EFFECT OF WORKPLACE STRESS MANAGEMENT PRACTICES ON EMPLOYEE PRODUCTIVITY IN INSURANCE FIRMS IN NAIROBI COUNTY, KENYA

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DECLARATION

I declare that this work has not been previously submitted and approved for the award of a degree by this or any other University. To the best of my knowledge and belief, the dissertation contains no material previously published or written by another person except where due reference is made in the dissertation itself.

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DEDICATION

I dedicate this dissertation to Almighty God for His grace, wisdom, and strength throughout my academic journey.

To my family and friends, thank you for your unwavering love, encouragement, patience, and support, which made this achievement possible.

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TABLE OF CONTENTS

LIST OF TABLES

LIST OF FIGURES

DEFINITION OF TERMS

Employee Productivity	A measure of employee efficiency and effectiveness at accomplishing organizational goals and relates to their output in terms of efficacy, quality, and efficiency (Tzenios, 2019).
Leadership Support	Leadership support refers to any efforts made by a leader to empower employees through a task or towards the realization of specific goals (Tania, et al., 2021).
Primary Interventions	Proactive interventions that aim to prevent stress factors and promote employee wellbeing (Quick et al., 2013). Primary interventions can be directed at the organization or all employees and seek to modify the stressors such as work conflict and poor organizational culture and management support.
Secondary Intervention	Secondary interventions are reactive and proactive efforts to remove the risk factors among individuals and to enable them to cope and respond to stressors (Tetrick & Winslow, 2015)
Stress	Stress refers to an adverse psychological and physical reaction to a difficult situation such as increased job demands, personal pressures and interpersonal relationships (Grace, Leonard, & Nnaemeka, 2023).
Tertiary Intervention	Tertiary interventions are nature interventions that are usually implemented to rehabilitate and maximise functioning of employees struggling with chronic health conditions (Riva & Chinyio, 2018).
Workplace Stress Intervention	Workplace stress intervention refers to those practices taken with the aim of reducing the risk to health posed by workplace pressures (Boss et al., 2017)

LIST OF ABBREVIATIONS

APA	American Psychological Association
EAP	Employee Assistance Programs
IRA	Insurance Regulatory Authority
KNBS	Kenya National Bureau of Statistics
PLS-SEM	Partial Least Squares Structural Equation Modelling
TPSM	Theory Of Preventive Stress Management
WSM	Workplace Stress Management

ABSTRACT

The modern workplace is highly dynamic and competitive, and companies depend on their employees' ability to meet consumer expectations both in product design and service delivery. This increased pressure has resulted in higher stress levels within the workforce which may negatively impact their productivity. This has led to firms employing various workplace stress intervention programmes which may impact the overall productivity levels to different degree. Despite this the available studies have not conclusively examined this phenomenon hence this study sought to establish the effect of workplace stress management practices on employee productivity among insurance firms in Nairobi County, Kenya. The study specifically examined how primary stress interventions, secondary stress interventions and tertiary stress interventions affect the employee productivity among insurance firms in Nairobi County, Kenya. Further the moderating effect of leadership support on workplace stress intervention and employee productivity was examined. Theoretically the research was premised on the theory of preventive stress management and the managerial grid leadership theory. The research was anchored on a positivist philosophy and a quantitative descriptive design. Unit for analysis was the 58 insurance companies with the Human Resource or Wellness Manager being considered as respondents. Thus, a sample size of 58 participants was included in the study. Data collection was conducted using structured questionnaires developed using Likert scale statements. The data obtained was analyzed using a mix of descriptive, correlation and regression analysis. According to the overall study model, the stress management interventions deployed in jointly have a positive effects on the productivity of employees in Kenya's insurance sector. Independently, the analysis revealed that primary and secondary stress management interventions have positive, but statistically non-significant effects on the productivity of insurance employees. meanwhile, tertiary interventions were confirmed to have statistically significant effects on the productivity of employees in the insurance sector. Effective stress management interventions such as meditation, exercise, health assessments, post-stress support, counselling and time management training were confirmed to improve employee productivity by reducing fatigue, improving employees' wellbeing and reducing the negative impacts of workplace stressors. These findings highlight the importance of implementing comprehensive policies to support employees' wellbeing and ability to deal with workplace stressors. In view of the findings, recommendations were for insurance firms to strengthen counselling, relaxation, and meditation services which have been proved to improve employees' productivity. Policy-wise, managements were recommended to allocate a fixed percentage of their annual profits to employee wellness interventions, and to use this to create a positive public image.

CHAPTER ONE

INTRODUCTION

1.1 Background to the Study

The modern workplace is highly dynamic and competitive, and companies are exposing their employees to more work demands than ever before (Tetrick & Winslow, 2015). While in some instances, healthy pressure can motivate employees to achieve more, Daniel (2019) affirms that unhealthy pressures contribute to stress and other challenges that can negatively affect employee productivity. The CIPD's (2021) health and wellbeing at work survey indicates that the employees in the financial sector face significant workplace stress, with at least 40 percent experience some form of stress at work and at home, resulting in high distress and turnover intention. Borikar and Bhatt (2021), and Kersemaekers, et al. (2018) add that work pressures, unrealistic targets and increased job insecurity have resulted in high burnout rates, mental health issues, and increased risk of disability claims. Saleem et al. (2021) note that insurers can manage stress levels at work and ensure they have healthy, productive employees by adopting stress management practices such as emotional control reinforcement, improving the workplace environment, and reducing workplace demands.

According to Tania, et al. (2021), workplace pressures resulting from uncomfortable working environment (physical and psychological), too much work, insufficient time off, role conflict and ambiguity among others that inhibit employee productivity can be addressed through a variety of approaches aimed at addressing the root cause of stress. Dawood, Tomita and Ramlall (2022) opine that to reduce stress, organizations should create a healthy, engaging, and welcoming workplace where employees want to stay, grow and contribute their knowledge, experience and expertise. To achieve this, Tetrick and Winslow (2015) assert that they employ different strategic interventions to address workplace stressors. Hellar (2020) explains that they are designed to maintain and improve physical, mental and emotional wellbeing of employees to ensure they are healthy and able to focus on their work without stress.

According to Magano (2021), countries in developed countries have adopted the most complex mix of organizational stress management techniques. The American Psychological Association (APA, 2021), for instance, affirms that American employers have been restructuring the workplace to reduce workload, provide greater flexibility and physical exercise opportunities to address underlying health issues arising from greater workload and longer hours. Similar observations have been made in Europe where managers are providing training and leisure

opportunities, as well as promoting mental health initiatives and encouraging social interactions (Azmi, et al. 2022). In China, Tan et al. (2020) linked mindfulness training, mental health and social support to higher work satisfaction and improved performance.

These studies show the diversity of stress management approaches and their effect on stress outcomes. However, they provide evidence from companies in developed economies, which according to the American Psychological Association (2021), generally have established regulatory frameworks, high levels of mental health awareness, and institutional budgets to support the implementation of the programmes. In contrast, Stuber et al., (2021), Varga, et al. (2021) explain that in developing countries, the implementation of stress management is often restricted by a lack of foundational infrastructure and stretched budgets. Dawood, Tomita and Ramlall (2022) point out that many managers in Africa prioritize profit generation the expense of employees' wellbeing. As a result, while large firms may have the financial capacity and leadership directive to effectively implement stress management programmes, many other companies rely on ad-hoc or informal coping strategies, which fails to address the root causes of workplace stress and burnout. Varga, et al. (2021) affirmed that many employees express frustrations and feelings of despair as key stressors remain unaddressed.

In Nigeria, Mezenyele (2024) established that unmanaged occupational stress drains both physical and cognitive resources, but that many firms adopt the programs in prose, causing a greater reliance on self-taught and community-centred coping. However, while Mezenyele (2024) found a gap in stress management programme implementation, Magano (2021) confirmed that the implementation of mental health programs and organizational stress-relief activities has had significant effects on productivity through reduced fatigue and increased work engagement. Similar observations were made by Assibey-Ankrah (2021) whose analysis confirmed a direct link between welfare programs, psychological support, and job redesign and staff productivity. While informative, the study provided evidence on key practices adopted by one institution, which limits its applicability across other firms. Moreover, Mezenyele's (2024) study, which reviewed secondary literature may be susceptible to researcher bias. Conceptual gaps are also present in the study by Magano (2021), which included work engagement and burnout act as mediator variables. This study restricts itself to stress management practices.

Local evidence also reveals a high degree of experimentation with the workplace as employers seek out the most effective ways to address employee demands for healthier workspaces. Despite this, Wango, Wairire and Odiemo (2018) observe that stress intervention programs are lacking or minimally implemented among many Kenyan organizations. The researchers

confirmed the absence of critical interventions such as counselling programs, and that specialized wellness programs are largely unaffordable or inaccessible to most employees. However, Borikar and Bhatt (2021) affirm that managers are responding to employee expectations by better defining work roles, providing more flexibility, and creating more supportive work structures. Kituyi (2021) adds that many managers are restructuring the workplace to increase comfort, access to common spaces, and implementing anti-harassment policies. Mwanzia (2021) further reveals the adoption of policies on career progression, training, health and nutrition education, and policies against different forms of workplace harassment.

Despite these attempts, Gichuhi, et al., (2023) opine that there is insignificant evidence on the impact of these initiatives on employees' wellbeing. Specifically, no recent study has specifically broken the initiatives into their primary constituents, and investigated their independent effects on employees' productivity in the insurance sector. Abonyo (2020), for instance, based their analysis on the Role theory, which resulted in a focus on the impacts of workload, role ambiguity, and role conflict on employees' performance. Meanwhile, Atieno and Otsyulah (2019) limited their analysis to employee assistance programs, while Kitali (2021) evaluated the link between employee wellness programs and employees' commitment. Others such as Kinuthia et al. (2022), and Marangu (2023), deconstructed the stress management strategies into their constituents, but provided evidence from the public sector, and in the academic sector. Moreover, Kinuthia et al. (2022) used a literature review method which risks misrepresentation from increased risk of researcher selection bias. This study sought to assess the impact of the stress management practices deployed by insurers on the productivity of their employees.

1.1.1 Workplace Stress Management Practices

Stress refers to an adverse psychological and physical reaction to a difficult situation such as increased job demands, personal pressures and interpersonal relationships (Jacobs, Johnson & Hassell, 2018). Assibey-Ankrah (2021) identifies the physical conditions, interpersonal relationships, individual, work tasks and role ambiguity as the main sources of stress in the workplace, confirming that these stressors have adverse effects on employees' mental and physical wellbeing, and consequently, their job performance. Saleem, et al., (2021) add that workplace stress affects employees' attention, and contributes to unintentional accidents and errors, reputational damage, and lower overall productivity.

Workplace stress management (WSM) practices refer to all those practices taken with the aim of reducing the risk to health posed by workplace pressures (Abonyo, 2020). Boss et al., (2017) consider stress management to be the provision of a psychologically conducive work environment that improves employees' ability to cope with stress. Michie (2002) avers that workplace stress management (WSM) techniques are products of Quick, Quick and Nelson's (1998) theory of preventive stress management (TPSM) which considers stress to be managed through a set of principles and methods that scale down or eliminate organizational stressors. Kinuthia et al., (2022) explain that stress management approaches include all the activities implemented to eliminate and/or reduce workplace stressors, and enable employees to cope with stress. Chikezie (2023) avers that by empowering employees to cope with stress, stress management not only addresses individual health, but also enhances organizational performance.

According to Tran et al., (2020) WSM interventions take many forms, and are usually categorized according to the level of application, whether at the organizational or individual level, and the time of application. Hargrove et al., (2011) argue that analysing WSM at the time of application provides a more comprehensive view of the different types of interventions and the stressors they are attempting to address. WSM interventions are rooted in the theory of preventive stress management (TPSM) and the public health model of disease prevention, which categorizes them into primary, secondary, and tertiary levels. Hargrove et al., (2011) point out that this grouping is critical as it enables organizations to systematically address the root causes of stress, enhance employee coping mechanisms, and provide support for recovery. The TPSM has contributed to theoretical understanding of stress management in different context and empirical exploration, with researchers Holman et al., (2018), Riva and Chinyio (2018), Alphonse (2019), Tran et al. (2020), and Grace et al., (2023) have also adopted and validated this three-tier model in their analysis of organizational stress management interventions.

Quick et al. (2013) opine that primary interventions are usually proactive and aim to prevent stress factors and promote employees' health and wellbeing. Primary interventions can be directed at the organization, or all employees, and seek to detect and manage early stress symptoms Conflict management training, changes on work schedules and wellness programs are among the primary interventions that Tetrick and Winslow (2015) linked to improved individual and organizational health. On the other hand, Holman, Johnson and O'Connor (2018) identify sexual harassment policies, training programs and social support as strategic

interventions that create a safe, inclusive work environment where employees can express themselves wholly without fear of reprisal, while Alphonse (2019) established that most financial sector firms use work redesign, workplace flexibility, mentoring and development as their primary stress management interventions. These informed the current study.

Secondary interventions are reactive and proactive efforts that aim to remove the risk factors among individuals and to enable them to cope and respond to stressors (Tetrick & Winslow, 2015). Holman, Johnson and O'Connor (2018) opine that secondary interventions are usually more reactive in nature and usually focus on organizational stressors or personalized, targeting at risk employees. Secondary interventions equip suffering individuals with knowledge and skills to cope with the stressor and are implemented to empower the patient to reduce the severity or duration of symptoms. Azmi, et al., (2022) identify mindfulness training, coping and resilience training, and personal and interpersonal skill training as key interventions that improve employee productivity by improving employees' ability to deal with stress. This study investigated how these practices influence the productivity of insurance sector employees.

Tertiary interventions are reactive interventions implemented to rehabilitate and maximise functioning of employees struggling with chronic health conditions (Riva & Chinyio, 2018). Yang, Setou and Koh (2022) aver that tertiary interventions are usually directed at employees exhibiting risks and in need of assistance in the recovery process. Tertiary interventions can be personalized or organization wide such as counselling, posttraumatic stress assistance, rehabilitation after illness or employee assistance program (Yang, Setou, & Koh, 2022). Counselling programs targeted at employees suffering from traumatic experiences, health checkups for patients struggling with long Covid and smoking cessation programs to assist employees struggling with addiction challenges are among tertiary interventions proved to reduce absence and improve employee productivity (Wical, Richardson, & Bullock, 2020). This study used the indicators by Yang et al., (2022) and investigate the effect of counselling, post-traumatic stress assistance, rehabilitation after illness and employee assistance programs on employee engagement.

Tetrick and Winslow (2015) and Tran, et al. (2020) explain that primary WSM are proactive and focus on eliminating stressors at their source, that secondary techniques aim to equip employees with the tools adequately deal with stressors when they arise, while tertiary techniques are reactive and aim to provide remedial support, rehabilitation, and recovery to employees who are affected by stressors. Essentially, these interventions aim to improve employees' ability to deal with workplace stressors more effectively (Grace, et al. 2023).

According to Tetrick and Winslow (2015), there is a school of thought that considers primary interventions to be the most effective at addressing individual stressors, followed by secondary interventions, and finally tertiary interventions. Bhui et al. (2016) opine that personalized interventions are more impactful at addressing stressors such as depression and anxiety, but confirm that they may not impact organisational outcomes such as absenteeism, which is a key determinant of an employees' productivity. This study examined how these three types of interventions affect employee productivity in the insurance sector.

1.1.2 Employee Productivity

Employee productivity refers to the value or amount of work accomplished by an employee within a certain period of time (Roczniewska, et al., 2022). Tzenios (2019) considers employee productivity to be a measure of employee efficiency and effectiveness at accomplishing organizational goals and relates to their output in terms of efficacy, quality, and efficiency. Productive employees make or break an organization's success Hunawan (2023) avers that employee productivity is a factor of their mental and physical state, with healthy employees being necessary for the realization of organizational goals. According to Hunawan (2023), employee productivity is the most critical component of an organization, enabling and assisting the company to maximize the potential of its human resources, improve service delivery and conduct themselves in professional ways that contribute to the realization of corporate goals and objectives.

Various factors have been shown to influence employees' productivity, including their qualifications, motivation, health, and organizational support (Alphonse, 2019). Tzenios (2019) notes that employees are more effective when they feel supported, empowered and in the correct mental state, and that job security, autonomy and inclusion has positive effects on employees' productivity. This entails that organizational productivity is dependent on certain predetermined standards and varies from one firm or department to another. Researchers into employee productivity have used diverse criteria such as the quality of work, individual and organizational relationships, timeliness and independence (Orji & Yaakubu, 2020); effectiveness, efficiency and commitment (Hunawa, 2023); hours worked, hours absent and customer satisfaction (Street, Lacey, & Somoray, 2019).

Insurance sector employees are expected to complete their work on time, efficiently and are engaged in manner that will satisfy customer expectations (Alphonse, 2019). Marangu (2023) also used quality and timeliness of services provided, target realization, employees' task

efficiency, and customer satisfaction as indicators of employee productivity. These indicators are relevant to insurance firms and this study used them as measures of employee productivity in the sector.

1.1.3 Insurance Firms in Nairobi County

Kenya's insurance sector is regulated by the Insurance Regulatory Authority (IRA) and is composed of insurance companies, reinsurers, and intermediaries such as insurance brokers and bancassurance intermediaries, risk managers and other service providers (Muturi, 2021). The regulatory authority has registered 58 insurance companies, 193 insurance brokers and 144 insurance investigators among other service providers (IRA, 2021). The main contribution of the sector to the economy lies in contribution to the provision of financial security, mobilization of savings and the promotion of investments. Kenya's insurance penetration rate is low, however, and has stagnated at between 2.55 and 2.24 percent of the adult population between 2017 and 2021 (KNBS, 2022). In 2021, Nairobi County accounted for 79.6% of the total gross direct premiums in the country, with the premiums increasing from KES 234.78 billion in 2020 to KES 273.71 billion in 2021, a 16.6% increase. The asset base also grew by 11.1% from KES 765.58 billion in 2020 to KES 850.51 billion in 2021 (IRA, 2021).

The IRA (2021) reports that most Kenyans access insurance services from insurance agents, then insurance brokers and only 13.5% source them through direct business. The report confirms that Nairobi County has the highest number of insurance industry players and accounts for 55% of the total number of insurance industry players in the Country. Regarding the consumers' satisfaction, the IRA (2021) reports a 77% customer satisfaction index, up from 64% reported in 2020. The report confirms that customer satisfaction, access and the institutions' competitiveness has been maintained through the integration of new financial technology innovations.

Despite increased customer satisfaction, Gichungu (2024) aver that the competitive, target-driven nature of the sector has resulted in increased work demands, pressures to meet sales targets, and worries about job security. Kiptoo et al. (2021) found that despite growing by between 8 and 25 percent within the last decade, the insurance sector has one of the highest turnover rates in the financial sector, at 26 percent, compared to the banking sector, which averages 18 percent. Issues around lack of support, burnout and the sector's inability to retain top talent is a matter of concern for the sector's productivity (Alphonse, 2019; Muturi, 2021).

Effective stress management techniques increase employees' wellbeing, morale, engagement, and productivity by reducing fatigue, burnout, and absenteeism among employees.

While there is evidence that insurers have adopted a variety of stress management techniques such as workplace restructuring, skills development, teambuilding, counselling and recognition to address stressors, there is insufficient evidence on their impact on productivity outcomes (Grace, et al. 2023; Marangu, 2023). This study sought to fill this gap through analysis of the stress management techniques on insurance employees' productivity.

1.2 Statement of the Problem

Insurance sector firms play a critical role in the global economy, providing essential financial protection against unforeseen events, mitigating risks, and promoting economic growth (Francisca, et al., 2021). However, Borikar and Bhatt (2021) opine that their ability to realize this function is threatened by the high-stress environments inherent to the industry, characterized by work intensification, long hours, political pressures, and relentless customer demands. These conditions expose staff to significant psychological and physical burdens, with Kubo et al. (2024) documenting extreme consequences like "Karoshi", or death by overwork as a consequence of poor workload management in developed nations. In Kenya, intense work environments are a primary driver of stress among insurance agents, and poor workload management is directly linked to burnout and diminished productivity (Muturi, 2021). To mitigate these effects, many firms have adopted stress management practices, including flexible work arrangements, wellness programs, and Employee Assistance Programs (EAPs). However, the effectiveness of these interventions in improving employee productivity, specifically within the Kenyan insurance context, remains critically understudied (Alphonse, 2019). This leaves a significant gap in understanding how to develop cohesive and context-specific solutions.

Internationally, studies linking stress interventions to productivity and engagement (Lu et al., 2017; Tan et al., 2020; Saleem et al., 2021; Azmi et al., 2022; Boone et al., 2023) are constrained by sectoral specificity as they mostly inform conditions in the manufacturing or multi-country settings, or are temporarily limited as they evaluated stress management within the abnormal conditions of the COVID-19 pandemic. Moreover, Colenberg and Jylhä (2021) relied on literature reviews rather than primary data, limiting their applicability to the unique pressures of the Kenyan insurance sector. At the regional level, the research suffers from similar shortcomings, as studies such as Gbemre (2022) provide evidence from Nigeria's oil

and gas sector, while Orji and Yaakubu (2020) evaluated employee engagement in public institutions.

Locally, studies by Gichuhi et al. (2023) and Gichungu (2024) limited their scope to management support factors and work environment determinants of turnover, rather than examining whether stress management practices have any impact on productivity outcomes. Meanwhile, Alphonse (2019) and Oluoch (2015) investigated a single firm, constraining the generalizability of their findings. These geographical, sectoral, contextual, conceptual and methodological gaps mean there is insufficient understanding of how workplace stress management practices predict employee productivity, specifically within the Kenyan insurance sector. This study sought to fill that void by carrying out an empirical examination into the effect of workplace stress management practices on the productivity of insurance sector employees in Nairobi County, providing primary, sector-specific evidence thar can inform both managerial practice and theoretical understanding.

1.3 General Objective

The general objective of this research is to establish the effect of workplace stress management practices on employee productivity among insurance firms in Nairobi County, Kenya.

1.3.1 Specific Objectives

i. To examine the influence of primary workplace stress management practices on employee productivity among insurance firms in Nairobi County, Kenya.
ii. To determine the effect of secondary workplace stress management practices on employee productivity among insurance firms in Nairobi County, Kenya.
iii. To establish the effect of tertiary workplace stress management practices on employee productivity among insurance firms in Nairobi County, Kenya.

1.4 Research Questions

i. To what extent do primary workplace stress management practices affect employee productivity among insurance firms in Nairobi County, Kenya?
ii. To what extent do secondary workplace stress management practices affect employee productivity among insurance firms in Nairobi County, Kenya?
iii. To what extent do tertiary workplace stress management practices affect employee productivity among insurance firms in Nairobi County, Kenya?

1.5 Scope of the Study

This study examined the effect of workplace stress management practices on the productivity of employee in Kenya's insurance sector. The study was geographically limited to an analysis of 58 insurance firms registered and operating in Nairobi County, Kenya. The study targeted the human resource managers and wellness managers within each of the insurance firms as the unit of analysis. These were the primary subjects of the research as they have direct oversight of institutional stress management practices, strategic policy-making, and performance differences among employees upon the institution of wellness programs. Contextually the study specified the effect of primary, secondary, and tertiary stress management practices, as anchored by the theory of preventive stress management and the and principles of the public health model of disease prevention. Theoretically, the study was informed by Quick et al.'s (1998) theory of preventive stress management. The time scope of the research was between April and May 2026.

1.6 Significance of the Study

This study aims to identify intervention strategies that would create a positive work environment and reduce the stress experienced by insurance sector employees. This study's findings will be important to insurers who, according to the IRA (2021) should improve work conditions and address employee health challenges. The findings will highlight the influence of stress management policies and make suggestions on how insurance providers can make stress management more profound and effective.

This study will also be important to the management in insurance firms who make strategic decisions relating to formulation of stress management strategies that will increase employees' commitment to better performance. The human resource personnel can also use the results from the study to review organizational policies and ensure the adopted stress management measures are appropriate and improve on employee retention.

Lastly, this study will be important to academicians and scholars who will use the material as a source of information, an item of reference and a source of future research topics. This study will also assist in the identification of the most effective stress management practices and update current research on employee wellness initiatives.

1.6 Chapter Summary

This chapter focused on reviewing the research problem, providing the conceptualization of the study objectives, the relationship between the study variables and the importance of

carrying out analysis into how workplace stress management practices influence the productivity of employees in the insurance sector. The chapter concludes with a chapter summary.

CHAPTER TWO

LITERATURE REVIEW

2.1 Introduction

This section presents the theoretical and empirical review sections. The study was founded upon the Theory of Preventive Stress Management. The chapter then presents a summary of the research gaps, the conceptual framework and a table conceptualizing the study variables.

2.2 Theoretical Review

2.2.1 Theory of Preventive Stress Management

According to Cooper (1998), various theories can explain organizational stress including Maslach's (1998) theory of burnout, Theorell's (1998) job demand–control model, Edwards, Caplan, and Van Harrison (1998) person–environment fit theory, and Quick, et al.'s (1998) theory of preventive stress management (TPSM). Quick et al. (1998) presented a conceptual model that specifies the organizational stress process, proposing that the preventative interventions in public health flow from the stressors to the stress response to outcomes. Quick et al. (1998) defined stressors as the causal factors of which exposure to increases stress, and triggers response to the stress. As earlier, indicated, work pressures can produce positive or negative outcomes, a condition defined as eustress and distress by Quick et al. (1998). In organization, positive response to stress increases performance while negative response to stress was linked to increased medical, psychological, and behavioural distress.

As Cooper (2002) contends, Quick et al.'s (1978) TPSM is model was translated from the public health context, assuming that in an organization context, the best way to address workplace stress is to prevent it by focusing on the stressors. Hargrove et al. (2011) add that they hypothesized that dealing with stress at its sources is key to producing the best health and performance outcomes. In this context, the TPSM is a useful tool through which organizations can promote individual and organizational health, and ultimately organizational performance. Quick et al.'s (1978) averred that stress management interventions take many forms and utilize numerous strategies that can be divided into three main stages; primary intervention techniques that aim to directly managing or change the stressor, or one's perception of the stressor, secondary interventions that aim to improve response to stressors, and tertiary interventions aimed at treating the symptoms of distress.

Hargrove et al. (2011) note that the theory also recognizes the influence of committed leadership on the implementation of effective preventive stress management techniques in an organizational context. Macik-Frey et al. (2009) affirm that it is the leaders' responsibility to build and promote positive health within organizations, while according to Abonyo (2020), leaders set the culture, principles and attitude that define organizations' approach and considerations when health factors are considered. Berger, et al. (2023) add that leaders committed to creating a happy, healthy environment will introduce more effective preventive stress management programs and that leaders' understanding of what employees' value within a society is key to the design of and implementation of preventive stress management practices.

Abonyo (2020) used the theory in analysis of the influence of stress management practices on the performance employees at the Kenya Airways while Assibey-Ankrah (2021) used the study in analysis of the effect of stress management practices and employees' performance at the University of Cape Coast. Record (2021) also used the study in analysis into the perceptions of students on the role of administrators in managing teacher stress. This study hypothesizes that interventions categorized into primary, secondary and tertiary levels, as well as leadership support should influence the quality of intervention programs and their impact on employee well-being and performance in the insurance sector. This theory anchors the three stress management approaches that can be used in the insurance sector.

2.3 Empirical Review

This section provides a review of previous researchers' findings on the relationship between the study variables. The discussion in this section were presented in line with the study objectives.

2.3.1 Primary Stress Management Practices and Employee Productivity

Primary stress management practices refer to the strategies and practices undertaken with the aim of reducing exposure to stress by changing organizational practices and policies (Anger, et al., 2015). Holman et al. (2018) aver that these interventions aim to address causes of stress through making employees more satisfied in their workplace by improving the quality of the work environment. Anger, et al. (2015) mention leadership, work-life balance, schedule flexibility and job redesign as the most common interventions reported in literature on stress management approaches.

Considering work ergonomics as an important determinant of employees' safety and health, Latip et al. (2022) sought after employees' perspectives of work ergonomics on task

performance. The study relied on correlation, and multiple regression analysis. Findings were that proper design of the workplace reduced staff turn-over and helped protect employees from illness and injuries such as muscle pain. Employees confirmed that physical, organizational, and cognitive ergonomics increase work efficiency and productivity, but the study collected data from hotel employees in Malaysia. While hotel staff may also have direct contact with customers, the findings do not inform the unique context in insurance firms. Meanwhile, Ravindran (2019) used Chi-square and ANOVA in analysis of the effect of ergonomics on employees' work performance in the manufacturing sector and confirmed a direct link between ergonomic investments and employee wellbeing, work satisfaction and productivity. The study confirmed the importance of investing in comfortable chairs, tables and work machines, but limited their analysis to ergonomic investments. This study extended this conceptualization to include secondary and tertiary interventions.

Masterizki, Armanu and Irawanto (2019) also limited their analysis to ergonomic factors such, but focused on factors such as room temperature, lighting, noise, and computer positioning on employees' performance. Analysis results were that modern room design with adequate lighting, temperature, minimum noise, and appropriate monitors all improve employee comfortability which correlates with better quality and quantity of work done, timely completion of work tasks, improved teamwork, and reduced supervision. The study involved employees in a university but relied on interviews in data collection. Thematic analysis' reliance on subjective judgment and logistical demands restricts the generalizability of the findings as they fail to identify context-specific correlations between study variables.

Riaz, Shoaib and Sarfraz (2017) specified the effect of workplace design on the performance of employees in Pakistan's software sector, confirming that employees in the sector work long hours on computers which can lead to musculoskeletal and visual discomfort. Linear regressions were used in analysis and findings were that workplace design has significant positive effects on employees' health and performance with the quality of furniture, noise levels and lightening being the most significant and spatial arrangement being the least significant. The study was specific to staff working long hours with minimal interaction with customers while insurance staff have to interact with customers hence have different expectations. The study has similar limitations to Ravindran (2019) as it also failed to include secondary and tertiary interventions in its analysis, which was the focus of the current study.

Sinno et al. (2020) evaluated the impact of workplace design and employee ergonomics on the productivity of employees in architectural workspaces in Lebanon. The study collected data

from designers and findings were that ergonomically certified workspaces have significant impacts on creativity, productivity, and quality of architectural products. Specifically, the quality and quantity of light, the type of wood used for the desks, and the room temperature reduce absenteeism and employee turnover and increase performance outcomes. These findings are unique to architectural workspaces where there is minimal interaction with customers. This implies the interventions address stressors that differ significantly from the setting in insurance firms.

Hellar (2020) used a case study research design that evaluated the effect of workplace ergonomics on the performance of healthcare employees in Tanzania. The study involved interviews with managers, healthcare providers and non-clinical staff and findings pointed to moderate knowledge of the importance of office ergonomics among the respondents. However, the size, temperature, light airflow, furniture, and noise level of the office all have significant impacts on employee performance. The study also found a positive effect of proper scheduling, provision of quality tools and equipment, as well as technology and hospital design on work efficiency and productivity. The study as similar weaknesses to Sinno et al. (2020) as it focused on a healthcare setting where staff demands may vary from insurance firms. Moreover, stressors in the healthcare sector differ significantly from those in the insurance sector.

Locally, Mutegi, Joshua and Kinyua (2023) researched on the effect of workplace safety programmes on employee productivity indicated by productivity, time management, task accomplishment, and value-added. The study used a cross-sectional survey design, focused on manufacturers, and used multiple regressions in analysis. Findings were that safety and ergonomic training, emergency management, and risk transfer have significant impacts on employees' confidence and productivity. Manufacturers were compelled to comply with the safety training standards fully and regularly conduct internal environment assessment, conduct safety seminars and drills, provide safety manuals, and institute safety rules and procedures to guarantee the physical health of employees. The study was unique to safety practices, while the current examines multiple stress management interventions implemented in insurance firms.

2.3.2 Secondary Stress Management Practices and Employee Productivity

Secondary stress management practices are those practices instituted to improve employees' ability to cope with stressful situations and experiences (Riva & Chinyio, 2018). The researchers affirm that these practices often involve the provision of training and education on

stress management to enable employees reduce the negative effects of a stressful work environment. Holman et al. (2018) aver that these interventions can be targeted at the individual or organizational level and in literature, are guided by cognitive theory and cognitive behavioural intervention programs such as relaxation or meditation programs, deep breathing sessions as well as skills training and career development have been previously associated with improved responsiveness and better general health (Riva & Chinyio, 2018; Lu, et al., 2017).

Hypothesizing that psychological and social influences can impact employees' task performance, Vuong, Tushar and Hossain (2022) examined the impact of social support on employee outcomes in the presence of organizational support. The study focused on Vietnamese SMEs and relied on partial least squares structural equation modelling (PLS-SEM) in hypothesis testing. Analysis results were that in the presence of organizational commitment and innovation, supervisory and co-worker support are key drivers of performance. Specifically, supervisors help and guidance, as well as co-worker assistance was confirmed to provide physical, emotional, and informational support which increased employees' self-efficacy and commitment to organizational goals. The study suffers similar conceptual limitations to Mutegi et al., (2023) as it focused on social support within SMEs, which this study categorizes as a primary intervention. Moreover, this study included large insurers.

Arguing that one has to understand the cause of stress to provide effective solutions, the researchers Giao, Vuong and Tushar (2020) evaluated the effect of social support on job-related behaviors in Vietnam. The study also used PLS-SEM in analysis and findings were that social support has a significantrt positive effect on workplace satisfaction and performance. Moreover, employees with a higher internal locus of control were less stressed highlighting the importance of setting up an atmosphere that supports psychological well-being. The study also has similar gaps to Vuong et al., (2020) and Mutegi et al., (2023) who all restricted their analyses to social support. This study's scope extended to multiple levels of stress management initiatives.

Grace, Leonard and Nnaemeka (2023) assessed the SMTs employed by manufacturers in Nigeria in research that employed a descriptive survey research design. The study specified the effect of meditation and relaxation techniques and used regression analysis. From the analysis, meditation techniques were key to enhancing employee effectiveness while relaxation techniques enhanced employees' job satisfaction. Relaxation exercises were associated with reduced heart rates and healthy blood pressure while mindfulness helped improve employees' self-compassion, perspectives, and general mental wellbeing. The study informs different

levels of mental wellness programmes, but did not expand its analysis to physical and emotional health interventions, which limits the scope of its relevance.

Ogomegbunam (2023) also evaluated Nigerian manufacturer's SMT practices and their effect on employee performance and findings were that strategies such as workplace social support improve employees' coping competence and abiilty to confront stressful work situations. The research ascertained that time management approaches such as scheduling, to-do lists, and planners were the most adopted SMTs which reduced work-life conflict and improved task outcomes. The study was unique to physical health of employees in the manufacturing sector while the current expounds insurance sector firms whose security needs and workplace environment differs significantly from insurers. Moroever, the study founded its conceptual framework on the social exchange theory which predicts reciprocity; the currents' grounding on the theory of preventative stress management differs from this prediction.

The research by Wanderi (2023) was on the effect of employee relations management on the performance of employees in public universities. The study used a descriptive approach and regression analysis results were that incorporation of employee voice ni work scheduling and design, training, recognition, remuneration and promotion all have significant influences on employees self-worth and confidence which results in higher quality performance. Mindfulness training was helpful in reducing workplace stress and anxiety but in the context of employees in the public sector. This study specifies private sector firms where workplace conditions differ significantly from employees in the insurance sector.

Arguing that employees need to possess the right skills, attitude, experience, and knowledge, Njagi (2019) examined the effect of the workplace environment on the organizational performance of employees in public universities in Kenya. The study used a cross-sectional descriptive design and specific focus was on the effect of ergonomics, supervisor support and motivation. Inferential analysis results revealed that motivational attempts were the most significant determinant of performance outcomes with an all-inclusive reward system, transformational leadership and employee involvement being singled out as effective workplace interventions. Similarly to Wanderi (2023), the study provided evidence from public sector firms whose workplace conditions differ significantly from insurance sector. Consequently, the findings cannot be representative of the experience of insurance staff.

Kinuthia, Wambua and Kiiru (2022) carried out literature review on the effect of occupational stress interventions on the performance of teaching staff in Kenyan Universities. The paper

was guided by four theories and the findings of the review were that health promotion, relaxation techniques, mindfulness training, psychosocial interventions and interpersonal skills training have significant impacts on the performance of academic staff. Workplace social support was noted to reduce the effect of job demand on stress but within universities while the current specifies insurance firms. The study has a similar gap to Wanderi (2023), and its findings of the cannot be extended to insurance sector staff.

2.3.3 Tertiary Stress Management Practices and Employee Productivity

Riva and Chinyio (2018) define tertiary stress management practices as rehabilitative practices aimed at minimizing the harmful effects of stress after occurrence. While primary interventions are aimed at preventing the occurrence of an illness and secondary to improve coping with stress factors, Yang, Setou and Koh (2022) assert that tertiary do not prevent but are designed to empower employees to better recover from ill health resulting from stress. Quick et al. (2013) note that they reduce the symptoms and impact of operational stress injuries. Employee assistance programs, medical care and psychological counselling and therapy are among the most commonly identified tertiary occupational interventions in literature (Anger, et al., 2015; Riva & Chinyio, 2018; Tetrick & Winslow, 2015).

Cohen et al. (2023) opine that workplace interventions were key to reducing workplace stress during the COVID-19 pandemic in a systematic literature review that focused on the impact of SMTs employed in healthcare settings on healthcare professionals' burnout. From the analysis, mindfulness-based practices, meditation and yoga, gratitude journaling and coaching were identified as important interventions that improve employees' mindset, work engagement and quality of life and resilience, resulting in reductions in burnout, perceived stress, anxiety, and depression. The study specified burnout, while this study explores employee productivity. This conceptual difference leaves a critical gap regarding how workplace interventions influence productivity. Moreover, the study used a literature review in analysis

Similar observations were made by Johnson, Park and Chaudhuri (2020) in their study on the scope and outcomes of mindfulness training in the workplace the individual, group, and organizational levels. The study adopted an empirical literature review which revealed that most of the evidence points to a positive effect of mindfulness-based training interventions on employees' mental health, wellbeing, and performance. The researchers noted that despite its benefits, few organizations have integrated mindfulness-related practices into training and development activities. The study reviewed secondary literature, while the current used

primary data. Moreover, it limited its scope to analysis of mindfulness training; the current study specified primary and secondary interventions.

On the other hand, according to Bartlett et al. 92019), there is insufficient data to support the assertation that mindfulness training can enhance employee performance and reduce the negative effects of burnout. The research was a systematic review and meta-analysis of workplace mindfulness training and used meta-effect estimates in analysis. Instead, the study findings supported that mindfulness training improves stress management, reduces anxiety and psychological distress, resulting in general well-being. Kersemaekers et al. (2018) also evaluated the effect of mindfulness training, but included meditation and psychoeducation on employees' psychological well-being and productivity. The study focused on four companies and linear mixed model analyses, and findings were that the initiatives reduced burnout, stress levels, and enhanced well-being. To the organization, there was better teamwork, improved team climate, cooperation, productivity, and perceived stress. The study's findings were limited by the fact that the study used a small sample size of only four companies.

The analysis by Farman, Tuzlukaya and Boduroğlu (2020) was on the effect of employee assistance programs (EAP) on workplace health in Turkey, collecting data through in-depth semi-structured interviews. The study used an exploratory design and observed that the EAPs that support counselling and consultation increase employees' concentration, problem solving, productivity and morale. The study used thematic analysis which means its findings can be subjective to the researchers' interpretation. Azmi et al. (2022) also carried out assessment into the effect of EAPs in Malaysia, the United Kingdom and Australia on employees' mental health. Comparative analysis revealed that policy implementation is key to effective uptake of assistance programs that offer counselling sessions, workshops, and support group and that these programs promote employees' mental health and ultimate productivity. The study compared the effectiveness of EAPs in different regions while the current is unique to Nairobi County.

Locally, Atieno and Otsyulah (2019) assessed the impact of EAPs on employees' satisfaction and productivity in universities. A descriptive survey research design guided the study and analysis involved regressions. Observations were that health care and practices counselling services have a significant positive effect on job satisfaction while benevolence support exhibited a negative relationship. The study called for greater recognition, team meetings, stress screening, and counselling to help employees recover from traumatic experience but provides evidence from university employees. Similarly to Azmi et al. (2022), the scope of the

study was limited to analysis of EAPs only, this contextual limitation implies the findings cannot inform the influence of secondary and tertiary interventions.

In the University of Cape Coast, Ghana, Assibey-Ankrah (2021) used a descriptive approach and linear regressions in analysis of the effect of SMTs on employee performance. The study specified data from administrative staff and results of the analysis were that job redesign, training and development, psychological support, and employee welfare programmes all promote workplace health and employee performance. While informative, the study's focus on academic staff implies a contextual gap in understanding how SMTs influence productivity of insurance firm staff.

Kinuthia et al. (2022) also focused on Kenyan universities in analysis of the effect of occupational stress intervention practices on the performance of academic staff. The study was founded on the person-environment fit theory and the cognitive dissonance theory, and regression analyses findings were that primary, secondary, and tertiary occupational stress intervention programs improve the performance of academic staff. Key among these were disability management and vocational rehabilitation programs, but the study was on university staff whose environmental conditions differ significantly from the experience of insurance firm employees.

2.4 Summary of Research Gaps

The studies reviewed provide key insights into the different interventions and their impact on employees. However, these studies differ significantly and had inconsistent findings as well as methodological limitations. Researchers such as Cohen et al. (2023), and Lu, et al., (2017) provide evidence on stress management practices from the perspective of developed countries while the current focuses on developed countries where many leaders are unaware of these stress management practices. This presents a contextual gap as the environment in developed countries differs significantly from developed economies where many companies struggle with structural limitations and affordability challenges.

Other researchers such as Tan, et al. (2020), and Kumar and Jin (2022) specified addressing workplace stressors during the COVID-19 pandemic; this study focuses on SMTs adopted in normal times. Various studies also have methodological gaps such as Ohadomere and Ogamba (2021) Johnson, Park and Chaudhuri (2020) and Gbemre (2022) who used secondary literature review and interviews in data collection; the current used primary data in its analysis to limit researcher bias and subjectivity in analysis. The study also identifies gaps in the target

population as many studies were conducted in the manufacturing, IT, SMEs, and even the public sector (Riaz et al., 2017; Njagi, 2019; Mutegi, et al., 2023). The findings from these studies cannot explain the situation within the insurance sector. Finally, some studies such as Atieno and Otsyulah (2019), Hellar (2020), and Mezenyele (2024) had conceptual limitations as they evaluated only one type of intervention, social and employee assistance programs.

This study seeks to fill this gap by analysis of primary, secondary and tertiary interventions on employee productivity within insurance firms. Table 2.1 below presents a summary of the research gaps that emerged.

Table 2.1 Summary of Study Gaps

Author	**Title**	**Findings**	**Research Gap**	**How the gap was addressed**
Masterizki, Armanu and Irawanto (2019)	How ergonomic factors contribute to employees' performance	Modern design, adequate lighting, temperature, minimum noise, and appropriate monitors improve employee comfortability and eventual performance	The study presented conceptual gaps having only evaluated ergonomic techniques	This study evaluated primary, secondary, and tertiary interventions
Farman, Tuzlukaya and Boduroğlu (2020)	Can employee assistance program be a solution for improving workplace health? A case of Turkey	EAPs that support counselling and consultation increase employees' concentration, problem solving, productivity and morale.	The study provides a geographic gap having been conducted in Turkey	This study focused on Kenyan insurers and address more that tertiary interventions
Kinuthia et al. (2022)	Critical Review of Literature on Effect of Occupational Stress Interventions on Performance of Academic Staff in Kenyan Universities: A Research Agenda	Occupational stress intervention approaches have significant effects on the performance of academic staff	The study presents a contextual gap having evaluated performance of academic staff	This study examined performance of insurers

Mutegi, Joshua and Kinyua (2023)	Workplace Safety and Employee Productivity of Manufacturing Firms in Kenya	Safety and ergonomic training, emergency management, and risk transfer have significant impacts on employees' confidence and productivity.	The study focused on safety interventions seeing that it evaluated safety programs instituted by manufacturers	This study focused on programs implemented in the insurance sector
Vuong, Tushar and Hossain (2022)	The effect of social support on job performance through organizational commitment and innovative work behavior: does innovative climate matter?	In the presence of organizational commitment and innovation, supervisory and co-worker support are key drivers of employee performance	The study provided methodological gaps having relied on PLS-SEM	This study relied on regression analysis
Cohen, et al., (2023)	Workplace interventions to improve well-being and reduce burnout for nurses, physicians and allied healthcare professionals: a systematic review	Mindfulness-based practices, meditation, yoga and acupuncture, promoting a positive mindset and workload reduction, job crafting and peer networks increase productivity of healthcare professionals	The study relied on secondary review	The current collected data from primary sources

2.5 Conceptual Framework

A conceptual framework depicts the hypothesized relationship between the study's dependent and independent variables. This study predicts that primary, secondary, and tertiary interventions should improve employees' productivity.

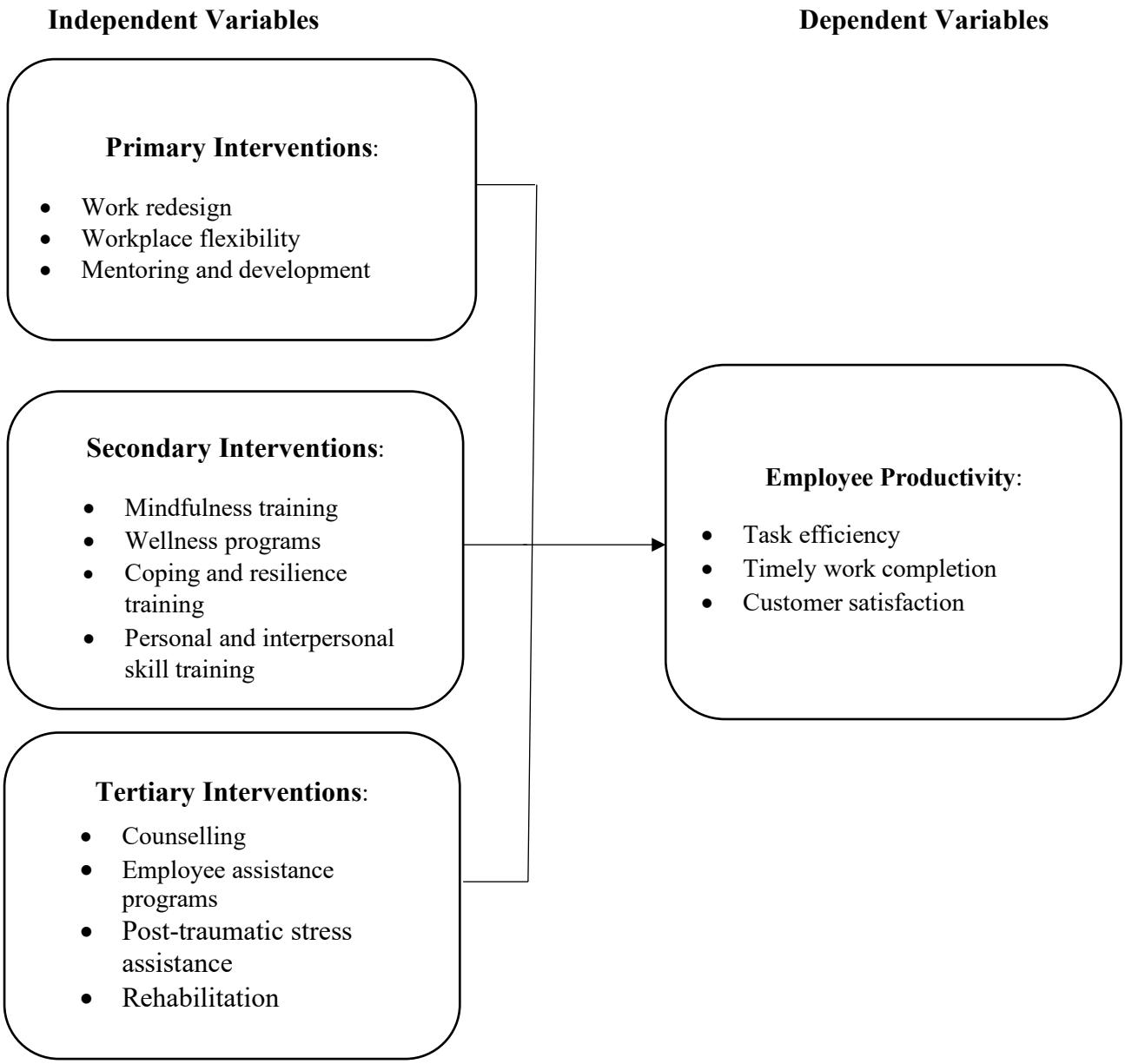

Figure 2.1 Conceptual framework

Source: Researcher (2026)

2.6 Operationalization of study variables

The framework above has captured how the predictor variables; workplace stress management interventions were operationalized, and their expected effects on the productivity on the productivity of employees in the insurance sector.

Table 2.2 Operationalization of Research Variables

Variable	**Indicators**	**Data collection tool**	**Data analysis**	**Supporting literature**
Primary Interventions:	• Work redesign • Workplace flexibility • Mentoring and development	Structured questionnaire; 5-point Likert scale	• Descriptive analysis • Factor analysis • Inferential analysis	(Colenberg & Jylhä, 2021; Masterizki, et al. 2019)
Secondary Interventions:	• Mindfulness training • Wellness programs • Coping and resilience training • Personal and interpersonal skill training	Structured questionnaire; 5-point Likert scale	• Descriptive analysis • Factor analysis • Inferential analysis	(Johnson, Park, & Chaudhuri, 2020)
Tertiary Interventions:	• Counselling • Employee assistance programs • Post-traumatic stress assistance • Rehabilitation	Structured questionnaire; 5-point Likert scale	• Descriptive analysis • Factor analysis • Inferential analysis	(Atieno & Otsyulah, 2019)
Employee Productivity:	• Task efficiency • Timely work completion • Customer satisfaction	Structured questionnaire; 5-point Likert scale	• Descriptive analysis • Factor analysis • Inferential analysis	(Kituyi, 2021; Grace, et al. 2023)

Source: Researcher (2026)

2.7 Chapter Summary

This chapter provided a review of previous researcher' findings on the relationships between the dependent and the independent variables. The studies are nested within the three major categories of workplace stress management practices and were presented in line with the study objectives. The gaps are then identified and the conceptual framework provided. The study concludes by providing the table of operationalization

CHAPTER THREE

RESEARCH METHODOLOGY

3.1 Introduction

This chapter entails a review of the various methodologies and procedures that was incorporated in the course of solving the research problem. The main areas in the methodology include the philosophy, design, population of the study, sampling design and data collection instruments. Further, the data collection procedures, research quality, data analysis and ethical considerations was presented.

3.2 Research Philosophy

Research philosophy underpins the cognitive approach utilized by the researcher that directs the understanding of the topical area and focuses as the bedrock of the study by identifying the choice of research methodologies, formulation of research problem and how to collect and process study data (Ryan, 2018). There are five main basic research philosophies; positivism, interpretivism, pragmatism, realism, and postmodernism viewpoints. The selection of the ideal research philosophy is vital as it underpins how the study was conducted (Hughes & Sharrock, 2016). This survey adopted positivism research philosophy which holds that the researcher has no influence on the research problem and the results are objective and not influenced by the researcher (Baškarada & Koronios, 2018). Through adoption of a positivism philosophy this study was able to gather direct observation and largely utilize quantitative approaches in determining the relationship between the research variables. Thus, this philosophy was ideal in this study as it sought to identify relationship between workplace stress intervention, leadership support and employee productivity.

3.3 Research Design

The research design is the general framework that is applied in guiding the researcher in answering the study problems (Ruane, 2016). The right research design is necessary to ensure the goals of the study are attained through applying the right participants, tools, and analysis approach (Bryman, 2016). This research utilized a descriptive cross-sectional design as it allows for the accurate description of the characteristics of a particular group (Walliman, 2021). The selection of the design is justified since it supports observing subjects within their natural setting thus allowing for reliable information to be obtained. The design was instrumental in this study as it supports the application of quantitative tools and statistical analysis approaches to determine the relationship between research variables.

3.4 Target Population

Bryman (2016) indicated that the population of the study is the definite group of individuals, items or subjects with common characteristics that are deemed suitable to be included in the research. Making sure, the right participants are recruited in the study ensures that valid information is obtained that can help in identifying the link between the variables (Walliman, 2021). The unit of analysis for the study was drawn from the registered insurance firms by Insurance Regulatory Authority as of 2023. The study population was the 58 registered insurance companies in Kenya. The research targeted the Human Resource Manager / Wellness Manager within each of the insurance firms. This selection was based on their unique position within the firm which allows them access to information on how various workplace stress intervention practices and leadership supports has influenced employee productivity. The target population was 58 executives drawn from the insurance firms in Kenya.

3.5 Sampling Design and Sample Size

Sampling entails the various methods and procedures that are utilized in selecting the specific individuals from the study population who was considered as representative of the collective group (Walliman, 2021). The research utilized purposive sampling in selecting only the Human Resource Manager / Wellness Manager of the insurance companies as the participants for this survey. The inclusion of the managers was expected to provide the study with an organizational level snapshot on how introduction of various workplace stress management practices has impacted the overall unit productivity. By selecting these managers, the study was able to get subjective views of how these aspects related to each other within the industry.

The study sample is the representative subset of the sample frame for the study that is considered for the study to ensure the findings can be generalized for the entire population (Bryman, 2016). The research considered all the representatives of the sample frame for the main research thus the overall sample size for the study was 58 Human Resource Manager/Wellness Manager drawn from the operating insurance companies in the country.

3.6 Data Collection Instruments

Data collection encompasses the various methods and tools that are adopted in the study with the aim of obtaining the right information that can be applied in solving the research problem (Bryman, 2016). There are generally two main sources of research data; primary or secondary. This study considered primary research data that involves obtaining research data directly from respondents through either utilizing interviews, observations, or questionnaires. The research

dominantly utilized a structured questionnaire that ensured uniformity in the instrument thus easing data collection and analysis (Phakiti, 2015). The questionnaire was developed using the conceptualization of the study variables. A 5-point Likert scale was utilized in the research tool. The questionnaire had the following sections; Part 1 examined on demographic information, Part 2 contained statements on employee productivity, Part 3 examined on the three key workplace intervention practices and the last section (Part 4) contained statements on leadership support.

The data collection procedures highlight the steps and methodologies that are utilized by the research before and during the data collection process (Walliman, 2021). The research ensured the research approval and review of the protocol is conducted with the aid of the study supervisor. The research ensured that participants are debriefed on the objectives of the study and the nature of information being sought before involvement in the study. The study dominantly relied on drop and pick method in the data collection which is more convenient in collecting data directly from study participants. Further, electronic data collection (Google forms) was considered where physical collection of study data is not possible.

3.7 Research Quality

The study reinforced the quality of the research instrument through conducting a pretest of the questionnaire (Patten, 2016). The pilot test was vital as it allows for the review of the questionnaires based on the data collected which can help identify errors and weaknesses that might affect the main research (Bryman, 2016). The survey conducted the pilot test among 10% (6) of participants that were not considered in the final study. The aim of the piloting was to support both reliability and validity tests of the questionnaire

3.7.1 Validity Test

. Validity is defined as a measure of how accurate and meaningful the research results can be utilized to make inferences that are correct. Through ensuring the validity of the research instrument the study ensures that the findings are the actual representation of the phenomena being studied and thus results can be utilized going forward (Taherdoost, 2016). The study applied content validity which involved critical review of the questionnaire with the aid of the study supervisor to ensure the completeness of the research tool. Secondly, construct validity was employed in assessing that all the operationalized constructs of the study variables were considered in the development of the research tool.

3.7.2 Reliability Test

Reliability tests focus on the questionnaires ability to demonstrate similar results are obtained in repeat studies. This ability is referred to as the internal consistency of the instrument and is key in ensuring the questionnaires is reliable in repeat studies and can produce similar outcome (Taherdoost, 2016).. The main test of internal consistency is the Cronbach Alpha score which was utilized in this study. The score ranges between 0-1 with a Cronbach alpha coefficient of 0.70 or higher being considered as a threshold of reliability of the tool (Heale & Twycross, 2015). Thus, this decision rule was applied in this study in checking the internal consistency of the questionnaire developed.

Table 3.1 Reliability Results

Variable	Reliability Statistics Cronbach's Alpha	N of Items	Verdict
Employee productivity	.709	7	The items are included as is in main study
Primary stress management	.757	6	The items are included as is in main study
Secondary stress management	.794	7	The items are included as is in main study
Tertiary stress management	.707	6	The items are included as is in main study
Leadership support	.738	6	The items are included as is in main study

3.8 Data Analysis and Presentation

Quantitative data obtained from close-ended questions was arranged, classified, and coded into Statistical Package for Social Sciences for subsequent analysis (Bryman, 2016). The research utilized both descriptive and inferential analysis. The descriptive analysis examined on the trends of the data using frequencies, means, standard deviation and percentages. The research used correlation analysis to determine the nature of the relation between the research variables. The use of correlation analysis allowed for patterns between the data variables to be identified which can be key to improving estimation in the model.

Further, multiple linear regression analysis was applied to determine the magnitude of effect of the independent variables on employee productivity within the insurance companies. The research findings were presented using figures and tables.

$$EP = \lambda_0 + \beta_1 PSI + \beta_2 SSI + \beta_3 TSI + \varepsilon \ldots\ldots (1)$$

Where.

EP denotes the employee productivity

λ_0 represented the constant of the adopted model.

$\beta_{1\text{-}3}$ represented the coefficient of the predictor variables

PSI: primary stress interventions

SSI: secondary stress interventions

TSI: tertiary stress interventions

ε: error term of the model

3.9 Ethical Guidelines

The research considered the following ethical concerns during the survey; all the research information obtained from the participants was utilized only for the stated academic objectives. The research participants confidentiality was ensured throughout the course of the survey by not seeking any personally identifying information during the data collection. The participants further were informed of their free will in taking part in the survey and any risks and benefits of the study was clearly explained to the respondents. The research ensured that informed consent form is presented to all the respondents during the data collection exercise. Lastly, necessary approvals were obtained from Strathmore University and NACOSTI before embarking on the data collection process.

3.10 Chapter Summary

The third chapter of the research entailed the key methodological steps that was integral in solving the study problem. The section identified the positivism philosophy as the most ideal for the study as it supports quantitative approaches in establishing relationship between variables. The unit of analysis for the research was the registered insurance companies in Kenya. The unit of observation for the study was drawn from HR and Wellness Manager within Insurance firms. Data was collected using structured questionnaires with the quantitative analysis (descriptive and inferential) being adopted.

CHAPTER FOUR

PRESENTATION OF RESEARCH FINDINGS

4.1 Introduction

The chapter presented the findings on the effect of workplace stress management practices on employee productivity among insurance firms in Nairobi County, Kenya. The findings were presented based on the research tool covering the demographic results, employee productivity, workplace stress management and leadership support response summary. Further, inferential statistics such as correlation and regression analysis were performed to confirm the relationship between the variables.

4.2 General Information

The general information on the questionnaire focused on the demographics of the participants included in the survey. Further, the response rate obtained was presented in this section.

4.2.1 Response Rate

The research collected study data using structured questionnaires that were mainly delivered to the insurance companies directly between the month of April and May 2026. The survey collected responses from 49 of the 58 sampled participants from the registered insurance companies representing an 84.5% response rate. This was deemed adequate for representation of the whole population thus findings can be relied upon in drawing inferences.

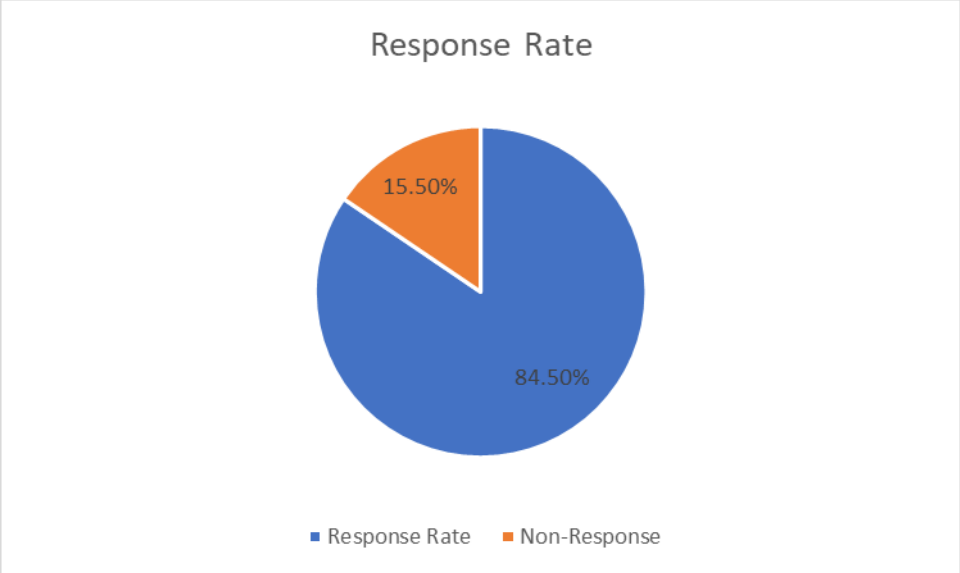

Figure 4.1 Response Rate

4.2.2 Background Information of Respondents

This section provided details on the demographic characteristics of the respondents and the summary is shown in Table 4.1 below.

Table 4.1 Background Information of Respondents

		Frequency	Percent
Gender	Male	32	65.3
	Female	17	34.7
	Total	49	100.0
Position in the firm	Human resource manager	34	69.4
	Wellness manager	15	30.6
	Total	49	100.0
Years in position	Less than 3 years	15	30.6
	4-7 years	27	55.1
	8-11 years	7	14.3
	Total	49	100.0

The results showed below indicated that 65% of the participants in the study were male officials with 35% drawn from female executives within the insurance industry. This showed that senior management within the human resource and wellness departments was mostly constituted of male employees. The study further reviewed the position and department that the respondents were drawn from the and the findings below showed that 69% were from the human resource management and 31% were wellness department managers. This indicated that information was collected from individuals with knowledge of the stress management practices and their influence on productivity of their workforce.

Further analysis reviewed the length of period that respondents have worked within the company in their positions. The findings presented below showed that majority of participants 55% have been with firm for 4-7 years in the position, 31% for less than 3 years and 14% for atleast 8-11 years. This was indicative of personnel with varying experience on how different practices adopted to deal with employee stress have affected their productivity levels.

4.3 Descriptive Analysis

This section presents descriptive information drawn from the summary of the structured responses obtained from the respondents. The descriptive analysis was conducted using means and standard deviation and results are shown based on the study variables.

4.3.1 Employee Productivity

This subsection reviews the employee productivity within the insurance firms and their level of agreement with various statements is presented in Table 4.1

Table 4.2 Descriptive Analysis of Employee Productivity

	N	Mean	Std. Deviation
The employees within the insurance firm complete tasks with minimal effort	49	3.6327	.66752
The employees in the firm undertake their tasks in the least time and resources usage	49	4.1020	.68450
The employees in the firm are able to handle tasks assigned within the provided timelines	49	3.8980	.71429
The employees within the firm exhibit effective time management in their roles	49	3.8776	.63353
The employees within the firm treat our customers with professionalism thus fostering satisfaction levels	49	3.9388	.80125
The employees within the firm conduct routine follow-up with customers to ensure their complaints were solved	49	3.8980	.71429
The employees within the firm treat customers courteously thus minimizing complaints	49	3.8980	.87190
Average		**3.8921**	**0.7268**

There was agreement among the managers that employees in the firm undertake their tasks in the least time and resources usage (mean = 4.102). It was further agreed that employees within the firm treat our customers with professionalism thus fostering satisfaction levels (mean = 3.939). The participants were in agreement that employees within the firm treat customers courteously thus minimizing complaints (mean = 3.898). Further agreement was noted that employees within the insurance firm complete tasks with minimal effort (mean = 3.632). The overall mean of 3.8921 indicated from the management perspective employees within the firm

have exhibited an improvement in productivity dimensions such as efficiency in task completion, engagement with customers and timely completion of work.

4.3.2 Primary Stress Management Interventions

The first objective reviewed the primary stress management practices within the insurance firms and summary of the descriptive results is shown in Table 4.2

Table 4.3 Descriptive Analysis of Primary Stress Management Interventions

	N	Mean	Std. Deviation
The firm ensures there are accessible breakrooms for all our employees	49	4.0612	.68945
The firm has invested in green working spaces to help employees be more focused on their work	49	3.6939	.68325
The firm provides employees with work furniture that is designed to meet their physical needs	49	3.9592	.70590
The firm has designed the work environment to be friendly to employees and reduce risk of work-related injuries	49	3.9184	.78626
The firm provides employees with a flexible work-life balance practices i.e. job sharing/compressed work-week to improve their welfare	49	3.9388	.65854
The firm has designed remote-work opportunities to support employees who can't physically access the offices	49	4.0816	.73134
Average		**3.9422**	**0.7091**

Results showed most respondents agreed (mean = 4.082) that the firm has designed remote-work opportunities to support employees who can't physically access the offices. There was also agreement that the firm ensures there are accessible breakrooms for all our employees (mean = 4.061). Respondents also agreed that the firm has designed the work environment to be friendly to employees and reduce risk of work-related injuries (mean = 3.918). Further respondents showed agreement (mean = 3.693) the firm has invested in green working spaces to help employees be more focused on their work. The general consensus within the management team was that primary interventions have been well-implemented and accepted within the institution as shown by an average of 3.9422 which is indicative of utilization of flexible practices and inclusive workplace designs.

4.3.3 Secondary Stress Management Interventions

The second objective of the study reviewed the effect of specific secondary stress management interventions on employee productivity. The findings of the means and standard deviation are shown below;

Table 4.4 Descriptive Analysis of Secondary Stress Management Interventions

	N	Mean	Std. Deviation
The firm provides employees with stress-reduction facilities such as meditation rooms	49	3.8776	.56394
The firm encourages employees to be self-aware thus helping the gain deeper insights on their behavior and motivation at the workplace	49	3.9184	.67196
The firm is mindful of the personal and professional growth of our employees thus helping attain their goals	49	4.0204	.69191
The firm provides employees with membership for fitness centres and on-sites exercise areas	49	3.9796	.69191
The firm has implemented employee assistance programmes to aid in positively improving their wellness	49	3.6531	.69375
The firm routinely allows employees to take a few minutes of work to help focus during the workday	49	4.1633	.55328
The firm employs audio-visual alternatives (music, paintings, plants) in the workplace to help in the relaxation of employees	49	3.9592	.67575
Average		**3.9388**	**0.6489**

The analysis noted agreement (mean = 4.163) the firm routinely allows employees to take a few minutes of work to help focus during the workday. In relation to the firm is mindful of the personal and professional growth of our employees thus helping attain their goals there was agreement among respondents (mean = 4.020). The results showed agreement (mean = 3.959) the firm employs audio-visual alternatives (music, paintings, plants) in the workplace to help

in the relaxation of employees. Further respondents agreed that firm provides employees with stress-reduction facilities such as meditation rooms (3.878). The overall mean of 3.9388 pointed to general agreement among the participants the insurance firms have enhanced the infrastructure within their offices to offer employees a more relaxed work environment and eased access to employment support programs.

4.3.4 Tertiary Stress Management Interventions

The third research objective focused on the effect of tertiary stress management interventions on employee productivity. The findings of the means and standard deviation are shown below;

Table 4.5 Descriptive Analysis of Tertiary Stress Management Interventions

	N	Mean	Std. Deviation
The firm provides employees access to professional counselling to help manage professional challenges	49	3.9388	.71903
The firm ensures guidance and support is provided to employees to help them cope with personal issues	49	3.8980	.68450
The firm provides employees with benefits package that fosters their personal and family well-being	49	3.7143	.70711
The firm ensures there is confidential access to wellness programmes for our employees	49	4.0612	.65854
The firm provides plans that help employees in improving their lifestyle choices	49	4.1020	.74288
The firm has plans that typically incentivize employees to access preventive healthcare programmes to foster their wellness	49	3.8980	.74288
Average		**3.9353**	**0.7092**

It was revealed that participants agreed that the firm provides plans that help employees in improving their lifestyle choices (mean = 4.102). Results showed agreement (mean = 3.939) the firm provides employees access to professional counselling to help manage professional challenges. The respondents were in agreement that the firm has plans that typically incentivize employees to access preventive healthcare programmes to foster their wellness (mean = 3.898). The findings revealed the general view of the participants (mean = 3.9353) that accessibility to

wellness programmes, acceptance by staff and increased provision of benefits gas been availed to the workforce which can be integral to spurring growth.

4.4 Correlation Analysis

The study performed non-parametric correlation using the Spearman rank correlation approach due to the nature of the data collected. The summary of the test is shown in the Table 4.6 below.

Table 4.6 Correlation Results

			Employee Productivity	Primary Interventions	Secondary Interventions	Tertiary Interventions
Spearman's rho	Employee Productivity	Correlation Coefficient	1.000			
		Sig. (2-tailed)	.			
		N	49			
	Primary Interventions	Correlation Coefficient	.593**	1.000		
		Sig. (2-tailed)	.000	.		
		N	49	49		
	Secondary Interventions	Correlation Coefficient	.639**	.816**	1.000	
		Sig. (2-tailed)	.000	.000	.	
		N	49	49	49	
	Tertiary Interventions	Correlation Coefficient	.731**	.679**	.737**	1.000
		Sig. (2-tailed)	.000	.000	.000	.
		N	49	49	49	49

The findings on the first objective (primary interventions) showed there exists a moderate positive and statistically significant relationship between primary intervention practices and employee performance in insurance companies in Kenya (r (n = 49) = .593**, Sig = .000). The analysis on the second objective (secondary interventions) confirmed there was a strong and positive statistically significant relationship between secondary intervention practices and employee performance in insurance companies in Kenya (r (n = 49) = .639**, Sig = .000). The results on the third objective (tertiary interventions) revealed there existed a strong and positive statistically significant relationship between tertiary intervention practices and employee performance in insurance companies in Kenya (r (n = 49) = .731**, Sig = .000).

4.5 Diagnostic Test Results

The research utilized various tests for linear regression assumptions to ensure that the model utilized met the basic requirements. The following tests were conducted in the research; heteroscedasticity, collinearity and normality tests.

4.5.1 Collinearity Tests

The research assessed the collinearity between the predictor variables using the Variance Inflation Factor and the findings are shown in Table 4.7

Table 4.7 Collinearity Results

Model		Collinearity Statistics	
		Tolerance	VIF
1	(Constant)		
	Primary Interventions	.318	3.145
	Secondary Interventions	.278	3.592
	Tertiary Interventions	.459	2.178

a. Dependent Variable: Employee Productivity

The collinearity tests reported above showed the variables exhibited variance inflation factors that were below 10 which indicated the predictors were not linearly dependent on each other. Further analysis of the tolerance values showed values that were greater than 0.1 which further confirmed there was non-existence of multicollinearity between the variables.

4.5.2 Heteroscedasticity Test

Further, heteroscedasticity tests was conducted to confirm whether the error terms along the regression line were equal. This was conducted using the Breusch-Pagan Test for Heteroskedasticity and results are presented below.

Table 4.8 Heteroscedasticity Results

Breusch-Pagan Test for Heteroskedasticity [a,b,c]		
Chi-Square	**df**	**Sig.**
2.612	2	.106

a. Dependent variable: Employee Productivity

b. Tests the null hypothesis that the variance of the errors does not depend on the values of the independent variables.

The resulting findings above revealed a chi-square value of 2.612 with a sig-value of .106>.05 which confirmed that the variance was not heteroscedastic thus we accept the null hypothesis and conclude the data can be relied upon for regression analysis.

4.5.3 Normality Test

The study conducted normality test to examine whether the data was normally distributed and this was conducted by plotting the observed value for each score is plotted against the expected value (Bryman, 2016). From the figure below the results showed the distribution was within the normality line which showed the data points are grouped and balanced around the Q-Q plot thus signifying normal distribution.

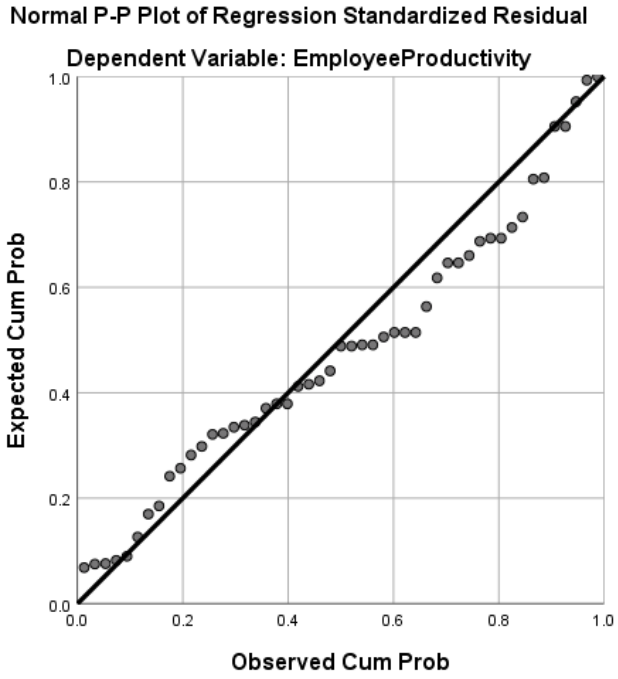

Figure 4.2 Normality Test

4.6 Regression Analysis

The research adopted regression analysis to examine the interaction between the independent variables and the dependent variable. The findings on the regression between workplace stress management practices and employee productivity are shown in this subsection.

Table 4.9 Regression Summary Workplace Stress Management Practices and Employee Productivity

Model	R	R Square	Adjusted R Square	Std. Error of the Estimate
1	.774[a]	.599	.572	.28837

a. Predictors: (Constant), Tertiary Interventions, Primary Interventions, Secondary Interventions

Model		Sum of Squares	df	Mean Square	F	Sig.
1	Regression	5.586	3	1.862	22.391	.000[b]
	Residual	3.742	45	.083		
	Total	9.328	48			

a. Dependent Variable: Employee Productivity

b. Predictors: (Constant), Tertiary Interventions, Primary Interventions, Secondary Interventions

Model		Unstandardized Coefficients		Standardized Coefficients		
		B	Std. Error	Beta	t	Sig.
1	(Constant)	.341	.447		.763	.449
	Primary Interventions	.056	.171	.055	.327	.745
	Secondary Interventions	.250	.204	.219	1.225	.227
	Tertiary Interventions	.596	.149	.558	4.002	.000

a. Dependent Variable: Employee Productivity

The first regression model focused on the overall effect of workplace stress management predictors (Tertiary Interventions, Primary Interventions, Secondary Interventions) and employee productivity. The overall results of the model showed a r-squared of .599 which revealed that the three interventions jointly explained atleast 59.9% of employee productivity in the insurance firms. This indicated that 40.1% of the variations are determined by variables not included in the model.

The findings of the ANOVA analysis confirmed there was a statistically significant linear relationship between workplace stress management practices and employee productivity in insurance companies (F (3, 45) = 22.391, Sig = .000 <.05).

The outcome of the regression can be summarized in the following model and interpreted per each individual objective of the research.

$$\mathbf{EP = .341 + .056PSI + .250SSI + .596TSI + .447 \ldots\ldots (1)}$$

The findings of the regression coefficient of the first objective revealed $\boldsymbol{\beta_1}$ **= .056, Sig = .745>.05** which revealed that primary stress intervention practices had a positive and insignificant effect on employee productivity of insurance companies in Kenya.

The regression results of the second objective showed a coefficient $\boldsymbol{\beta_2}$ **= .250, Sig = .227>.05** which revealed that secondary stress intervention practices had a positive and insignificant effect on employee productivity of insurance companies in Kenya.

The analysis of the third objective had a coefficient of $\boldsymbol{\beta_3}$ **= .596, Sig = .000<.05** which revealed that tertiary stress intervention practices had a positive and significant effect on employee productivity of insurance companies in Kenya. Changing the tertiary interventions practices (counselling, employee assistance programs, post-traumatic stress assistance and rehabilitation) would improve employee productivity by a factor of .596

CHAPTER FIVE

DISCUSSION, CONCLUSIONS AND RECOMMENDATIONS

5.1 Introduction

This last chapter highlights the summary of findings by presenting and discussing the results of the responses from each objective. It concludes by providing the conclusions and recommendations, as well as the suggestions for further research.

5.2 Summary of Findings

This study used a descriptive research design to carry out analysis of the effect of workplace stress management practices on the productivity of employees in insurance firms in Nairobi County, Kenya. The study was founded on principles of the theory of preventive stress management (TPSM), and adopted a positivism research philosophy that utilized quantitative methods in data analysis. The study targeted 58 human resource managers or wellness managers of the insurance companies and was able to get responses from 49 respondents. Of these, 32, or 65.3% were male, while 17, or 34.7% were female, and occupied the human resource position. Moreover, the respondents had held their positions for between 4 and 7 years indicating they have extensive experience and have encountered workplace stress management practices.

The study specifically sought after the effect of primary, secondary and tertiary interventions on the productivity of employees in insurance firms, with the role of leadership being evaluated as a moderator factor. Correlation analysis results were that all the variables under investigation are positively and significantly correlated with each other, with the strongest correlation being between tertiary interventions and employee productivity. Primary and secondary interventions, on the other hand, exhibited a moderate to strong positive relationship. Regression results, with an $R^2 = 0.599$, also revealed a strong positive effect of the three types of interventions on employee productivity. Taken together, the interventions can explain up to 59.9% of the changes in employee productivity among insurance firm employees. Specifically, the accessibility of break rooms, day-offs, education on healthy lifestyle choices, and assurances of confidentiality were highlighted as the most significant interventions that can enhance the productivity of insurance staff.

Ultimately, the study observes that employees agree that the stress management interventions provided by their institutions are adequate, and have positive effects on their productivity.

However, low scores in areas such as employee assistance programs and benefit packages for family well-being suggest that there are areas for improvement.

5.3 Discussion of Results

This section presents a discussion of the findings where these are compared with the findings from the literature reviewed in the empirical review section. Generally, the findings of the study were that the three interventions have positive and significant effects on the productivity of insurance staff in Kenya. These findings validate the health-performance prediction asserted in the theory of preventive stress management, which emphasized the importance of managing stress through three levels of prevention.

5.3.1 Primary Interventions

The first objective was on primary interventions and employee productivity and with a coefficient of $r = .609$, $p < .001$, findings indicated that primary interventions have a moderate relation with productivity. Regression results revealed a coefficient of ($B = .056$, $p = .745$), which revealed that the primary interventions evaluated do not have statistically significant effects on the productivity of employees. A 1-unit increase in primary interventions would result in a .056 increase in employee productivity, suggesting that their presence is key to keeping employees productive.

These findings contradict assertations in the theory of Preventive Stress Management, which predicts that organizational interventions prevent stress and improve productivity by removing or reducing stressors at their source. The theory predicts that organizations can improve productivity by redesigning the workplace to reduce workload, increasing employee autonomy and investing in breakrooms. This finding implies that implies a disconnect between stress management interventions, employee well-being and actual operational performance metrics. Additionally, the findings suggest that the interventions adopted may not be effectively implemented, which explains their departure from theoretical expectations and past empirical findings.

The importance of primary interventions on employee productivity was highlighted in much of the empirical literature, with Riaz, et al. (2017), Masterizki, et al. (2019) and Latip et al. (2022) all confirming positive effects. According Latip et al. (2022), for instance, proper design of the workplace is key to preventing stress by protecting employees from illness and injuries such as muscle pain. While in the current study, there was agreement that work furniture that is designed to meet their physical needs, Latip et al. (2022) findings were physical,

organizational, and cognitive ergonomics are key to reducing job burnout. These observations are also echoed by Riaz, et al. (2017) who established the value of ensuring staff who work long hours are protected from musculoskeletal and visual discomfort and can access remote work opportunities. In the current study, respondents were of the opinion that remote-work opportunities support employees who may struggle to physically access the office.

There was further agreement that the workplace design has significant effects on employees' productivity and this finding is in line with much of the reviewed literature which predicts that the arrangement of office equipment, machines, and replacement of old tools with newer, safer ones is key to ensuring employees remain productive (Ravindran, 2019). Similar observations were made by Masterizki, et al. (2019) and Hellar (2020) whose analysis revealed that modern room design with adequate lighting, temperature, minimum noise, and appropriate monitors have positive effects on workplace comfortability which correlates with better quality of work.

Aside from the design of the workplace, the study highlighted the value of accessible breakrooms where employees can refresh at work, a state that Sinno et al. (2020) considered to be components of ergonomically certified workspaces. They found that such workspaces increase creativity, productivity, and the quality of work. Lastly, Mutegi, et al. (2023) conferred that the presence of training opportunities, as well as safety seminars, drills and manuals are key primary interventions that are critical to endearing healthy, more motivated staff. Essentially, while the current study found indirect effects of primary interventions on employee productivity, the empirical review diverges from this finding and highlights them as critical determinants of employees' level of productivity.

5.3.2 Secondary Interventions

The second objective of the study was on secondary interventions and employee productivity, and coefficient of $r = .666$, $p < .001$, findings indicated the existence of a moderate to strong positive effect. This suggests that investing in secondary intervention programs is an effective strategy that managers can use to enhance organizational performance and employee efficiency. Meanwhile, regression analysis, however, revealed a coefficient of ($B = .250$, $p = .227$), suggesting that the effect of secondary interventions is not direct and statistically significant. These findings also imply that secondary interventions, as constituted may be playing a supportive role, and are necessary conditions to sustain high levels of productivity.

The indirect effect of secondary interventions also contradicts the theory of Preventive Stress Management, which predicts that interventions aimed at modifying an individual's response to

job stressors improve employee productivity by increasing coping skills and reducing burnout. The theory reiterates the importance of equipping employees with the knowledge and cognitive skills such as anger management that they may need to manage their reactions to workplace pressures. This finding suggests ineffective implementation of secondary interventions, or that individual differences could have an impact on the relationship between stress interventions and performance. These findings imply firms should develop their interventions and custom them to meet the needs and address the stress factors impacting specific employees.

The finding that secondary interventions are not significant predictors of higher productivity outcomes contradicts much of the reviewed literature which highlights interventions such as stress management workshops, mindfulness training, employee assistance programs, and flexible scheduling as key to improving employees' management and response to workplace stressors (Riva & Chinyio, 2018; Giao, et al. 2020; Vuong, et al. 2022). According to Riva and Chinyio (2018), secondary interventions are instrumental to addressing productivity issues in situations where main stressors are related to professional identity, organizational deficiencies, and interpersonal conflicts.

The study findings align on the positive association between secondary interventions and employee productivity but misalign on the lack of a significant effect (Giao, et al. 2020; Vuong, et al. 2022; & Ogomegbunam, 2023). According to Ogomegbunam (2023), workplace social support, mindfulness training, and training on coping competence improve employees' ability to cope with workplace stressors and are key drivers of employee performance. In this study, there was agreement that employees are allowed to take a few minutes off work to recharge and refocus, a finding that Ogomegbunam (2023) found to be an aspect of time management training that improves concentration and performance of manufacturing employees. In this sense, Giao, et al. (2020) established that having higher autonomy over when and where to work increases motivation, leads to better health outcomes, and improves employees' performance.

Informational support is another stress management instrument that was demonstrated in agreement that the firms have instituted relaxation features such as audio-visual alternatives that lower anxiety and boost engagement. In literature, the study by Vuong, et al. (2022) highlighted the influence of visual engagement in the workplace design, and of social spaces such as meditation rooms where employees can relax and sharpen focus. The finding concurs with Giao, et al. (2020) who highlighted the importance of providing a few minutes off the day to cool off. These studies show the importance of providing quiet, intentionally designed spaces

where employees can relax and reset. Another component of autonomy identified in research involved the incorporation of employee opinions in work design, including choosing time to work and place of work (Wanderi, 2023).

Lastly, there was agreement that the organizations provide personal and interpersonal skills training to employees. This finding is reflected in Kinuthia et al.'s (2022) analysis which established that that interpersonal skills training boosts engagement and team productivity by developing key soft skills like communication, emotional intelligence, and conflict resolution. Such skills are also key to improving employees' ability to express themselves which has been observed to improve self-confidence by Wanderi (2023). Ultimately, findings from the empirical review show the value of secondary interventions on productivity outcomes. However, these findings do not align with the current study which found the interventions evaluated, including mindfulness, interpersonal skills, and coping training, have no direct effects on productivity outcomes.

5.3.3 Tertiary Interventions

The third objective revealed that tertiary interventions have the most unique contributions to productivity outcomes. With a coefficient of $r = .752$, $p < .001$, the findings reveal a strong positive relationship between tertiary interventions and productivity. This suggests that investing in employee rehabilitation, assistance programs, rehabilitation and mental health support is a critical strategy for restoring work capacity and fostering a more resilient workforce. Regression analysis coefficient of ($B = .596$, $p < .001$) indicates that the interventions have strong unique contributions to employee productivity. A 1-unit increase in tertiary interventions would result in a .596 unit increase in employee productivity, demonstrating its effectiveness.

These findings are in expectations of the theory of Preventive Stress Management which identifies tertiary interventions that focus on treatment, rehabilitation, and recovery for employees already suffering as the last line of defense in stress management. The theory asserts that this level of intervention is usually designed to address specific stressors that have already affected employees to facilitate their return to normal functioning. Its unique contribution to productivity may lie in its curative function, whereby its impacts are more direct and identifiable than primary and secondary interventions which are often taken for granted. They also align with the leadership grid which identifies caring managers who guarantee confidential counselling and post-traumatic stress assistance, as well as rehabilitation opportunities that do not impact evaluations as critical to restoring employees' productivity.

The findings of the study are in agreement of much of the reviewed literature which recognize the strong, positive effects of tertiary interventions on employee productivity outcomes (Farman, et al. 2020; Park & Chaudhuri, 2020; Cohen et al. 2023). Respondents specifically agreed that they have adequate access to professional counselling which helps in the management of professional challenges. According to Cohen et al. (2023), mindfulness -based practices, meditation and yoga, gratitude journaling and post-traumatic coaching are key tertiary stress management techniques that improve productivity by reducing employee stress in periods of uncertainty. Johnson, et al. (2020) also linked mindfulness training and counselling to improved mental health, wellbeing, and performance outcomes but confirmed that many organizations do not integrate these interventions into career development. Similarly, the findings align with findings from Kersemaekers et al. (2018) who established that meditation and psychoeducation improve employees' psychological well-being and productivity.

Despite much of the literature finding a positive effect of mindfulness training, Bartlett et al. (2019) found insufficient evidence to support the relationship, instead linking mindfulness training to improved stress management, lower anxiety and general well-being. This study argues that firms can boost the productivity of their employees by ensuring they are healthy, motivated and engaged. Aside from counselling and mindfulness training, the descriptive data also showed agreement that staff have confidential access to wellness programmes which were confirmed by Farman, et al. (2020) to increase employees' concentration, problem solving, morale and productivity, and by Azmi et al. (2022) to improve employees' mental health.

Respondents further agreed that the firm ensures adequate guidance and support is provided to employees, a finding that echoes Assibey-Ankrah's (2021) analysis which linked psychological support and employee welfare programmes to improved workplace health and performance. Locally, Atieno and Otsyulah (2019) singled out health assessments, as key tertiary interventions that enable tracking of the progress of deployed treatments. This finding highlights the importance of keeping track of treatments through regular screenings on health and productivity outcomes. Ultimately, interventions designed to rehabilitate individuals and facilitate a safe return to work are essential to helping employees recover from stress, burnout, or illness and maintaining a healthy, productive workforce.

5.4 Conclusions

Based on the findings of the study, the study makes the conclusion that workplace stress management practices proxied as primary, secondary and tertiary interventions have positive and statistically significant effects on the productivity of employees. Specifically:

The study concludes that primary interventions such as ergonomic workplace design, remote work opportunities, accessible breakrooms, and investment in green working spaces, have positive, but statistically non-significant effects on the productivity of insurance employees. This contradiction leads to the conclusion that primary interventions alone cannot drive productivity gains among insurance firm staff. Instead, they are foundational determinants whose benefits are realized along secondary and tertiary interventions. These findings show the importance of providing the primary infrastructure upon which secondary and advanced interventions can be built upon.

Results of the second objective lead to the conclusion that secondary interventions such as mindfulness training, brief work breaks, stress management workshops, and employee assistance programmes do not have significant independent effects on the productivity of employees but have high correlations with productivity. This conclusion implies that their impact is highly dependent on the effectiveness of the application of the other interventions. The study further concludes that managers provide for flexibility and autonomy in work design and equip staff with skills to manage their response to stressors. These findings show the importance of building individual resilience and improving coping skills on boosting employee output.

The study concludes that tertiary interventions comprising professional counselling, rehabilitation, confidentiality and post-traumatic stress assistance are the interventions that have statistically significant effects on the productivity of employees in the insurance sector. This implies that these interventions directly affect employee output in the high-pressure, client-facing environment of Nairobi's insurance sector. The study also concludes that significant progress has been made in normalizing individual wellness support, guaranteeing confidentiality and providing post-traumatic stress assistance. This conclusion underscores the importance of restorative interventions on sustaining employees' productivity.

5.5 Recommendations

The study makes the following recommendations based on the findings and conclusions drawn from the results.

5.5.1 Policy Recommendations

The dominance of tertiary interventions provides a clear directive that the insurance sector should elevate professional counselling, employee assistance programmes, and rehabilitative support structures from discretionary organizational offerings to standardized, regulated requirements that registered players have to comply with. The study also calls on the Insurance Regulatory Authority of Kenya to encourage insurance firms to allocate a fixed percentage of their annual profits to employee wellness interventions and recognize compliant firms in annual awards. Additionally, the study calls on policy makers to introduce healthy building certifications for offices to ensure minimum standards of safety and comfort are assured. Moreover, the study calls for policy requirements that leadership wellness competencies be embedded in professional certification pathways for HR practitioners and senior insurance sector managers.

At the organization level, the study calls on insurance firms to adapt policies mandate access to wellness programs be treated with a high degree of privacy and confidentiality and not be included in performance and career evaluations to increase uptake. Additionally, the study calls on firms to adopt a no-retaliation policy that explicitly protects employees who use assistance services and has clear channels where they can report any privacy violations. Policy frameworks should further provide mandates that managers undergo frequent training in stress recognition, communication, administration of wellness programmes, and supportive leadership practices to improve their capacity as stewards of wellness initiatives. Industry associations are also called upon to facilitate collaborative arrangements such as shared fitness memberships and group counselling programmes to increase accessibility of these programmes by reducing the cost incurred by smaller firms.

The study further calls on the firms to develop relationships with professional counsellors who can provide valuable counselling services to employees. managements are also recommended to promote, champion and encourage staff to access stress interventions such as counselling to ensure these programs are not only available, but also utilized by staff to ensure they improve their productivity.

5.5.2 Practical Recommendations

At the organizational level, HR managers, wellness managers, and organizational leaders within insurance firms are recommended to scale up tertiary interventions and consider them as instrumental drivers of productivity and not just as a reactive last resort measure. These managers are recommended to increase the visibility, confidentiality assurances, and accessibility of professional counselling and employee assistance services through internal communication initiatives, manager-led destigmatization efforts, and encouraging referrals to reduce barriers to uptake. Moreover, they should periodically evaluate uptake and effectiveness of the programmes to keep them up to data and address any lingering concerns that staff may have when it comes to utilizing the services.

Employees value greater autonomy and given the significance of work breaks, the study calls on investment firm managers to formalize such flexible practices through work scheduling and sharing policies that encourage help and teamwork in task execution. These are low-cost, high-return strategies according to the study's findings that managers can leverage to increase productivity. They can be reinforced by the addition of remote workspaces and breakrooms where staff can work without having to visit the official office or take breaks when they feel overwhelmed. The study further recommends that managers make regular physical upgrades to the work environment to keep it fresh and interesting. This not only includes visual features, but also ergonomic work furniture, placement, equipment quality.

The study further recommends that insurance firms strengthen benefits packages that foster family well-being as part of work-life balance initiatives. They should review and improve stipulations in benefit structures to include family support provision components like childcare support, medical covers, and flexible leave policies which reduce personal stressors that can spill into the workplace and affect productivity. Ultimately, the study recommends that insurance firms deliberately shift to a tiered, leader-championed and integrated model that emphasizes a coherent approach at stress management.

5.5.3 Theoretical Contribution

The study's main theoretical contribution is that it extends preventive stress management theory into the Kenyan insurance context by showing that interventions at the primary, secondary, and tertiary levels each have positive effects on the productivity of insurance firm employees. This strengthens the theory's health-performance prediction by providing empirical support from a developing-country service sector. The study further confirms the layered

dynamics surrounding stress management, asserting that it is not a single-action initiative, but a continuous process that evolves with employee needs and main stressor.

By confirming direct effects of the three interventions on productivity outcomes, the study supports the preventive stress management perspective that firms should be more proactive and, rather than address issues after they occur, should combine preventive interventions, early detection, and rehabilitation to protect their staff and ensure they can perform optimally. The findings add weight to the idea that productivity increases when stress is managed proactively across multiple levels. Specifically, it confirms that leadership styles associated with concern for people, when actualized increases investments into practical stress management measures that enable staff to remain healthy and productive.

Lastly, the study shows that the productivity of employees in the insurance sector is just as reliant on effective stress management, as it is to the employees' technical skill. It further confirms that stress management interventions improve employee performance by improving employees' health. This contribution bridges leadership and occupational health theories, offering a more integrated explanation of productivity determinants.

5.6 Limitations of the Study

While valuable, the study encountered a variety of limitations. First, the study was contextually limited to 49 respondents from insurance firms in Nairobi County. This small sample size may limit the statistical power of the variables which limits the generalizability of the findings. Its focus on firms in Nairobi County also means that the findings cannot be extended to other countries and even smaller counties in Kenya as these have different organizational structures, resource levels, and workforce demographics. Moreover, differences in perceptions about wellness programs across different regions implies the findings cannot be representative of regions with different cultural orientation. Aside from this, the study was restricted to HR and wellness managers, direct representatives of the organizations who are likely to have a positive opinion of the effectiveness of wellness programme implementation. The perceptions of the actual beneficiaries of these programmes were not included in the study. Including these players' opinions could have provided a more nuanced understanding of the subject.

Methodologically, the study collected data with a limited time period of three weeks, hence could not capture a higher percentage of the respondents. A longer time period may have yielded more reliable results. Moreover, the study did not evaluate the effect of different initiatives over time, having limited itself to analysis of the managers' perceptions at one point

in time. This implies the study cannot inform changes in productivity that result from specific changes to the composition of stress management interventions. Finally, the findings are specific to the insurance sector, which has unique operational pressures, customer expectations and organizational cultures. These findings may not be representative of other sectors with different profiles and stress dynamics such as manufacturing, education, or healthcare, which limits the generalizability of the findings.

5.7 Suggestions for Further Research

The study suggests that future researchers replicate the current study but target more respondents in a larger sample across multiple firms. These studies should incorporate dual inputs from managers, as well as frontline staff to assess their lived experience of stress management programmes and their impact on their individual productivity. They should also expand this investigation to other sectors such as banking, and telecommunications to ascertain whether the identified relationships are sector-specific or generalizable across different services industry.

The study also recommends that future studies track the effect of different initiatives over longer time periods like 12–24 months to assess how changes in the level of intervention affects productivity over time. Such studies would provide evidence of causality and allow for assessment of which interventions are more effective at sustaining productivity gains. Methodological recommendations are for future studies to deploy employ Structural Equation Modelling (SEM) which can simultaneously model the direct, indirect, and mediating relationships among variables and provide a more nuanced understanding of how the interventions collectively affect productivity. They can also adopt mixed methods approaches to explore contextual, cultural, and organizational effects of these stress management interventions on productivity outcomes.

5.8 Chapter Summary

This chapter presented a summary of the findings of the thesis, discussed the findings by comparing them to the studies in the empirical review, the conclusions drawn from the findings, and the recommendations. It then provides the limitations of the study and the suggestions for further research.

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APPENDICES

Appendix I: Introduction Letter

The Managing Director/Group Director

……. Insurance Company

Dear Sir/Madam

Ref: Request for Research Data

My name is Belliah Anjili a student pursuing a Master's Degree in Business Administration at the Strathmore University Business School. The institution requires us to undertake a research study on our area of specialization. To meet this requirement; I'm seeking you're help in obtaining research data on the ***is to establish the effect of workplace stress intervention practices on employee productivity among insurance firms in Nairobi County, Kenya***.

As part of the insurance industry in Kenya, your firm is being targeted for the study as it can aid in providing necessary information that can be pivotal to this investigation. I'm writing to request your assistance in allowing access to the firm employees to respond to my research questionnaire. The employees being sought are either the Human Resource Manager or the Wellness Manager within the company.

The respondent's participation was entirely voluntary, and they can decline continuing with the survey at any stage. All the information obtained was treated with utmost confidentiality and used for the stated academic aims.

I appreciate any positive feedback to this letter. Upon completion of the study the results can be availed to your firm on request.

Thanks in advance.

Belliah Anjili

Appendix II: Research Questionnaire

Dear respondents,

The attached questionnaire aims to elucidate information on how various workplace stress intervention practices have influenced employee productivity within your organization. Kindly respond to all the questions to the best of your ability. All the responses provided will be treated with utmost confidentiality and anonymity will be maintained.

Thanks in advance for participating.

PART A: Background Information

1. **What is your gender identity?**

   Male ( )

   Female ( )

2. **What is your current position in the insurance firm?**

   Human resource manager ( )

   Wellness manager ( )

3. **How long have you held the position in the insurance firm?**

   Less than 3 years ( )

   4-7 years ( )

   8-11 years ( )

   Over 12 years ( )

PART B: EMPLOYEE PRODUCTIVITY IN THE INSURANCE INDUSTRY

Kindly use the below key to rank your agreement with the following statements with regards to the productivity of employees within the firm.

5 = very large extent, 4 = large extent, 3 = moderate extent, 2 = low extent, 1 = very low extent

	Employee Productivity	**1**	**2**	**3**	**4**	**5**
1.	The employees within the insurance firm complete tasks with minimal effort					

2.	The employees in the firm undertake their tasks in the least time and resources usage					
3.	The employees in the firm are able to handle tasks assigned within the provided timelines					
4.	The employees within the firm exhibit effective time management in their roles					
5.	The employees within the firm treat our customers with professionalism thus fostering satisfaction levels					
6.	The employees within the firm conduct routine follow-up with customers to ensure their complaints were solved					
7.	The employees within the firm treat customers courteously thus minimizing complaints					

PART C: WORKPLACE STRESS INTERVENTION PRACTICES IN THE INSURANCE INDUSTRY

Kindly use the below key to rank your agreement with the following statements with regards to the productivity of employees within the firm.

5 = very large extent, 4 = large extent, 3 = moderate extent, 2 = low extent, 1 = very low extent

	Primary interventions	**1**	**2**	**3**	**4**	**5**
8.	The firm ensures there are accessible breakrooms for all our employees					
9.	The firm has invested in green working spaces to help employees be more focused on their work					
10.	The firm provides employees with work furniture that is designed to meet their physical needs					
11.	The firm has designed the work environment to be friendly to employees and reduce risk of work-related injuries					
12.	The firm provides employees with a flexible work-life balance practices i.e. job sharing/compressed work-week to improve their welfare					

13.	The firm has designed remote-work opportunities to support employees who can't physically access the offices					

	Secondary interventions	**1**	**2**	**3**	**4**	**5**
14.	The firm provides employees with stress-reduction facilities such as meditation rooms					
15.	The firm encourages employees to be self-aware thus helping the gain deeper insights on their behavior and motivation at the workplace					
16.	The firm is mindful of the personal and professional growth of our employees thus helping attain their goals					
17.	The firm provides employees with membership for fitness centres and on-sites exercise areas					
18.	The firm has implemented employee assistance programmes to aid in positively improving their wellness					
19.	The firm routinely allows employees to take a few minutes of work to help focus during the workday					
20.	The firm employs audio-visual alternatives (music, paintings, plants) in the workplace to help in the relaxation of employees					

	Tertiary interventions	**1**	**2**	**3**	**4**	**5**
21.	The firm provides employees access to professional counselling to help manage professional challenges					
22.	The firm ensures guidance and support is provided to employees to help them cope with personal issues					
23.	The firm provides employees with benefits package that fosters their personal and family well-being					
24.	The firm ensures there is confidential access to wellness programmes for our employees					
25.	The firm provides plans that help employees in improving their lifestyle choices					

26.	The firm has plans that typically incentivize employees to access preventive healthcare programmes to foster their wellness					

Thanks Again!

Appendix III: Ethics Review Letter

Strathmore UNIVERSITY

5th June 2025

Ms Anjili Belliah,
bellanjili@gmail.com

Dear Ms Anjili,

RE: Effect of Workplace Stress Management Practices on Employee Productivity in Insurance Firms in Nairobi County, Kenya

This is to inform you that SU-ISERC has reviewed and **approved** your above **SU-masters** proposal. Your application reference number is **SU-ISERC2957/25.** The approval period is from **5th June 2025 to 4th June 2026.**

This approval is subject to compliance with the following requirements:

i. Only approved documents including (informed consents, study instruments, MTA) will be used.
ii. All changes including (amendments, deviations, and violations) are submitted for review and approval by SU-ISERC.
iii. Death and life-threatening problems and serious adverse events or unexpected adverse events whether related or unrelated to the study must be reported to SU-ISERC within 72 hours of notification.
iv. Any changes anticipated or otherwise that may increase the risks or affected safety or welfare of study participants and others or affect the integrity of the research must be reported to SU-ISERC within 72 hours.
v. Clearance for the export of biological specimens must be obtained from relevant institutions.
vi. Submission of a request for renewal of approval at least 60 days prior to the expiry of the approval period. Attach a comprehensive progress report to support the renewal.
vii. Submission of an executive summary report within 90 days of completion of the study to SU-ISERC.

Before commencing your study, you will be expected to obtain a research license from National Commission for Science, Technology, and Innovation (NACOSTI) https://research-portal.nacosti.go.ke/ and obtain other clearances needed.

Yours sincerely,

Mr Ambrose Rachier,
Chairperson; SU-ISERC

Ole Sangale Rd, Madaraka Estate. PO Box 59857-00200, Nairobi, Kenya. Tel +254 (0)703 034000
Email admissions@strathmore.edu www.strathmore.edu

Appendix IV: NACOSTI Introduction Letter

REPUBLIC OF KENYA

NATIONAL COMMISSION FOR SCIENCE,TECHNOLOGY & INNOVATION

Ref No: **141881**

Date of Issue: **29/April/2026**

RESEARCH LICENSE

This is to Certify that Ms.. Belliah Anjili of Strathmore University, has been licensed to conduct research as per the provision of the Science, Technology and Innovation Act, 2013 (Rev.2014) in Nairobi on the topic: Effect of workplace stress management practices on employee productivity in insurance firms in Nairobi county, Kenya for the period ending : 29/April/2027.

License No: **NACOSTI/P/26/4188810**

141881

Applicant Identification Number

Ag. Director General
NATIONAL COMMISSION FOR SCIENCE,TECHNOLOGY & INNOVATION

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See overleaf for conditions