed” individuals and for remedial interventions than for normal employees or preventive approaches. This implies that clinical studies show better

results than stress management trainings for unselected working populations. An additional constraint of most stress management programs is that they presuppose that the employees can actually do something about their stress level (i.e. have at least some measure of control at work). Employees with a high degree of control at work and with higher status jobs showed better success of stress management interventions than low control/low status job employees (van der Klink, et al., 2001). For this reason, stress management programs are probably less useful for blue collar workers than for white collar workers and managers.

Thus, in general, a positive picture on stress management programs appears. However, a number of caveats are in order: First, it is quite plausible that negative or zero effects do not find their way into the journals (Murphy, 1996). Second, the better studies with randomized control groups showed a lower degree of success than the studies without a control group (Murphy, 1996). Finally, reviews find clear non-specific effects; this points to the importance of using control groups in stress intervention studies. For these reasons, a certain degree of skepticism has to prevail. On the positive side, stress management programs are often effective to increase life expectancy, for example, if given to heart disease patients (34% reduction in cardiac mortality; Dusseldorp, Van Elderen, Maes, Meulman, & Kraaij, 1999).

Digressing somewhat from the general theme of strain reduction, it is useful to look at Van der Klink et al.'s (2001) comparison of individual stress management approaches to organizational changes with the aim to reduce stress and increase resources. Organizational changes had a non-significant effect size which was significantly lower than the effect size for individually oriented approaches. Unfortunately, they could only include 5 samples from 4 organizational intervention studies; these studies showed widely differing effect sizes from a negative effect size of  $-.20$  (Landsbergis & Vivona-Vaughan, 1995) to a positive effect size of  $.50$  (Jones et al., 1988). Moreover, there was one study which had 1375 participants (Heaney, Price, & Rafferty, 1995) while the other studies included only very small groups of participants. Thus, the field of organizational intervention does not provide sufficient data yet to make a meta-analysis feasible. Moreover, it is necessary to study moderators of the effect; for example, Landsbergis and Vivona-Vaughan (1995) explained their negative effects with lack of management commitment to stress management and with obstacles in the implementation of the intervention strategies.

An institutional approach to reducing strain is to provide rest periods. While, stress management is a modern topic and full of new research, the study of rest periods is an "old" topic with only a few studies appearing each year (Graf, Rutenfranz, & Ulich, 1970). It is well-known that the recovery is fastest after short periods of work and that the first few minutes of a rest period are most important for recovery. Graf (1970) suggests, therefore, that 5% of the work time should be taken as rest periods. Since rest periods are anticipated,

performance is higher, if there are rest periods (Graf, 1970). Therefore, there is usually no decrement in overall performance in spite of the time needed for rest periods (Galinsky, Swanson, Sauter, Hurrell, & Schleifer, 2000; Graf, 1970). At the same time, stress effects are smaller when rest periods are interspersed in work (Galinsky et al., 2000). There is evidence in the literature that rest periods should be organizationally prescribed and supervised but should not be self-taken (concealed breaks) since people tend to take less frequent and too short rest periods when left to their own decisions (Graf, 1970; Henning, Sauter, Salvendy, & Krieg, 1989). Employees also want to cluster rest periods and add them at the end or at the beginning of the work-day rather than interspersing them into their work day at regular intervals. We think that the issue of rest periods should be taken more seriously again in the literature on stress interventions than is true at the moment.

Additionally to strain reduction programs individuals may initiate strain reduction by themselves during vacation and other leisure time periods (for a recent review on 'respite' from work cf. Eden, 2001). Research has shown that during vacations burnout decreases, particularly when an individual is satisfied with his or her vacations (Westman & Eden, 1997). Researchers even reported that military reserve service results in a decline in burnout and that psychological detachment from work increased this effect (Etzion, Eden, & Lapidot, 1998). Similarly, leisure time activities pursued during evenings of normal workdays can reduce strain. For example, a diary study revealed that specific activities such as low-effort activities, physical and social activities had a positive impact on a person's well-being, while work-related activities performed during 'leisure time' had a negative impact (Sonnentag, in press-b). These studies suggest that psychological detachment from work during vacation or leisure time periods is crucial for strain reduction to occur.

#### Life Style Changes

Individually oriented life style change programs attempt to improve diet, to support healthy living (e.g. reducing alcohol and tobacco consumption), and to increase physical exercise. Employee Assistance Programs (EAP) are a case in point; they often target alcoholism or other addiction, but they can also be broad based and include exercise and stress management programs; they showed a tremendous growth in companies during the 70s and 80s (Matteson & Ivancevich, 1987). Breslow and Enstrom (1980) have shown that men who used seven positive habits (sleeping seven to eight hours, eating breakfast almost every day, never or rarely eating between meals, being near height-adjusted weight, never smoking, moderate or no use of alcohol, and regular physical activity) had a lower mortality rate across 10 years than those who followed zero to three practices. Exercise and health promoting programs at work have been quite successful in decreasing anxiety (Long & Van Stavel, 1995), in reducing cardiovascular mortality after myocardial infarction (O'Connor et al., 1989), and in enhancing general well-being (Ivancevich & Matteson, 1988). A dramatic example of the success of a wellness program for

cardiovascular fitness is the one used by the New York Telephone Company which saved the organization \$2.7 million in reduced absenteeism and treatments costs in one year alone (Cartwright, Cooper, & Murphy, 1995). More specific psychological programs, for example, towards the coronary prone Type A Behavior pattern, also proved to be effective in reducing coronary recurrences (Nunes, & Kornfeld, 1987).

Surprisingly, institutional approaches, such as building architecture, have not been studied to our knowledge as potential stress interventions. Office buildings may make it easier or harder to use the stairs, for example, by making either the staircase or the lift salient. It is surprising, that a relatively small amount of daily physical activities, such as walking stairs, walking to work, doing small errands on foot, or bicycling to work, have an enormously positive effect on mortality ratios. An example is the study by Pfaffenberger, Hyde, Wing, and Hsieh (1986) who showed that people using up 500 to 2000 kcal per week have a reduced mortality rate within the 16 years of study in comparison to men who do not do any physical exercises. The reduced mortality rate was even more pronounced for those using 2000 kcal per week. Burning 2000 kcal per week is equivalent to walking, for example, 35 km per week or climbing three flights of stairs 70 times per week. This speaks for the importance of encouraging light sports in the office building by building adequate, aesthetic, and salient staircases and by encouraging employees to use the stairs.

#### Conclusion on Stress Interventions

Taken together, the literature on stress intervention concepts and studies suggests a number of conclusions. First, stress intervention studies go under very different names and are presented in very different disciplines and journals. Stress management studies are done by clinicians or clinical work psychologists and are mainly published in the *Journal of Occupational Health Psychology* or the *International Journal of Stress Management*. Life style changes are reported in sports psychology and in medical journals. Rest period studies appear in human factors journals, mainly *Ergonomics* and new technology journals. Stressor reduction and resource enhancement is done by job enrichment and job design professionals and appear in, *Academy of Management Journal*, *Human Relations* and other outlets. Social resource enhancement, for example, social support increase is really part of teaching management skills and appear, for example, in *Leadership Quarterly*. Obviously many articles also appear in the more general journals, such as *Journal of Applied Psychology*, *Journal of Organizational Behavior* and *Applied Psychology: An International Review*; we think that it pays to pull these diverse areas together and gain by using theories across different intervention domains. The best developed areas of stress interventions are rest periods (although the literature in this area is quite old), stress management techniques, and life style changes. These areas are easier to study because they can be studied experimentally (particularly, rest periods), and only imply changes of individuals. Organizational approaches



have been studied much less frequently because they are more difficult to study, there is a need to look at moderators (e.g., how well is the program supported by management and how well is it implemented) and these studies are much more risky as many aspects can not be controlled by the change agent.

Second, nearly every review of the field speaks about the importance of doing more studies in the area of organizational changes. We can only repeat this call. Most authors assume that it makes sense to combine structural and institutional changes with individually oriented approaches at least for blue collar workers (e.g., Bamberg & Busch, 1996; Ivancevich, Matteson, Freedman, & Phillips, 1990; Kompier et al., 2000b; Murphy, 1996).

Third, practically every review on stress intervention techniques has called for better designed studies in this area. Since there seems to be a relationship between effect of study and its design (Murphy, 1996), this issue needs to be taken seriously. Undoubtedly, better research has been done within the last 15 to 20 years, particularly in the area of stress management and life style changes.

Forth, one issue of improving design is related to the fact that there are non-specific effects of stress management. A no-treatment control groups does not actually account for unspecific effects; it is, therefore, necessary to include pseudo-treatment control into designs since purely thinking about stress at work and self-reflecting may actually enhance health outcomes as well.

Fifth, most studies only look at short term changes while we need to be able to produce long term changes with stress interventions. Both in the areas of job interventions and in stress management, there are hypotheses in the literature that the effects are mainly short term.

Sixth, by and large, more process oriented research on stress interventions needs to be done (Bunce, 1997). This can be done by developing manuals, checking how much trainers conform to the theoretically proposed procedures, how much of the effect was due to the specific program and how much it was due to general effects. Good examples for such an approach exist in the clinical psychology, particularly cognitive therapy approaches to depression (e.g., Castonguay, Hayes, Goldfried, & DeRubeis, 1995; Hollon, DeRubeis, & Evans, 1987; DeRubeis et al., 1990).

Seventh, research on respites from work stress is a promising area of research (Eden, 2001). More studies are needed that examine the specific feature, predictors as well as short- and long-term consequences of successful respite periods.

Eighth, some authors have confronted emotion focused versus problem focused approaches of stress interventions (e.g., Bond & Bunce, 2000). We agree with Keinan and Friedland (1996; p. 269) that a simple comparison cannot be made and leads to inconclusive results and that the following issues need to be considered:

(a) emotion focused strategies may be better in situations which allow little control and other resources; (b) the long term effectiveness of emotion focused strategies may be lower than the one for problem focused approaches; (c) a combination of emotion and problem focused strategies is probably superior to either one of them alone.

Finally, more research is needed that pits different approaches against each other. One of the most important issues is whether there are general and specific effects of an intervention (Bunce, 1997; Murphy, 1996). Trainer characteristics also need to be studied more frequently. For example, one study surprisingly showed less well-trained trainers to be more effective in stress management than experienced trainers (Saunders et al., 1996). Another surprising finding of the meta-analysis by van der Klink et al. (2001), that needs to be studied in more detail, is that there is an inverse relationship between number of sessions and effect size.

### OVERALL CONCLUSIONS

Empirical research summarized in this chapter shows that organizational stress has detrimental effects on individual health and well-being. Moreover, stress interventions, particularly those aimed at individual stress management have been found to have beneficial effects.

Researchers have criticized past empirical studies on organizational stress for their methodological shortcomings (Frese & Zapf, 1988; Kasl, 1978; Sullivan & Bhagat, 1992). During the past decade, an increasing number of studies followed a more rigorous research methodology (e.g, objective measures of stressors, longitudinal designs, test of curvilinear effects). We are convinced that this improved methodology has contributed to substantial progress within organizational stress research. Specifically, we observed progress with respect to the following issues:

First, objective stressors – and not just the perception of stressors – are related to indicators of poor health and well-being. This implies that the well-documented empirical relationship between stressors and strains can not be fully explained by common method variance and overlap in content between independent and dependent variables.

Second, stressors have a causal effect on health and well-being with concurrent effects being stronger than lagged effects. There are additional reverse effects of strains on stressors. However, they seem to be relatively weak.

Third, resources are important for an individual's health and well-being. The main effects of resources such as control at work, social support, and self-efficacy are stronger than their buffer effects.

Forth, there are curvilinear effects of stressors on strains. However, it seems that compared to the linear effects, these curvilinear effects are of minor importance.

Fifth, better designed studies with objective measures report smaller correlations than studies with subjective measures (cf. also Zapf et al., 1996). It may appear that this points to actually low impact rates of stressors on strain and that the effect of stressors at work is rather small. We think that this would be a mistake (Frese & Zapf, 1988) because (a) no study ever measures all stressors at work; (b) objective measures of stressors underestimate the relationship between stressors and strains because observers' errors decrease the correlations; (c) strain is caused by many factors (stressors at work, biological and psychological predisposition, stressors outside work, etc.) – every one of them can only have a certain amount of influence; (d) there is a selection effect of most studies on stress at work (healthy workers effect) because ill people have a lower probability to be in the sample; (e) there are moderators that may increase the relationships; (f) finally, low correlations often appear to be of less practical importance than is actually the case as shown by Abelson (1985), Frese (1985) and Rosenthal and Rubin (1982).

Sixth, there are some studies that use natural experiments in stress research (e.g., Parkes, 1982). Kasl (1978) has called for more studies making use of natural experiments and we can only repeat it here again.

As a whole, the recent advancements made in organizational stress research demonstrate that it pays to invest in a better research methodology. However, to make real progress in a field it is not sufficient to focus only research methodology. It is necessary, to also invest in theory development and to make sure to address the most relevant research questions (Brief & George, 1995). For deepening the understanding of the process of how and when organizational stress impacts the individual and the larger organization we suggest the following avenues for future research:

First, there is a clear need for a direct comparison between competing theoretical models. Such comparisons are still very rare (cf. for an exception, de Jonge et al., 2000). Such comparisons will be helpful for advancing theory about organizational stress because they will show which specific assumptions within one model make it superior to a competing model.

Second, researcher should pay more attention to the impact of specific stressors and specific resources on specific strains. Such a specificity hypothesis (Broadbent, 1985) implies that specific stressors are related to specific symptoms, but not to others. Empirical tests of this hypothesis are still rare (Hesketh & Shouksmith, 1986; Steen, Firth, & Bond, 1998). For a resource to be effective as a stress buffer it is crucial that the resource matches the specific requirements of the stressor (Cohen & Wills, 1985). Here, researchers have to specify more explicitly which resources are most helpful in a specific stressful situation.

Third, aspects of time should be taken much more seriously within organizational stress research. When studying the effects of stressors longitudinally, researchers should pay more attention to the time lags between the first and subsequent measurement points. Until now it seems that the time lags have been chosen rather arbitrarily or for convenience reasons. As the Dormann and Zapf (1999) study illustrated, some effects are found only for a limited set of time lags. Researchers need to spell out more clearly within which time frame they expect specific strain symptoms to develop. Frese and Zapf (1988) have differentiated the following models based on time and stress exposure effects: (a) stress reaction model that implies an ill-health reaction to the stressor which is reduced when the stressor is reduced; (b) accumulation model: the effect is not reduced even if the stressor no longer present; (c) dynamic accumulation model: the effects increase ill-health even further even when individuals are no longer exposed to the stressors; (d) adjustment model: people learn to cope with the stressor and ill-health is reduced even though they are still exposed to the stressors; (e) sleeper effect model: the ill-health appears after the stressor disappears as in the case of post traumatic stress disorder. We think that it is useful to explicitly test different models taking into consideration exposure time and differential timing effects (cf. also Garst et al., 2000).

Fourth, more attention to time aspects is also necessary when testing interaction effects. It is necessary to examine in more detail at which point in time in the stress process resources are most helpful. For example, resources might act as powerful stress buffers only early in the stress process.

Fifth, researchers should explicitly address the mediating processes in the stressor-strain relationship. This refers both to mediators at the physiological level and to mediators at the emotional and cognitive level, i.e. appraisals.

Sixth, there should be more studies on stress and performance. Laboratory studies suggest that stressors have a negative effect on basic cognitive processes. However, in field study settings, the effects of stressors on job performance are less obvious. It seems that individuals uphold their performance by increasing effort. This increased work effort might have detrimental long-term effects on health and well-being, however. Interestingly, there are only a few field studies which simultaneously examined the effects of stressors on performance and on health and well-being. Research on the health effects of organizational stress and research on the performance effects of organizational stress are separate research areas, particularly in field studies. By focussing exclusively on health and well-being or on performance effects researchers get to know only one side of the coin. We suggest to further advance organizational stress research by looking simultaneously at the impact of stressors on performance and health and well-being. Such studies could identify the health and well-being costs of upholding high performance in stressful situations. Moreover, such studies could shed light on the performance

requirements under which strain symptoms occur. It is also useful to address the role of resources by examining which resources let people uphold performance without impairing health and well-being.

Taken together, organizational stress research has benefitted from methodologically more sophisticated studies. It has become obvious that organizational stress affects individual health and well-being in a negative way. Individuals however, have a broad range of ways of dealing with stress so that both their health and performance do not suffer necessarily. Despite this research progress there remain many questions to be answered by future research.

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## REFERENCES

- Abelson, R. P. (1985). A variance explanation paradox: When a little is a lot. Psychological Bulletin, *97*, 129-133.
- Aiken, L. S., & West, S. G. (1991). Multiple regression: Testing and interpreting interactions. Newbury Park, CA: Sage.
- Allen, N. J., & Meyer, J. P. (1990). The measurement of antecedents of affective, continuance and normative commitment to the organization. Journal of Occupational Psychology, *63*, 1-18.
- Andrews, F. M., & Farris, G. F. (1972). Time pressure and performance of scientists and engineers: A five-year panel study. Organizational Behavior and Human Performance, *8*, 185-200.
- Antonovsky, A. (1991). The structural sources of salutogenic strengths. In C. L. Cooper & R. Payne (Eds.), Personality and stress: individual differences in the stress process (pp. 67-104). Chichester: Wiley.
- Aronsson, G., & Rissler, A. (1998). Psychophysiological stress reactions in female and male urban bus drivers. Journal of Occupational Health Psychology, *3*, 122-129.
- Baddeley, A. D. (1972). Selective attention and performance in dangerous environments. British Journal of Psychology, *63*, 537-546.
- Bakker, A. B., & Schaufeli, W. B. (2000). Burnout contagion processes among teachers. Journal of Applied Social Psychology, *30*, 2289-2308.
- Bakker, A. B., Schaufeli, W. B., Sixma, H. J., Bosveld, W., & van Dierendonck, D. (2000). Patient demands, lack of reciprocity, and burnout: A five-year longitudinal study among general practitioners. Journal of Occupational Behavior, *21*, 425-441.
- Bamberg, E., & Busch, C. (1996). Betriebliche Gesundheitsförderung durch Streßmanagementtraining: Eine Metaanalyse (quasi-)experimenteller Studien. Zeitschrift für Arbeits- und Organisationspsychologie, *40*, 127-137.
- Bandura, A. (1997). Self-efficacy: The exercise of control. New York: Freeman and Co.
- Barnett, R. C., & Brennan, R. T. (1997). Change in job conditions, change in psychological distress, and gender: a longitudinal study of dual-earner couples. Journal of Organizational Behavior, *18*, 253-274.
- Beck, A. T. (1967). Depression: causes and treatment. Philadelphia, Pennsylvania: University of Pennsylvania Press.
- Beehr, T. A. (1995). Psychological stress in the workplace. New York: Routledge.
- Beehr, T. A. (1998). Research on occupational stress: an unfinished enterprise. Personnel Psychology, *51*, 835-844.

Beehr, T. A., Jex, S. M., Stacy, B. a., & Murray, M. A. (2000). Work stressors and coworker support as predictors of individual strain and job performance. Journal of Organizational Behavior, 21, 391-405.

Beehr, T. A., & Newman, J. E. (1978). Job stress, employee health, and organizational effectiveness: A facet analysis , model, and literature review. Personnel Psychology, 31, 665-699.

Beermann, B., Kuhn, K., & Kompier, M. A. J. (1999). Germany: Reduction of stress by health circles. In M. A. J. Kompier & C. L. Cooper (Eds.), Preventing stress, improving productivity: European case studies in the workplace (pp. 222-241). London: Routledge.

Begley, T. M., & Czajka, J. M. (1993). Panel analysis fo the moderating effects of commitment on job satisfaction, intent to quit, and health following organizational change. Journal of Applied Psychology, 78, 552-556.

Bellarosa, C., & Chen, P. Y. (1997). The effectiveness and practicality of occupational stress management interventions: A survey of subject matter expert opinions. Journal of Occupational Health Psychology, 2, 247-262.

Bhagat, R. S., & Allie, S. M. (1989). Organizational stress, personal life stress, and symptoms of life strains: An examination of the mdoerating role of sense of competence. Journal of Vocational Behavior, 35, 231-253.

Bliese, P. D., & Britt, T. W. (2001). Social support, group consensus and stressor-strain relationships: social context matters. Journal of Organizational Behavior, 22, 425-436.

Bond, F. W., & Bunce, D. (2000). Mediators of change in emotion-focused and problem-focused worksite stress management interventions. Journal of Occupational Health Psychology, 5, 156-163.

Bongers, P. M., de Winter, C. R., Kompier, M. A. J., & Hildebrandt, V. H. (1993). Psychosocial factors at work and musculoskeletal diseases. Scandinavian Journal of Work Environment and Health, 19, 297-312.

Borman, W. C., & Motowidlo, S. J. (1993). Expanding the criterion domain to include elements of contextual performance. In N. Schmitt & W. Borman (Eds.), Personnel selection in organizations (pp. 71-98). New York: Jossey-Bass.

Bosma, H., Peter, R., Siegrist, J., & Marmot, M. (1998). Two alternative job stress models and the risk of coronary heart disease. American Journal of Public Health, 88, 68-74.

Breslow, L., & Enstrom, J. E. (1980). Persistence of health habits and their relationship to mortality. Preventive Medicine, 9, 469-483.

Brief, A. P., & George, J. M. (1995). Psychological stress and the workplace: A brief comment on Lazarus' outlook. In R. Crandall & P. L. Perrewé (Eds.), Occupational stress. A handbook (pp. 15-19).

Washington, DC: Taylor & Francis.

Broadbent, D. E. (1985). The clinical impact of job design. British Journal of Clinical Psychology, *24*, 33-44.

Bromet, E. J., Dew, M. A., Parkinson, D. K., & Schulberg, H. C. (1988). Predictive effects of occupational and marital stress on the mental health of a male workforce. Journal of Organizational Behavior, *9*, 1-13.

Bunce, D. (1997). What factors are associated with the outcome of individual-focused worksite stress management interventions? Journal of Occupational and Organizational psychology, *70*, 1-17.

Bunce, D., & West, M. (1994). Changing work environments: innovative coping responses to occupational stress. Work and Stress, *8*, 319-331.

Bunce, D., & West, M. A. (1996). Stress management and innovation at work. Human Relations, *49*, 209-232.

Campbell, J. P., McCloy, R. A., Oppler, S. H., & Sager, C. E. (1993). A theory of performance. In E. Schmitt, W. C. Borman, & Associates (Eds.), Personnel selection in organizations (pp. 35-70). San Francisco: Jossey-Bass.

Carayon, P. (1993). A longitudinal test of Karasek's job strain model among office workers. Work and Stress, *7*, 299-314.

Carter, S. M., & West, M. A. (1998). Reflexivity, effectiveness, and mental health in BBC-TV production teams. Small Group Research, *29*, 583-601.

Carter, A. J., & West, M. A. (1999). Sharing the burden - teamwork in health care settings. In R. I. Payne & J. Firth-Cozens (Eds.), Stress in health professionals: Psychological and organisational issues (pp. 191-202). Chichester: Wiley.

Cartwright, S., Cooper, C. L., & Murphy, L. R. (1995). Diagnosing a healthy organization: A proactive approach to stress in the workplace. In L. R. Murphy, J. J. J. Hurrell, S. L. Sauter, & C. W. Puryear Keita (Eds.), Job stress interventions. Washington, D.C.: American Psychological Association.

Carver, C. S., & Scheier, M. F. (1982). Control theory: A useful conceptual framework for personality-social, clinical, and health psychology. Psychological Bulletin, *92*, 111-135.

Castonguay, L. G., Hayes, A. M., Goldfried, M. R., & DeRubeis, R. J. (1995). The focus of therapist interventions in cognitive therapy for depression. Cognitive Therapy & Research, *19*, 485-503.



- Cavanaugh, M. A., Boswell, W. R., Roehling, M. V., & Boudreau, J. W. (2000). An empirical examination of self-reported work stress among U.S. managers. Journal of Applied Psychology, *85*, 65-74.
- Chapman, A., Mandryk, J. A., Frommer, M. S., Edye, B. V., & Ferguson, D. A. (1990). Chronic perceived work stress and blood pressure among Australian government employees. Scandinavian Journal of Work, Environment and Health, *16*, 258-269.
- Chen, P. Y., & Spector, P. E. (1992). Relationships of work stressors with aggression, withdrawal, theft and substance use: An exploratory study. Journal of Occupational and Organizational Psychology, *65*, 177-184.
- Cohen, S., & Edwards, J. R. (1989). Personality characteristics as moderators of the relationship between stress and disorder. In R. W. J. Neufeld (Ed.), Advances in the investigation of psychological stress (pp. 235-283). New York: Wiley.
- Cohen, S., & Syme, S. L. (1985). Social support and health. New York: Academic Press.
- Cohen, S., & Wills, T. A. (1985). Stress, social support, and the buffering hypothesis. Psychological Bulletin, *98*, 310-357.
- Cooper, C. (Ed.). (1998). Theories of organizational stress. New York: Oxford University Press.
- Cooper, C. L., Liukkonen, P., & Cartwright, S. (1996). Stress prevention in the workplace: Assessing the costs and benefits to organisations. Dublin (Ireland): European Foundation for the Improvement of Living and Working Conditions.
- Cooper, C. L., & Payne, R. L. (1992). International perspectives on research into work, well-being, and stress management. In J. C. Quick, L. R. Murphy, & J. J. Hurrell (Eds.), Stress and well-being at work (pp. 348-368). Washington: American Psychological Association.
- Corneil, W., Beaton, R., Murphy, S., Johnson, C., & Pike, K. (1999). Exposure to traumatic incidents and prevalence of posttraumatic stress symptomatology in urban firefighters in two countries. Journal of Occupational Health Psychology, *4*, 131-141.
- Cox, T., Griffiths, A., & Rial-González, E. (2000). Research on work-related stress. Luxembourg: European Agency for Safety and Health at Work.
- Cummings, T., & Cooper, C. L. (1979). A cybernetic theory of occupational stress. Human Relations, *32*, 395-418.
- Cummings, T. G., & Cooper, C. L. (1998). A cybernetic theory of organizational stress. In C. L. Cooper (Ed.), Theories of organizational stress (pp. 101-121). New York: Oxford University Press.
- Daniels, K. (1999). Coping and the job demands-control-support model: An exploratory study. International Journal of Stress Management, *6*, 125-144.

Daniels, K., & Guppy, A. (1994). Occupational stress, social support, job control, and psychological well-being. Human Relations, *47*, 1523-1544.

Danna, K., & Griffin, R. W. (1999). Health and well-being in the workplace: A review and synthesis on the literature. Journal of Management, *25*, 357-384.

De Croon, E. M., Van der Beek, A. J., Blonk, R. W. B., & Frings-Dresen, M. H. W. (2000). Job stress and psychosomatic health complaints among Dutch truck drivers: A re-evaluation of Karasek's interactive job demand-control model. Stress Medicine, *16*, 101-107.

de Jonge, J., Bosma, H., Peter, R., & Siegrist, J. (2000). Job strain, effort-reward imbalance and employee well-being: a large-scale cross-sectional study. Social Science and Medicine, *50*, 1317-1327.

de Jonge, J., & Schaufeli, W. B. (1998). Job characteristics and employee well-being: a test of Warr's Vitamin Model in health care workers using structural equation modelling. Journal of Organizational Behavior, *19*, 387-407.

de Rijk, A. E., Le Blanc, P. M., Schaufeli, W. B., & de Jonge, J. (1998). Active coping and need for control as moderators of the job demand-control model: Effects on burnout. Journal of Occupational and Organizational Psychology, *71*, 1-18.

DeRubeis, R. J., Evans, M. D., Hollon, S. D., Garvey, M. J., Grove, W. M., & Tuason, V. B. (1990). How does cognitive therapy work? Cognitive change and symptom change in cognitive therapy and pharmacotherapy for depression. Journal of Consulting and Clinical Psychology, *58*, 862-869.

Doby, V. J., & Caplan, R. D. (1995). Organizational stress as threat to reputation: Effects on anxiety at work and at home. Academy of Management Journal, *38*, 1105-1123.

Dollard, M. F., Winefield, H. R., Winefield, A. H., & deJonge, J. (2000). Psychosocial job strains and productivity in human service workers: A test of the demand-control-support model. Journal of Occupational and Organizational Psychology, *73*, 501-510.

Dormann, C., & Zapf, D. (1999). Social support, social stressors at work, and depressive symptoms: testing for main and moderating effects with structural equations in a three-wave long-itudinal study. Journal of Applied Psychology, *84*, 874-884.

Dusseldorp, E., Van Elderen, T., Maes, S., Meulman, J., & Kraaij, V. (1999). A meta-analysis of psychoeducational programs for coronary heart disease patients. Health Psychology, *18*, 506-519.

Dwyer, D. J., & Ganster, D. C. (1991). The effects of job demands and control on employee attendance and satisfaction. Journal of Organizational Behavior, *12*, 595-608.

- Eden, D. (2001). Vacations and other respites: Studying stress on and off the job. In C. L. Cooper & I. T. Robertson (Eds.), International review of industrial and organizational psychology. Chichester: Wiley.
- Edmondson, A. (1999). Psychological safety and learning behavior in work teams. Administrative Science Quarterly, 44, 350-383.
- Edwards, J. R. (1991). Person-job fit: A conceptual integration, literature review, and methodological critique. In C. L. Cooper & I. T. Robertson (Eds.), International review of industrial and organizational psychology (pp. 283-357). Chichester: Wiley.
- Edwards, J. R. (1992). A cybernetic theory of stress, coping, and well-being in organizations. Academy of Management Review, 17, 238-274.
- Edwards, J. R. (1995). Alter natives to difference scores as dependent variables in the study of congruence in organizational research. Organizational Behavior and Human Decision Processes, 64, 307-324.
- Edwards, J. R. (1996). An examination of competing versions of the person-environment fit approach to stress. Academy of Management Journal, 39, 292-339.
- Edwards, J. R. (1998). Cybernetic theory of stress, coping, and well-being. In C. L. Cooper (Ed.), Theories of organizational stress (pp. 122-152). Oxford: Oxford University Press.
- Edwards, J. R., & Harrison, R. V. (1993). Job demands and worker health: Three-dimensional re-examination of the relationship between person-environment fit and strain. Journal of Applied Psychology, 78, 626-648.
- Elkin, A. J., & Rosch, P. J. (1990). Promoting mental health at the workplace: The prevention side of stress management. Occupational Medicine: State of the Art Review, 5, 739-754.
- Ellis, A. (1962). Reason and emotion in psychotherapy. New York: Lyle Stuart.
- Elsass, P. M., & Veiga, J. F. (1997). Job control and job strain: A test of three models. Journal of Occupational Health Psychology, 2, 195-211.
- Eriksen, H. R., & Ursin, H. (1999). Subjective health complaints: is coping more important than control? Work and Stress, 13, 238-252.
- Etzion, D., Eden, D., & Lapidot, Y. (1998). Relief from job stressors and burnout: Reserve service as a respite. Journal of Applied Psychology, 83, 577-585.
- Farrell, D., & Stamm, C. L. (1988). Meta-analysis of the correlates of employee absence. Human Relations, 41, 211-227.
- Fay, D., & Sonnentag, S. (2001). Stressors and personal initiative: A study on organizational behavior. Manuscript submitted for publication.

Fletcher, B. C. (1991). Work, stress, disease and life expectancy. Chichester: Wiley.

Folkman, S., Lazarus, R. S., Dunkel-Schetter, C., DeLongis, A., & Gruen, R. (1986). The dynamics of a stressful encounter: Cognitive appraisal, coping, and encounter outcomes. Journal of Personality and Social Psychology, *50*, 992-1003.

Fox, M. L., Dwyer, D. J., & Ganster, D. C. (1993). Effects of stressful job demands and control on physiological and attitudinal outcomes in a hospital setting. Academy of Management Journal, *36*, 289-318.

Frankenhaeuser, M. (1981). Coping with stress at work. International Journal of Health Services, *11*, 491-510.

Frankenhaeuser, M., & Johansson, G. (1976). Task demand as reflected in catecholamine excretion and heart rate. Journal of Human Stress, #, 15-23.

Frankenhaeuser, M. (1979). Psychoneuroendocrine approaches to the study of emotion as related to stress and coping. In R. A. Dienstbier (Ed.), Nebraska Symposium on Motivation 1978 (pp. 123-161). Lincoln: University of Nebraska Press.

French, J. R. P. J., Caplan, R. D., & Harrivision, R. V. (1982). The mechanisms of job stress and strain. Chichester: Wiley.

Frese, M. (1985). Stress at work and psychosomatic complaints: A causal interpretation. Journal of Applied Psychology, *70*, 314-328.

Frese, M. (1989). Theoretical models of control and health. In S. L. Sauter, J. J. H. Jr., & C. L. Cooper (Eds.), Job control and worker health (pp. 107-128). Chichester: Wiley.

Frese, M. (1993). Stress factors and health: A multicausal relationship. Paper presented at the work and health: Scientific basis of progress in the working environment . Copenhagen.

Frese, M. (1999). Social support as a moderator of the relationship between work stressors and psychological dysfunctioning: A longitudinal study with objective measures. Journal of Occupational Health Psychology, *4*, 179-192.

Frese, M., & Zapf, D. (1988). Methodological issues in the study of work stress: Objective vs. subjective measurement and the question of longitudinal studies. In C. L. Cooper & R. Payne (Eds.), Causes, coping, and consequences of stress at work (pp. 375-411). New York: Wiley.

Frese, M., & Zapf, D. (1994). Action as the core of work psychology: A German approach. In H. C. Triandis, M. D. Dunnette, & L. M. Hough (Eds.), Handbook of industrial and organizational psychology (Second ed., Vol. 4, pp. 271-340). Palo Alto, CA: Consulting Psychologists Press.

Frese, M., & Zapf, D. (1999). On the importance of the objective environment in stress and attribution theory. Counterpoint to Perrewé and Zellars. Journal of Organizational Behavior, *20*, 761-765.

Furda, J., de Jonge, J., Le Blanc, P., Meijman, T., Schreurs, P., & Scheenen, J. (1994). Het Demand-control-support model in relatie tot gezondheidsklachten en herstelklachten. Gedrag en Organisatie, *7*, 225-238.

Galinsky, T. L., Swanson, N. G., Sauter, S. L., Hurrell, J. J., & Schleifer, L. M. (2000). A field study of supplementary rest breaks for data-entry operators. Ergonomics, *43*, 622-638.

Ganster, D. C., & Schaubroeck, J. (1991). Work stress and employee health. Journal of Management, *17*, 235-271.

Ganster, D. C., Schaubroeck, J., Sime, W. E., & Mayes, B. T. (1991). The nomological validity of the Type A personality among employed adults. Journal of Applied Psychology, *76*, 143-168.

Garst, H., Frese, M., & Molenaar, P. C. M. (2000). The temporal factor of change in stressor-strain relationships: A growth curve model on a longitudinal study in East Germany. Journal of Applied Psychology, *85*, 417-438.

Glaser, D. M., Tatum, B. C., Nebeker, D. M., Sorenson, R. C., & Aiello, J. R. (1999). Workload and social support: Effects on performance and stress. Human Performance, *12*, 155-176.

Glass, D. C., & McKnight, J. D. (1996). Perceived control, depressive symptomatology, and professional burnout: A review of the evidence. Psychology and Health, *11*, 23-48.

Glickman, L., Tanaka, J. S., & Chan, E. (1991). Life events, chronic strain, and psychological distress: Longitudinal causal models. Journal of Community Psychology, *19*, 283-305.

Goetzel, R. Z., Anderson, D. R., Whitmer, R. W., Ozminkowski, R. J., Dunn, R. L., & Wasserman, J. (1998). The relationship between modifiable health risks and health care expenditures. Journal of Occupational and environmental Medicine, *40*, 843-854.

Graf, O., Rutenfranz, J., & Ulich, E. (1970). Arbeitszeit und Arbeitspausen. In A. Mayer & B. Herwig (Eds.), Betriebspsychologie (2nd ed., Vol. 9, pp. 244-277). Goettingen, Germany: Hogrefe.

Greiner, B. A., Ragland, D. R., Krause, N., Syme, S. L., & Fisher, J. M. (1997). Objective measurement of occupational stress factors - An example with San Francisco urban transit operators. Journal of Occupational Health Psychology, *2*, 325-342.

Griffeth, R. W., Hom, P. W., & Gaertner, S. (2000). A meta-analysis of antecedents and correlates of employee turnover: Update, moderator tests, and research implications for the next millennium. Journal of Management, *26*, 463-488.

- Guppy, A., & Weatherston, L. (1997). Coping strategies, dysfunctional attitudes and psychological well-being in white collar public sectors employees. Work and Stress, 11, 58-67.
- Gupta, N., & Beehr, T. A. (1979). Job stress and employee behaviors. Organizational Behavior and Human Performance, 23, 373-387.
- Hacker, W. (1998). Allgemeine Arbeitspsychologie: Psychische Regulation von Arbeitstätigkeiten. Bern: Huber.
- Hamilton, V. (1982). Cognition and stress: An information processing model. In L. Goldberger & S. Breznitz (Eds.), Handbook of stress: Theoretical and clinical aspects (pp. 105-120). New York: Free Press.
- Harnois, G., & Gabriel, P. (2000). Mental health and work: Impact, issues and good practices. Geneva (Switzerland): International Labour Organisation.
- Harrison, R. V. (1978). Person-environment fit and job stress. In C. L. Cooper & R. Paye (Eds.), Stress at work (pp. 175-205). New York: Wiley.
- Hart, P. M., Wearing, A. J., & Headey, B. (1995). Police stress and well-being: Integrating personality, coping and daily work experiences. Journal of Occupational and Organizational Psychology, 68, 133-156.
- Heaney, C. A., Price, R. H., & Rafferty, J. (1995). Increasing coping resources at work: a field experiment to increase social support, improve work team functioning, and enhance employee mental health. Journal of Organizational Behavior, 16, 335-352.
- Hemingway, M. A., & Smith, C. S. (1999). Organizational climate and occupational stressors as predictors of withdrawal behaviours and injuries in nurses. Journal of Occupational and Organizational Psychology, 72, 285-299.
- Henning, R. A., Sauter, S. L., Salvendy, G., & Krieg, E. F. (1989). Microbreak length, performance, and stress in a data entry task. Ergonomics, 32, 855-864.
- Herbert, T. B., & Sheldon, C. (1993). Stress and immunity in humans: A meta-analytic review. Psychosomatic Medicine, 55, 364-379.
- Hesketh, B., & Shouksmith, G. (1986). Job and non-job activities, job satisfaction and mental health among veterinarians. Journal of Organizational Behavior, 7, 325-339.
- Hibbard, J. H., & Pope, C. R. (1993). The quality of social roles as predictors of morbidity and mortality. Social Science and Medicine, 36, 217-225.
- Hobfoll, S. E. (1998). Stress, culture, and community. The psychology and physiology of stress. New York: Plenum.

Hockey, G. R., Maule, A. J., Vlough, P. J., & Bdzola, L. (2000). Effects of negative mood states on risk in everyday decision making. Cognition and Emotion, *14*, 823-856.

Hockey, G. R. J. (1986). Changes in operator efficiency as a function of environmental stress, fatigue, and circadian rhythms. In K. R. Boff, L. Kaufman, & J. P. Thomas (Eds.), Handbook of perception and human performance (Vol. II, pp. 44-1/44-49). Washington, DC: National Academy Press.

Hockey, G. R. J. (1997). Compensatory control in the regulation of human performance under stress and high workload: A cognitive-energetical framework. Biological Psychology, *45*, 73-93.

Hockey, G. R. J. (2000). Work environments and performance. In N. Chmiel (Ed.), Work and organizational psychology: a European perspective (pp. 206-230). Oxford: Blackwell.

Hollon, S. D., DeRubeis, R. J. & Evans, M. D. (1987). Causal mediation of change in treatment for depression: Discriminating between nonspecificity and noncausality. Psychological Bulletin, *102*, 139-149.

House, J. S. (1981). Work stress and social support. Reading, MA: Addison-Wesley.

Howard, J. H., Cunningham, D. A., & Rechner, P. A. (1986). Personality (hardiness) as a moderator of job stress and coronary risk in Type A individuals: A longitudinal study. Journal of Behavioral Medicine, *9*, 229-245.

Ilgen, D. R., & Hollenbeck, J. R. (1991). The structure of work: Job design and roles. In M. D. Dunnette & L. M. Hough (Eds.), Handbook of industrial and organizational psychology (2 ed., Vol. 2, pp. 165-207). Palo Alto, CA: Consulting Psychologists Press.

Ingledeu, D. K., Hardy, L., & Cooper, C. L. (1997). Do resources bolster coping and does coping buffer stress? An organizational study with longitudinal aspect and control for negative affectivity. Journal of Occupational Health Psychology, *2*, 118-133.

Ivancevich, J. M., & Matteson, M. T. (1988). Promoting the individual's health and well-being. In C. L. Cooper & R. Payne (Eds.), Causes, coping and consequences of stress at work (pp. 267-299). Chichester, England: Wiley.

Ivancevich, J. M., Matteson, M. T., Freedman, S. M., & Phillips, J. S. (1990). Worksite stress management interventions. American Psychologist, *45*, 252-261.

Jackson, P. R., Wall, T. D., Martin, R., & Davids, K. (1993). New measures of job control, cognitive demand, and production responsibility. Journal of Applied Psychology, *78*, 753-762.

Jackson, S. E. (1983). Participation in decision making as a strategy for reducing job-related strain. Journal of Applied Psychology, *68*, 3-19.

Jackson, S. E., & Schuler, R. S. (1985). A meta-analysis and conceptual critique of research on role ambiguity and role conflict in work settings. Organizational Behavior and Human Performance, *33*, 1-21.

Jacobson, E. (1938). Progressive relaxation. Chicago: Univ. of Chicago Press.

Jamal, M. (1984). Job stress and job performance controversy: An empirical assessment. Organizational Behavior and Human Performance, *33*, 1-21.

Jamal, M. (1985). Relationship of job stress to job performance: A study of managers and blue collar workers. Human Relations, *38*, 409-424.

Jex, S. M. (1998). Stress and job performance: Theory, research, and implications for managerial practice. Thousand Oaks, CA: Sage.

Jex, S. M., & Bliese, P. D. (1999). Efficacy beliefs as a moderator of the impact of work-related stressors: A multilevel study. Journal of Applied Psychology, *84*, 349-361.

Jex, S. M., & Elacqua, T. C. (1999). Self-esteem as a moderator: A comparison of global and organization-based measures. Journal of Occupational and Organizational Psychology, *72*, 71-81.

Jex, S. M., & Gudanowski, D. M. (1992). Efficacy beliefs and work stress: An exploratory study. Journal of Occupational Behavior, *13*, 509-517.

Jimmieson, N. L., & Terry, D. J. (1997). Responses to an in-basket activity: The role of work stress, behavioral control, and informational control. Journal of Occupational Health Psychology, *2*, 72-83.

Jimmieson, N. L., & Terry, D. J. (1999). The moderating role of task characteristics in determining responses to a stressful work simulation. Journal of Organizational Behavior, *20*, 709-736.

Johansson, G., Aronsson, G., & Lindström, B. O. (1978). Social psychological and neuroendocrine stress reactions in highly mechanised work. Ergonomics, *21*, 583-599.

Jones, J. W., Barge, B. N., Steffy, B. D., Fay, L. M., Kunz, L. K., & Wuebker, L. J. (1988). Stress and medical malpractice: Organizational risk assessment and intervention. Journal of Applied Psychology, *73*, 727-735.

Kahn, R. L., & Byosiere, P. (1992). Stress in organizations. In M. D. Dunnette & L. M. Hough (Eds.), Handbook of industrial and organizational psychology (2nd ed., Vol. 3, pp. 571-650). Palo Alto, CA: Consulting Psychologists Press.

Kahn, R. L., Wolfe, D. M., Quinn, R. P., Snoek, J. D., & Rosenthal, R. A. (1964). Organizational stress: Studies in role conflict and ambiguity. New York: Wiley.

Kanner, A. D., Coyne, J. C., Schaefer, C., & Lazarus, R. S. (1981). Comparison of two modes of stress measurement: Daily hassles and uplifts versus major life events. Journal of Behavioral Medicine, *4*, 1-39.



Karasek, R. (1979). Job demands, job decision latitude, and mental strain: Implications for job redesign. Administrative Science Quarterly, *24*, 285-306.

Karasek, R., Baker, D., Marxner, F., Ahlbom, A., & Theorell, T. (1981). Job decision latitude, job demands, and cardiovascular disease: A prospective study of Swedish men. American Journal of Public Health, *71*, 694-705.

Kasl, S. V. (1978). Epidemiological contributions to the study of work stress. In C. L. Cooper & R. Pane (Eds.), Stress at work (pp. 3-48). Chichester: Wiley.

Kasl, S. V. (1986). Stress and disease in the workplace: a methodological commentary on the accumulated evidence. In M. F. Cataldo & T. J. Coates (Eds.), Health and industry: A behavioral medicine perspective. New York: Wiley.

Kasl, S. V. (1996). The influence of the work environment on cardiovascular health: A historical, conceptual, and methodological critique. Journal of Occupational Health Psychology, *1*, 42-56.

Kasl, S. V. (1998). Measuring job stressors and studying the health impact of the work environment: An epidemiologic commentary. Journal of Occupational Health Psychology, *3*, 390-401.

Katz, D., & Kahn, R. L. (1978). The social psychology of organizations (2 ed.). New York: Wiley.

Keinan, G., & Friedland, N. (1996). Training effective performance under stress: Queries, dilemmas, and possible solutions. In J. E. Driskell & E. Salas (Eds.), Stress and human performance (pp. 257-277). Mahwah, New Jersey: Lawrence Erlbaum Assoc.

Kivimäki, M., Vahtera, J., Thomson, L., Griffiths, A., Cox, T., & Pentti, J. (1997). Psychosocial factors predicting employee sickness absence during economic decline. Journal of Applied Psychology, *82*, 858-872.

Kjellberg, A., Sköldström, B., Andersson, O., & Lindberg, L. (1996). Fatigue effects of noise on aeroplane mechanics. Work and Stress, *10*, 62-71.

Klein, G. (1996). The effect of acute stressors on decision making. In J. E. Driskell & E. Salas (Eds.), Stress and human performance (pp. 49-88). Mahwah, NJ: Lawrence Erlbaum Associates.

Kobasa, S. C., Maddi, S. R., & Kahn, S. (1982). Hardiness and health: A prospective study. Journal of Personality and Social Psychology, *42*, 168-177.

Kohn, M. L., & Schooler, C. (1982). Job conditions and personality: A longitudinal assessment of their reciprocal effects. American Journal of Sociology, *87*, 1257-1286.

Kompier, M. A. J., Aust, B., Van den Berg, A.-M., & Siegrist, J. (2000a). Stress prevention in bus drivers: Evaluation of 13 natural experiments. Journal of Occupational Health Psychology, *5*, 11-31.

Kompier, M. A. J., Cooper, C. L., & Geurts, S. A. E. (2000b). A multiple case study approach to work stress prevention in Europe. European Journal of Work and Organizational Psychology, *9*, 371-400.

Kristensen, T. S. (1991). Sickness absence and work strain among Danish slaughterhouse workers: An analysis of absence from work regarded as coping behavior. Social Science and Medicine, *32*, 15-27.

Kristensen, T. S. (1995). The demand-control-support model: methodological challenges for future research. Stress Medicine, *11*, 17-26.

Landsbergis, P. A. (1988). Occupational stress among health care workers: A test of the job demands-control model. Journal of Occupational Behavior, *9*, 217-239.

Landsbergis, P. A., Schnall, P. L., Deitz, D., Friedman, R., & Pckering, T. (1992). The patterning of psychological attributes and distress by 'job strain' and social support in a sample of working men. Journal of Behavioral Medicine, *15*, 379-405.

Landsbergis, P., & Vivona-Vaughan, E. (1995). Evaluation of an occupational stress intervention in a public agency. Journal of Organizational Behavior, *16*, 29-48.

Lazarus, R. S. (1966). Psychological stress and the coping process. New York: Springer.

Lazarus, R. S. (1991). Psychological stress in the workplace. Journal of Social Behavior and Personality, *6*, 1-13.

Lazarus, R. S., & Folkman, S. (1984). Stress, appraisal, and coping. New York: Springer.

Lee, R. T., & Ashforth, B. E. (1993). A longitudinal study of burnout among supervisors and managers: comparisons between the Leister and Maslach (1988) and Golembiewski et al., (1986) models. Organizational Behavior and Human Decision Processes, *54*, 369-398.

Lee, R. T., & Ashforth, B. E. (1996). A meta-analytic examination of the correlates of the three dimensions of job burnout. Journal of Applied Psychology, *81*, 123-133.

Leiter, M. P. (1991). Coping patterns as predictors of burnout: The function of control and escapist coping patterns. Journal of Organizational Behavior, *12*, 123-144.

Leitner, K. (1993). Auswirkungen von Arbeitsbedingungen auf die psychosoziale Gesundheit. Zeitschrift für Arbeitswissenschaft, *47*, 98-107.

Leitner, K., Volpert, W., Greiner, B., Weber, W.-G., & Hennes, K. (1987). Analyse psychischer Belastung in der Arbeit. Das RHIA-Verfahren. Handbuch. Köln: TÜv Rheinland.

Levi, L., & Lunde-Jensen, P. (1996). A model for assessing the costs of stressors at national level. Socio-economic costs of work stress in two EU member states. Dublin (Ireland): European Foundation for the Improvement of Living and Working Conditions.

Long, B. C., & Van Stavel, R. (1995). Effects of exercise training on anxiety: A meta-analysis. Journal of Applied Sport Psychology, *7*, 167-189.

Lorist, M. M., Klein, M., Nieuwenhuis, S., de Jong, R., Mulder, G., & Meijman, T. F. (2000). Mental fatigue and task control: Planning and preparation. Psychophysiology, *37*, 614-625.

Lulofs, R., Wennekens, R., & van Houtem, J. V. (1981). Effect of physical stress and time pressure on performance. Perceptual and Motor Skills, *52*, 787-793.

Lundberg, U., & Frankenhaeuser, M. (1978). Psychophysiological reactions to noise as modified by personal control over noise intensity. Biological Psychology, *6*, 55-59.

Martocchio, J. J., Harrison, D. A., & Berkson, H. (2000). Connections between lower back pain, interventions, and absence from work: A time based meta-analysis. Personnel Psychology, *53*, 595-624.

Maslach, C., & Jackson, S. E. (1981). The measurement of experienced burnout. Journal of Organizational Behavior, *2*, 99-113.

Maslach, C., Schaufeli, W. B., & Leiter, M. P. (2001). Job burnout. Annual Review of Psychology, *52*, 397-422.

Mathieu, J. E., & Zajac, D. M. (1990). A review and meta-analysis of the antecedents, correlates, and consequences of organizational commitment. Psychological Bulletin, *108*, 171-194.

Matteson, M. T., & Ivancevich, J. M. (1987). Controlling work stress. San Francisco, California: Jossey-Bass.

Mauno, S., & Kinnunen, U. (1999). Job insecurity and well-being: a longitudinal study among male and female employees in Finland. Community, Work & Family, *2*, 147-171.

McGrath, J. E. (1976). Stress and behavior in organizations. In M. D. Dunnette (Ed.), Handbook of industrial and organizational psychology. Chicago: Rand McNally.

Meichenbaum, D. (1985). Stress inoculation training. New York: Pergamon.

Meijman, T. F., Mulder, G., & Van Dormolen, M. (1992). Workload of driving examiners: A psychophysiological field study. In H. Kragt (Ed.), Enhancing industrial performances (pp. 245-260). London: Taylor & Francis.

Melamed, S., Ben-Avi, I., Luz, J., & Green, M. S. (1995). Objective and subjective work monotony: Effects on job satisfaction, psychological distress, and absenteeism in blue-collar workers. Journal of Applied Psychology, *80*, 29-42.

Melamed, S., Kushnir, T., & Meir, E. I. (1991). Attenuating the impact of job demands: Additive and interactive effects of perceived control and social support. Journal of Vocational Behavior, *39*, 40-53.

Melin, B., Lundberg, U., Soederlund, J., & Granqvist, M. (1999). Psychological and physiological stress reactions of male and female assembly workers: A comparison between two different forms of work organization. Journal of Organizational Behavior, 20, 47-61.

Mohr, G. B. (2000). The changing significance of different stressors after the announcement of bankruptcy: a longitudinal investigation with special emphasis on job insecurity. Journal of Organizational Behavior, 21, 337-359.

Motowidlo, S. J., Packard, J. S., & Manning, M. R. (1986). Occupational stress: Its causes and consequences on job performance. Journal of Applied Psychology, 71, 618-629.

Mowday, R. T., Porter, L. W., & Steers, R. M. (1982). Employee-organizational linkages. New York: Academic Press.

Moyle, P. (1998). Longitudinal influences of managerial support on employee well-being. Work and Stress, 12, 29-49.

Moyle, P., & Parkes, K. (1999). The effects of transition stress: a relocation study. Journal of Organizational Behavior, 20, 625-646.

Murphy, L. R. (1988). Workplace interventions for stress reduction and prevention. In C. L. Cooper & R. Payne (Eds.), Causes, coping and consequences of stress at work (pp. 301-339). Chichester, England: Wiley.

Murphy, L. R. (1996). Stress management in work settings: A critical review of health effects. American Journal of Health Promotion, 11, 112-135.

Muntaner, C., Tien, A. Y., Eaton, W. W., & Garrison, R. (1991). Occupational characteristics and the occurrence of psychotic disorders. Social Psychiatry and Psychiatric Epidemiology, 26, 273-280.

National Institute for Occupational Safety and Health (1999). Stress ... at work. DHHS (NIOSH) Publication No. 99-101. Cincinnati, OH: National Institute for Occupational Safety and Health.

Nelson, D. L., & Sutton, C. (1990). Chronic work stress and coping: A longitudinal study and suggested new directions. Academy of Management Journal, 33, 859-869.

Newton, T. J., & Keenan, A. (1990). The moderating effect of the Type A behavior pattern and locus of control upon the relationship between change in job demands and change in psychological strain. Human Relations, 43, 1229-1255.

Noor, N. M. (1995). Work and family roles in relation to women's well-being: a longitudinal study. British Journal of Social Psychology, 34, 87-106.

North, F. M., Syme, S. L., Feeney, A., Shipley, M., & Marmot, M. (1996). Psychosocial work environment and sickness absence among British civil servants: The Whitehall II study. American Journal of Public Health, *86*, 332-340.

Nunes, E. V., K.A., F., & Kornfeld, D. S. (1987). Psychologic treatment for the Type A behavior pattern and for coronary heart disease: A meta-analysis of the literature. Psychosomatic Medicine, *48*, 159-173.

O'Connor, G. T., Buring, J. E., Yusuf, S., Goldhaber, S. Z., Olmstead, E. M., Paffenbarger, R. S., & Hennekens, C. H. (1989). An overview of randomized trials of rehabilitation with exercise after myocardial infarction. Circulation, *80*, 234-244.

Parker, S. K., & Sprigg, C. A. (1999). Minimizing strain and maximizing learning: The role of job demands, job control, and proactive personality. Journal of Applied Psychology, *84*, 925-939.

Parkes, K. R. (1982). Occupational stress among nurses: A natural experiment. Journal of Applied Psychology, *67*, 784-796.

Parkes, K. R. (1990). Coping, negative affectivity, and the work environment: Additive and interactive predictors of mental health. Journal of Applied Psychology, *75*, 399-409.

Parkes, K. R. (1991). Locus of control as moderator: An explanation for additive versus interactive findings in the demand-discretion model of work stress. British Journal of Psychology, *82*, 291-312.

Parkes, K. R., Menham, C. A., & Rabenau, C. v. (1994). Social support and the demand-discretion model of job stress: Tests of additive and interactive effects in two samples. Journal of Vocational Behavior, *44*, 91-113.

Payne, R. (1991). Individual differences in cognition and the stress process. In C. L. Cooper & R. Payne (Eds.), Personality and stress: Individual differences in the stress process (pp. 181-204). New York: Wiley.

Peeters, M. C. W., Buunk, B. P., & Schaufeli, W. B. (1995). Social interactions and feelings of inferiority among correctional officers: A daily event-recording approach. Journal of Applied Social Psychology, *25*, 1073-1089.

Pekrun, R., & Frese, M. (1992). Emotions in work and achievement. In C. L. Cooper & I. T. Robertson (Eds.), International review of industrial and organizational psychology (Vol. 7, pp. 153-200). Chichester: Wiley.

Perrewé, P. L., & Ganster, D. C. (1989). The impact of job demands and behavioral control on experienced job stress. Journal of Organizational Behavior, *10*, 213-229.

Perrewé, P. L., & Zellars, K. L. (1999). An examination of attributions and emotions in the transactional approach to the organizational stress process. Journal of Organizational Behavior, *20*, 739-752.

Perrez, M., & Reicherts, M. (1992). A situation-behavior approach to stress and coping. In M. Perrez & M. Reicherts (Eds.), Stress, coping, and health (pp. 17-38). Hogrefe and Huber: Seattle, WA.

Peter, R., Geissler, H., & Siegrist, J. (1998). Associations of effort-reward imbalance at work and reported symptoms in different groups of male and female public transport workers. Stress Medicine, *14*, 175-182.

Peter, R., & Siegrist, J. (1997). Chronic work stress, sickness absence, and hypertension in middle managers: general or specific sociological explanations. Social Science and Medicine, *45*, 1111-1120.

Pfaffenberger, R. S., Hyde, R. T., Wing, A. L., & Hsieh, C.-C. (1986). Physical activity, all-cause mortality, and longevity of college alumni. New England Journal of Medicine, *314*, 605-613.

Peterson, C., Maier, S. F., & Seligman, M. E. P. (1993). Learned helplessness: A theory for the age of personal control. New York: Oxford University Press.

Postman, L., & Bruner, J. S. (1948). Perception under stress. Psychological Review, *55*, 314-323.

Repetti, R. L. (1993). Short-term effects of occupational stressors on daily mood and health complaints. Health Psychology, *12*, 125-131.

Repetti, R. L., & Wood, J. (1997). Effects of daily stress at work on mothers' interactions with preschoolers. Journal of Family Psychology, *11*, 90-108.

Revicki, D. A., Whitley, T. W., Gallary, M. E., & Allison, E. J. J. (1993). Impact of work environment characteristics on work-related stress and depression in emergency medicine residents: A longitudinal study. Journal of Community and Applied Social Psychology, *3*, 273-284.

Robinson, L. A., Berman, J. S., & Neimeyer, R. A. (1990). Psychotherapy for the treatment of depression: a comprehensive review of controlled outcome research. Psychological Bulletin, *108*, 30-49.

Rosenthal, R., & Rubin, D. B. (1982). A simple, general purpose display of magnitude of experimental effect. Journal of Educational Psychology, *74*, 166-169.

Rotter, J. B. (1966). Generalized expectancies for internal versus external control of reinforcement. Psychological Monographs: General and Applied, *80*, 1.

Rousseau, D. M. (1995). Psychological contracts in organizations: Understanding written and unwritten agreements. Thousand Oaks: Sage.

Roy, M. P., & Steptoe, A. (1994). Daily stressors and social support availability as predictors of depressed mood in male firefighters. Work and Stress, *8*, 210-219.

- Rydstedt, L. W., Johansson, G., & Evans, G. W. (1998). A longitudinal study of workload, health and well-being among male and female urban bus drivers. Journal of Occupational and Organizational Psychology, *71*, 35-45.
- Saks, A. M., & Ashforth, B. E. (2000). The role of dispositions, entry stressors, and behavioral plasticity theory in predicting newcomers' adjustment to work. Journal of Organizational Behavior, *21*, 43-62.
- Sargent, L. D., & Terry, D. J. (1998). The effects of work control and job demands on employee adjustment and work performance. Journal of Occupational and Organizational Psychology, *71*, 219-236.
- Saunders, T., Driskell, J. E., Johnston, J. H., & Salas, E. (1996). The effects of stress inoculation training on anxiety and performance. Journal of Occupational Health Psychology, *1*, 170-186.
- Schaubroeck, J. (1999). Should the subjective be the objective? On studying mental processes, coping behavior, and actual exposures in organizational stress research. Journal of Organizational Behavior, *20*, 753-760.
- Schaubroeck, J., & Fink, L. S. (1998). Facilitating and inhibiting effects of job control and social support on stress outcomes and role behavior: a contingency model. Journal of Organizational Behavior, *19*, 167-195.
- Schaubroeck, J., & Ganster, D. C. (1993). Chronic demands and respsivity to challenge. Journal of Applied Psychology, *78*, 73-85.
- Schaubroeck, J., Lam, S., & Xie, J. L. (2000). Collective efficacy versus self-efficacy in coping responses to stressors and control: A cross cultura study. Journal of Applied Psychology, *85*, 512-525.
- Schaubroeck, J., & Merritt, D. E. (1997). Divergent effects of job control on coping with work stressors: The key role of self-efficacy. Academy of Management Journal, *40*, 738-754.
- Schnall, P. L., Landsbergis, P. A., & Baker, D. (1994). Job strain and cardiovascular disease. Annual Review of Public Health, *15*, 381-411.
- Schonfeld, I. S. (1992). A longitudinal study of occupational stressors and depressive symptoms in first-year female teachers. Teaching & Teaching Education, *8*, 151-158.
- Schulz, P., Kirschbaum, C., Prüssner, J., & Hellhammer, D. (1998). Increased free cortisol secretion after awakening in chronically stressed individuals due to work overload. Stress Medicine, *14*, 91-97.
- Schwartz, J. E., Pickering, T. G., & Landsbergis, P. A. (1996). Work-related stress and blood pressure: Current theoretical mdoels and considerations froam a behavioral medicine perspective. Journal of Occupational Health Psychology, *1*, 287-310.

- Searle, B. J., Bright, J. E. H., & Bochner, S. (1999). Testing the 3-factor model of occupational stress: the impact of demands, control and social support on a mail sorting task. *Work and Stress*, *13*, 268-279.
- Sears, S. F. J., Urizar, G. G. J., & Evans, G. D. (2000). Examining a stress-coping model of burnout and depression in extension agents. *Journal of Occupational Health Psychology*, *5*, 56-62.
- Seeber, A., & Iregren, A. (1992). Behavioural effects of contaminated air: Applying psychology in neurotoxicology. *Applied Psychology: An International Review (Special Issue)*, *41* (3).
- Seligman, M. E. P. (1975). *Helplessness. On depression, development and death*. San Francisco: Freeman.
- Selye, H. (1956). *The stress of life*. New York: McGraw-Hill.
- Semmer, N. (1984). *Streßbezogene Tätigkeitsanalyse*. Weinheim: Beltz.
- Semmer, N. (1996). Individual differences, work stress and health. In M. J. Schabracq, J. A. M. Winnubst, & C. L. Cooper (Eds.), *Handbook of work and health psychology* (pp. 51-86). Chichester: Wiley.
- Shaw, J. B., & Weekley, J. A. (1985). The effects of objective work-load variations of psychological strain and post-work-load performance. *Journal of Management*, *11*, 87-98.
- Shirom, A., Westman, M., Shamai, O., & Carel, R. S. (1997). Effects of work overload and burnout on cholesterol and triglycerides levels: The moderating effects of emotional reactivity among male and female employees. *Journal of Occupational Health Psychology*, *2*, 275-288.
- Siegrist, J. (1996). Adverse health effects of high effort/low reward conditions. *Journal of Occupational Health Psychology*, *1*, 27-41.
- Siegrist, J. (1998). Adverse health effects of effort-reward imbalance at work: Theory, empirical support, and implications for prevention. In C. L. Cooper (Ed.), *Theories of organizational stress* (pp. 190-204). Oxford: Oxford University Press.
- Siegrist, J., Peter, R., Junge, A., Cremer, P., & Seidel, D. (1990). Low status control, high effort at work and ischemic heart disease: prospective evidence from blue-collar men. *Social Science and Medicine*, *31*, 1127-1134.
- Slesina, W. (1994). Gesundheitszirkel - der "Düsseldorfer Ansatz". In G. Westermeyer & B. Bähr (Eds.), *Betriebliche Gesundheitszirkel* (pp. 25-34). Göttingen, Germany: Verlag für Angewandte Psychologie.
- Smulders, P. G. W., & Nijhuis, F. J. N. (1999). The job demands-job control model and absence behavior: results of a 3-year longitudinal study. *Work and Stress*, *13*, 115-131.



Söderfeldt, M., Söderfeldt, B., Ohlson, C.-G., Theorell, T., & Jones, I. (2000). The impact of sense of coherence and high-demand/low-control job environment on self-reported health, burnout and psychophysiological stress indicators. Work and Stress, *14*, 1-15.

Sonnentag, S. (1996). Work group factors and individual well-being. In M. A. West (Ed.), Handbook of work group psychology (pp. 345-367). Chichester: Wiley.

Sonnentag, S. (2000). Expertise at work: Experience and excellent performance. In C. L. Cooper & I. T. Robertson (Eds.), International Review of Industrial and Organizational Psychology (pp. 223-264). Chichester: Wiley.

Sonnentag, S., Brodbeck, F. C., Heinbokel, T., & Stolte, W. (1994). Stressor-burnout relationship in software development teams. Journal of Occupational and Organizational Psychology, *67*, 327-341.

Sonnentag, S. (in press-a). Performance, well-being and self-regulation. In S. Sonnentag (Ed.), The psychological management of individual performance: A handbook in the psychology of management in organizations. Chichester: Wiley.

Sonnentag, S. (in press-b). Work, recovery activities, and individual well-being: A diary study. Journal of Occupational Health Psychology.

Sparks, K., Cooper, C., Fried, Y., & Shirom, A. (1997). The effects of hours of work on health: A meta-analytic review. Journal of Occupational and Organizational Psychology, *70*, 391-408.

Spector, P. E., Chen, P. Y., & O'Connell. (2000). A longitudinal study of relations between job stressors and job strains while controlling for prior negative affectivity and strains. Journal of Applied Psychology, *85*, 211-218.

Spector, P. E., Dwyer, D. J., & Jex, S. M. (1988). Relation of job stressors to affective, health, and performance outcomes: A comparison of multiple data sources. Journal of Applied Psychology, *73*, 11-19.

Sperandio, J. C. (1971). Variation of operator's strategies and regulating effects on workload. Ergonomics, *14*, 571-577.

Steen, N., Firth, H. W. B., & Bond, S. (1998). Relation between work stress and job performance in nursing: A comparison of models. Structural Equation Modeling, *5*, 125-142.

Sullivan, S. E., & Bhagat, R. S. (1992). Organizational stress, job satisfaction, and job performance: Where do we go from here? Journal of Management, *18*, 353-374.

Tafalla, R. J., & Evans, G. W. (1997). Noise, physiology, and human performance: The potential role of effort. Journal of Occupational Health Psychology, *2*, 148-155.

Tang, T. L. P., & Hammontree, M. L. (1992). The effects of hardiness, police stress, and life stress on police officers' illness and absenteeism. Public Personnel Management, *21*, 493-510.

Theorell, T. (1993). Medical and physiological aspects of job interventions. In C. L. Cooper & I. T. Robertson (Eds.), International review of industrial and organizational psychology, 1993 (Vol. 8, ). Chichester, England: Wiley.

Theorell, T., & Karasek, R. A. (1996). Current issues relating to psychosocial job strain and cardiovascular disease research. Journal of Occupational Health Psychology, *1*, 9-26.

Totterdell, P., Kellett, S., Techmann, K., & Briner, R. B. (1998). Evidence of mood linkage in work groups. Journal of Personality and Social Psychology, *74*, 1504-1515.

Totterdell, P., Spelten, E., Smith, L., Barton, J., & Folkard, S. (1995). Recovery from work shifts: How long does it take? Journal of Applied Psychology, *80*, 43-57.

Tsutsumi, A., Theorell, T., Hallqvist, J., Reuterwall, C., & de Faire, U. (1999). Association between job characteristics and plasma fibrinogen in a normal working population: a cross sectional analysis in referents of the SHEEP study. Journal of Epidemiology and Community Health, *53*, 348-354.

Tubbs, T. C., & Collins, J. M. (2000). Jackson and Schuler (1985) revisited: a meta-analysis of the relationships between role ambiguity, role conflict, and job performance. Journal of Management, *26*, 155-169.

Vahtera, J., Kivimäki, M., Pentti, J., & Theorell, T. (2000). Effect of change in the psychosocial work environment on sickness absence: a seven year follow up of initially health employees. Journal of Epidemiology and Community Health, *54*, 484-493.

Vahtera, J., Pentti, J., & Uutela, A. (1996). The effect of objective job demands on registered sickness absence spells; do personal, social and job related resources act a moderators? Work and Stress, *10*, 286-308.

Van der Doef, M., & Maes, S. (1999). The Job Demand-Control (-Support) model and psychological well-being: a review of 20 years of empirical research. Work & Stress, *13*, 87-114.

Van der Hek, H., & Plomp, H. N. (1997). Occupational stress management programmes: A practical overview of published effect studies. Occupational Medicine, *47*, 133-141.

Van der Klink, J. J. L., Blonk, R. W. B., Schene, A. H., & Van Dijk, F. J. H. (2001). The benefits of interventions for work-related stress. American Journal of Public Health, *91*, 270-276.

Van Dierendonck, D., Schaufeli, W. B., & Buunk, B. P. (1998). The evaluation of an individual burnout intervention program: The role of inequity and social support. Journal of Applied Psychology, *83*, 392-407.

VanYperen, N. W. (1998). Informational support, equity and burnout: The moderating effect of self-efficacy. Journal of Occupational and Organizational Psychology, *71*, 29-33.

VanYperen, N. W., & Snijders, T. A. B. (2000). A multilevel analysis of the demands-control model: Is stress at work determined by factors at the group level or the individual level? Journal of Occupational Health Psychology, 5, 182-190.

Viswesvaran, C., Sanchez, J. I., & Fisher, J. (1999). The role of social support in the process of work stress: A meta-analysis. Journal of Vocational Behavior, 54, 314-334.

Vrijkotte, T. G. M., van Doornen, L. J. O., & de Geus, E. J. C. (1999). Work stress and metabolic and hemostatic risk factors. Psychosomatic Medicine, 61, 796-805.

Wall, T. D., & Clegg, C. W. (1981). A longitudinal study of group work redesign. Journal of Occupational Psychology, 2, 31-49.

Wall, T. D., Jackson, P. R., Mullarkey, S., & Parker, S. K. (1996). The demands-control model of job strain: A more specific test. Journal of Occupational and Organizational Psychology, 69, 153-166.

Wall, T. D., Kemp, N. J., Jackson, P. R., & Clegg, C. W. (1986). Outcomes of autonomous workgroups: A long-term field experiment. Academy of Management Journal, 29, 280-304.

Warr, P. B. (1987). Work, unemployment, and mental health. Oxford: Oxford University Press.

Warr, P. B. (1990). Decision latitude, job demands, and employee well-being. Work and Stress, 4, 285-294.

Weiss, H. M., & Cropanzano, R. (1996). Affective Events Theory: A theoretical discussion of the structure, causes and consequences of affective experiences at work. In B. M. Staw & L. L. Cummings (Eds.), Research in organizational behavior (Vol. 18, pp. 1-74). Stamford, CT: JAI Press.

Westman, M., & Eden, D. (1996). The inverted-U relationship between stress and performance: a field study. Work and Stress, 10, 165-173.

Westman, M., & Eden, D. (1997). Effects of a respite from work on burnout: Vacation relief and fade-out. Journal of Applied Psychology, 82, 516-527.

Whisman, M. A. (1998). Mediators and moderators of change in cognitive therapy of depression. Psychological Bulletin, 114, 248-265.

Wickens, C. D. (1996). Designing for stress. In J. E. Driskell & E. Salas (Eds.), Stress and human performance (pp. 279-295). Mahwah, NJ: Lawrence Erlbaum Associates.

Williams, K. J., & Alliger, G. M. (1994). Role stressors, mood spillover, and perceptions of work-family conflict in employed parents. Academy of Management Journal, 37, 837-868.

Wolpin, J., Burke, R. J., & Greenglass, E. R. (1991). Is job satisfaction an antecedent of a consequence of psychological burnout? Human Relations, 44, 193-209.

Zapf, D. (1989). Selbst- und Fremdbeobachtung in der psychologischen Arbeitsanalyse: methodische Probleme bei der Erfassung von Stress am Arbeitsplatz. Göttingen, Germany: Hogrefe.

Zapf, D., Dormann, C., & Frese, M. (1996a). Longitudinal studies in organizational stress research: A review of the literature with reference to methodological issues. Journal of Occupational Health Psychology, *1*, 145-169.

Zapf, D., & Frese, M. (1991). Soziale Stressoren am Arbeitsplatz. In S. Greif, E. Bamberg, & N. Semmer (Eds.), Psychischer Stress am Arbeitsplatz (pp. 168-184). Goettingen: Hogrefe.

Zapf, D., Knorz, C., & Kulla, M. (1996b). On the relationship between mobbing factors, and job content, social work environment, and health outcomes. European Journal of Work and Organizational Psychology, *5*, 215-237.

Zohar, D. (1999). When things go wrong: The effect of daily work hassles on effort, exertion and negative mood. Journal of Occupational and Organizational Psychology, *72*, 265-283.

Table 1

Overview over Stressors in Organizational Life

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Physical stressors
Work-related job stressors
Role stressors
Social stressors
Time-related stressors
Career-related stressors
Traumatic events
Stressful change processes

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Table 2

Overview over Stress Reactions

	Short-term reactions	Long-term reactions
<u>Experienced by the individual</u>		
Physical	Physiological reactions	Physical illness
Affectiv	Disturbed mood	Poor well-being and mental health problems
Behavioral	Cognitive reactions	
	Increased effort	
	Performance decrease <sup>a</sup>	
	Accidents	
<u>Experienced by larger organizational units</u>		
	Interpersonal Conflicts	Increased turnover
		Absence rates
<u>Experienced outside work</u>		
	Slow unwinding	Poor well-being in other life domains
	Spill-over of disturbed mood to private life	Physical illness

Note: a. Performance decrease was mainly found in laboratory, but not in field studies.

Table 3  
Longitudinal Studies on Stressors, Well-Being and Health

Study	No of waves	Time lags	Sample Size	Statistical Procedure	Stressors	Strains	Third Variables	Lagged main effects	Concurrent main effects	Reverse effects	Effects tested but not found
Bakker, Schaufeli, Sixma, Bosveld, & van Dierendonck (2000)	2	60	207	LISREL	Patient demands	Burnout	-	Not tested	Patient demands ↗ emotional exhaustion; effects on other burnout components are mediated by emotional exhaustion	Depersonalization ↗ patient demands	
Begley & Czajka (1993)	2	3	82	Mult Reg	Experienced stressfulness of organizational change	Job displeasure	Age, gender, marital status, education, organizational tenure, NA, organizational commitment	Not tested	Experienced stressfulness ↗ job displeasure	Not tested	--
Bromet, Dew, Parkinson, & Schulberg (1988)	2	12	322-325	Mult Reg, Logistic Regression	Job demands	Affective disorders Alcohol – related problems Distress symptoms	Age, coworker support, friendship support	Job demands ↗ affective disorders Job demands ↗ distress symptoms (p<.10)	Not tested	Not tested	No effect of job demands on alcohol –related problems
Carayon (1993)	2	12	122	CRPC	Workload	Daily life stress physical health complaints	Not tested in CLPC	Workload ↗ physical health complaints	No tested	No effects of daily life stress or psychical health complaints on workload	No lagged effect of work load on daily life stress

Chapman, Mandryk, Frommer, Edye, & Ferguson (1990)	3	36+24	2634	Mult Reg	Quantitative demands Qualitative demands Outside stress	Systolic blood pressure Diastolic blood pressure	Age, education, weight, fitness, alcohol consumption, family history etc.	Young women: Quantitative demands ↗ DBP	** chronicity scores: mixture of lagged and concurrent effects	Not tested	No effects on SBP No effects for men No effects for all women together
Daniels & Guppy (1994)	2	1	244	Mult reg	Various stressors	Well-being	No	Not tested	Stressors ↗ well-being	Not tested	
Dormann & Zapf (1999)	3	4+8	202	LISREL	Social stressors	Depressive symptoms	-	No effect of social stressors	Not tested	Not tested	No effect of social stressors
Frese (1985)	2	16	53-79	CLPC	Psychological stressors	Psychosomatic complaints	Not tested in CLPC	psychological stressors ↗ psychosomatic complaints	Not tested	No effect of psychosomatic stressors	No effect when observational measure of stressors was used
Garst, Frese, & Molenaar (2000)	6	4, 10, 12, 12, 24	448	Growth curve model	Job insecurity, time pressure, organizational problems, social stressors, uncertainty	Depression, psychosomatic complaints, irritation, worrying	Not in growth curve model	Uncertainty ↗ Depression, psychosomatic complaints, irritation, worrying; social stressors ↗ psychosomatic complaints, worrying	Stressors ↗ strains	Strains ↗ Stressors	No lagged effects of job insecurity
Glickman, Tanaka, & Chan (1991)	2	17	2506	LISREL	Work load and economic strain	Distress	Age, life events	No lagged effect of work load and economic strain on distress	Work load and economic strain ↗ distress	Distress ↗ work load and economic strain (lagged)	No lagged effect of work load and economic strain on distress



Hibbard & Pope (1993)	2	180	2157	Prospective design	Work stress	Ischamic heart disease (IHD) Malignancy Stroke Death	Age, education, self-reported health, marital and parental roles	Men: work stress ↗ IHD	Not tested	Not applicable	No effects for women No effects on malignancy, stroke or death
Howard, Cunningham, & Rechner (1986)	2	24	217	Multi-Reg	Role ambiguity	SBP, DBP, cholesterol, triglycerides, uric acids	Hardiness		Type A individuals: change in role ambiguity ↗ SBP, DBP, triglycerides	Not applicable	No effects for Type B individuals No effects on cholesterol and uric acids
Karasek, Baker, Marxner, Ahlbom, & Theorell (1981)	2	72	1,461	Logistic Regression	Job demands	Cardiovascular disease	Age, intelligence, discretion, personal schedule freedom, education, smoking, overweight	Job demands ↗ cardiovascular disease	Not tested	Not applicable	-
Kohn & Schooler (1982)	2	120	687	LISREL	Time pressure Heaviness Dirtiness Hours of Work	Distress	-	No lagged effects on distress	Dirtiness ↗ distress Hours of work ↗ distress	Distress ↗ time pressure (current) Distress ↗ heaviness (lagged)	No effects of time pressure and heaviness on distress No lagged effects of dirtiness and hours of work on distress
Lee & Ashforth (1993)	2	8	169	LISREL	Role stress	Emotional exhaustion (EE) Depersonalisation Personal Accomplishment	No	Lagged effects not testable	Role stress ↗ emotional exhaustion; effect of role stress on depersonalisation and pers. acc mediated by EE	Not tested	

Leitner (1993)	3	12+12	222	CLPC	Barriers in work process	psychosomatic complaints Irritation/Strain Depression Anxiety Somatic symptoms	-	Barriers ↗ psychosomatic complaints Irritation/Strain Depression Somatic symptoms Illness	Not tested	No reverse effect	no effect on anxiety or illness
Mauno & Kinnunen (1999)	2	12	219	LISREL	Job insecurity	Exhaustion Somatic symptoms Spillover into parenthood	No	Women: Job insecurity ↗ exhaustion Job insecurity ↗ Spillover	Not tested	No reverse effect	No effects for men No effects on somatic symptoms
Mohr (2000)	2	84	62-65	Partial Correlations	Job insecurity	Irascibility Anxiety Psychosomatic complaints Depression	-	Not tested	Job insecurity ↗ anxiety Job insecurity ↗ psychosomatic complaints	Not tested	No effects on irascibility and depression
Moyle (1998)	3	7+5	148	LISREL	Demands	Distress (GHQ)	Neuroticism	Demands ↗ distress	Demands ↗ distress	Distress ↗ demands	
Moyle & Parkes (1999)	3	2.5+6	85	Mult Reg	Demands Relocation	Distress (GHQ)	Not entered into regression equation before other variables	Not tested	Demands ↗ distress	Not tested	Relocation per se does not affect distress
Muntaner, Tien, Eaton, & Garrison (1991)	2	12	11,789	Prospective	Psychological demands Physical demands	Psychotic disorders (delusions, schizophrenia, affective)	-	Physical demands ↗ delusions Psychological demands ↗ schizophrenia	Not tested	Not applicable/not tested	No effects on psychotic-affective disorders, not effect of psychological demands on delusions, effect of physical demands on schizophrenia marginally significant (↗)



Revicki, Whitley, Gallary, & Allison (1993)	3	12+12	369 (1 <sup>st</sup> time lag) 192 (2 <sup>nd</sup> time lag)	Mult Reg	(low) role clarity	Depressive symptoms	Age, gender, marital status, other strain symptoms	No effect	Not tested	Not tested	No effects
Roy & Steptoe (1994)	4	3+3+	48	Mult Reg	Daily stressors	Depression	NA Social support	No lagged effects	Daily stressors ➔ depression for all three time lags	No reverse effects	No lagged effects
Rydstedt, Johansson, & Evans (1998)	2	18	52	Mult Reg	Workload	Perceived effort Fatigue spillover Intake of stress-related drugs	Gender	Not tested	Delta-workload ➔ Perceived effort Fatigue spillover	Not tested	
Schonfeld (1992)	2	About 6	255	LISREL	Episodic and chronic stressors	Depressive symptoms	No control variables in LISREL models	Stressors ➔ depressive symptoms	Stressors ➔ depressive symptoms ***concurrent models fits the data better than lagged model	No effect of depressive symptoms on stressors	
Shirom, Westman, Shamai, & Carel (1997)	2	24-36	665	Mult Reg	Overload	Cholesterol Triglycerides	Age, Body mass index, emotional reactivity, burnout, fatigue	Women: Overload ➔ Cholesterol	Not tested		No effects in men No effect on triglycerides

Siegrist, Peter, Junge, Cremer, & Seidel (1990)	2	66	263	Logistic regression	Status inconsistency- Job insecurity Work pressure	Ischiamic heart disease (IHD)	Age, Body mass index, blood pressure, cholesterol, coping	Status inconsistency ↗ IHD Job insecurity ↗ IHD Work pressure ↗ IHD	Not tested	Not applicable	--
Spector, Chen, & O'Connell (2000)	2	Ca. 12	110	Partial Korr	Interpersonal Conflict Constraints Role ambiguity Role conflict Work load	Anxiety Frustration Job satisfaction Physical Symptoms	NA	Not tested	All stressors ↗ anxiety and frustration Role ambiguity and role conflict ↗ satisfaction	Not tested	no effect on physical symptoms
Tang & Hammontree (1992)	2	6	60	Mult Reg	Stressors in police jobs	Illness	Hardiness	Stressors ↗ illness	Not tested	Not tested	-
Wolpin, Burke, & Greenglass (1991)	2	12	262	Mult Reg	Various stressors	Burnout Job satisfaction	-	Stressors ↗ job satisfaction Stressors ↗ burnout	Stressors ↗ job satisfaction Stressors ↗ burnout	Not tested	No lagged effects on burnout
Zapf & Frese (1991)	2	16	89	CLPC	Social stressors	Psycho-somatic complaints Irritation/strain Anxiety Depression	Not in CLPC	No lagged effects	Not tested	No lagged effect	No lagged effects

Note. Time lags refer to months. CLPC=cross-lagged panel correlation. Mult Reg=multiple regression analysis. NA=negative affectivity.

Table 4  
Stress Interventions on Organizations

	Individual	Organizational
Stressor-reduction	Reduction of individual stressor, e.g. time pressure	Reduction of Stressor, e.g. organizational problems
Resource-increase	Competence training	Participation in decision making; health circles
Strain-reduction	Relaxation, stress immunization, training, respites (vacations, leisure time)	Rest periods
Life-style changes	Anti-smoking program; exercise program	No-smoking buildings; Salient staircases vs. salient elevators