ISSN: 3116-3475
International Journal
of Education, Research, and Innovation Perspectives
Volume 2 Issue 11 (November 2026)

Stress, Coping Mechanisms, and Job Satisfaction of Cruise Ship Nurses: Basis for a Proposed Stress Management Intervention Program

Michael C. Gutierrez
Graduate School of Nursing, University of Perpetual Help System DALTA, Las Piñas City, Philippines
gutierrez_mykel@yahoo.com

Date Submitted:
September 04, 2026

Date Accepted:
October 16, 2026

Date Published:
November 12, 2026

DOI:
10.5281/zenodo.24155389

ABSTRACT

This study assessed the stress levels, coping mechanisms, and job satisfaction of cruise ship nurses and examined the relationships among these variables as the basis for a proposed stress management intervention program. A quantitative descriptive-correlational, cross-sectional design was employed. Data were gathered from 158 registered nurses with experience on international cruise ships using the Perceived Stress Questionnaire, an adapted Brief COPE Inventory, and a job satisfaction survey based on Herzberg's Two-Factor Theory, and were analyzed using frequency, percentage, mean, standard deviation, and Pearson product-moment correlation at the .05 level of significance. The respondents were predominantly experienced, multinational, and contractual. Overall stress was experienced sometimes (M = 2.50), with mental stress the most prominent dimension (M = 2.53), followed by physical (M = 2.50) and emotional stress (M = 2.47). Overall job satisfaction was neutral (M = 3.20), with intrinsic factors (M = 3.23) rated slightly higher than extrinsic factors (M = 3.19). Problem-focused (M = 2.58) and emotion-focused coping (M = 2.54) were used to a medium amount, while avoidance coping (M = 2.41) was used a little bit. Stress was not significantly correlated with job satisfaction ($r = -.101$, $p = .206$) but was significantly and positively correlated with problem-focused ($r = .262$, $p = .001$), emotion-focused ($r = .292$, $p < .001$), and avoidance coping ($r = .319$, $p < .001$). Only avoidance coping was significantly and negatively correlated with job satisfaction ($r = -.288$, $p < .001$). The findings indicate that workload-related mental demands and avoidance coping warrant attention alongside organizational conditions such as job security, compensation, and safety. These results informed the proposed Onboard Nurse Stress and Adaptive Coping Support Program, which combines workload and fatigue management, adaptive coping support, organizational communication, and peer cohesion, and which requires implementation and evaluation to establish its effectiveness.

Keywords: *cruise ship nurses, occupational stress, coping mechanisms, job satisfaction, maritime healthcare, stress management intervention*

INTRODUCTION

The cruise industry has grown substantially in the past two decades, driven by technological advancement, changing tourist preferences, and increasing demand for luxury travel. Passenger numbers have been growing by about 6% year over year, reaching an estimated 30 million in 2024 compared with 25 million in 2019 (J.P. Morgan, 2024). This growth has placed considerable demands on onboard health systems. Compared with land-based hospitals, shipboard medical departments are increasingly complex, and nurses handle routine health checks, chronic disease management, emergency care, epidemic management, and coordination with external medical

ISSN: 3116-3475
International Journal
of Education, Research, and Innovation Perspectives
Volume 2 Issue 11 (November 2026)

services (Amjad et al., 2023). A typical mid-sized cruise ship employs two to three physicians and four to six registered nurses, while larger vessels may carry 10 to 15 nursing staff (Mihanović et al., 2025).

Life aboard cruise ships adds physical and psychological stressors to these operational demands (Svetina et al., 2024). Most cruise ship nurses report very high workloads (Espinoza, 2025), while poor living conditions and limited contact with family and friends intensify isolation, a critical stressor for nurses (Musio et al., 2025). Clinically significant stress symptoms such as anxiety, burnout, and emotional exhaustion have been reported in 30% to 46% of nurses across healthcare settings (Getie et al., 2025), and long-term contracts restrict communication with loved ones while requiring multicultural communication skills (Susaeta et al., 2024). Cruise ship nurses also face irregular breaks and the need to maintain high standards of care in resource-limited, high-stakes settings (Van Mersbergen-de Bruin et al., 2025). Turnover in high-stress specialty nursing roles exceeds 20% annually (Bean, 2025), and cruise ship nurses have reported feeling overwhelmed and identified organizational inadequacies as a major source of dissatisfaction (Espinoza, 2025).

Coping plays a central role in how nurses manage these conditions. Maladaptive coping such as avoidance and denial may lead to chronic stress and reduced job satisfaction (Joseph & Ravindran, 2025), whereas adaptive strategies such as seeking social support, problem-solving, and positive reframing are associated with better mental health and retention (Chaaya et al., 2025). Although stress management and job satisfaction are well established as critical concerns in general nursing, little research has examined the cruise industry, which is characterized by long deployments, limited outside support, and high work demands. Existing studies have focused largely on hospital nurses or general seafarers, and few have quantitatively examined stress, coping, and job satisfaction together among registered nurses on international cruise ships.

This study therefore investigated the relationships among stress, coping mechanisms, and job satisfaction of cruise ship nurses. Specifically, it sought to determine (1) the respondents' demographic profile in terms of age, nationality, length of experience, salary, employment status, and marital status; (2) their stress level in terms of physical, emotional, and mental stress; (3) their job satisfaction in terms of motivators (intrinsic factors) and hygiene factors (extrinsic factors); (4) the coping mechanisms they use in terms of problem-focused, emotion-focused, and avoidance coping; (5) the relationship between stress level and job satisfaction; (6) the relationship between stress level and coping mechanisms; (7) the relationship between coping mechanisms and job satisfaction; (8) the stress management intervention program that may be developed for cruise ship nurses; and (9) the expected outcomes of the proposed intervention. Three null hypotheses were tested at the .05 level: that there is no significant relationship between stress and job satisfaction (H_{01}), between stress and coping mechanisms (H_{02}), and between coping mechanisms and job satisfaction (H_{03}).

The study responds to Sustainable Development Goal 3 on good health and well-being and Goal 8 on decent work and economic growth. Its findings are intended to help cruise ship nurses understand their stressors and coping strategies; to provide cruise line management with evidence for wellness programs and retention policies; to inform maritime healthcare policymakers concerned with seafarer health; to expand the literature on specialized and isolated nursing environments; and, indirectly, to benefit passengers and crew through a stable and satisfied nursing workforce.

Literature Review

Occupational Stress in Nursing

Occupational stress has long affected nurses across healthcare settings and specialties. Dartey et al. (2023) defined occupational stress as the physiological and psychological reaction to pressures or demands that exceed an individual's capacity to address them, and Chen et al. (2025) found that a high proportion of nurses report clinical manifestations of stress, with rates varying by workplace and patient-to-nurse ratio. Nursing stressors are multifaceted, involving workload, time constraints, emotional labor, interpersonal conflict, lack of autonomy, and organizational factors (Marcatto et al., 2024).

ISSN: 3116-3475
International Journal
of Education, Research, and Innovation Perspectives
Volume 2 Issue 11 (November 2026)

The emotional demands of nursing are particularly significant because nurses regularly confront suffering, death, and ethically difficult situations. Khammissa et al. (2022) identified emotional exhaustion resulting from continuous exposure to emotionally charged interactions as a key aspect of burnout. Shift work compounds these demands: Albakri et al. (2024) found that most nurses on irregular shifts experience sleep disturbances that heighten stress and impair performance, while Jing et al. (2023) linked working hours to reduced vigilance and executive function among intensive care nurses.

Nursing stressors are also cumulative and synergistic (Okuhara et al., 2021). High patient-to-nurse ratios, organizational complexity, limited resources, and emotional responses to patient suffering may coexist, and Khatatbeh et al. (2022) showed that high workload combined with lack of control contributes to burnout and health problems among nurses. The recognition of burnout as an occupational phenomenon (Amer et al., 2022) underscores the need to address sources of stress at the organizational level rather than only treating symptoms.

Coping Mechanisms and Stress Management

Coping mechanisms are the cognitive, emotional, and behavioral strategies people use to handle stressful events and regulate emotional reactions. Adaptive problem-focused strategies include active planning, informational support-seeking, and problem-solving (Nompo, 2024), and problem-focused coping has been positively correlated with job satisfaction and negatively correlated with burnout (Spaan et al., 2024). Adaptive emotion-focused strategies include positive reframing, acceptance, and seeking emotional support; Xu and Fan (2023) linked the nurse–patient relationship to nurses' job satisfaction, and Acoba (2024) found that social support can offset the negative effects of stress on mental and physical health.

Maladaptive strategies provide short-term relief but can worsen stress over time. Nurses who relied mainly on avoidance reported higher burnout and lower job satisfaction than those using adaptive coping (Iwanowicz-Palus et al., 2022), and rumination may intensify negative affect and hinder problem-solving (Sels et al., 2025). The effectiveness of coping is situation-specific: problem-focused coping may be more effective for controllable stressors, whereas emotion- and acceptance-focused coping may be more relevant for uncontrollable stressors such as the isolation and confinement inherent in cruise ship work (Nuetzel, 2023).

Social support is a further coping resource. Instrumental support involves practical help, whereas emotional support involves understanding, encouragement, and validation (Giao et al., 2020), and collegial support has been shown to be important for nurses' confidence and well-being in the workplace (Hilli et al., 2025). Personal characteristics also shape coping: hardiness has been associated with problem-oriented coping (Leszko et al., 2020), and positive psychological traits with more adaptive coping and better well-being (Aldbyani et al., 2025). Nonetheless, coping effectiveness depends on organizational and environmental conditions as well as individual capacities.

Job Satisfaction and Retention in Nursing

Job satisfaction is a multidimensional construct reflecting the degree to which employees feel content, fulfilled, and appreciated in their jobs (Montuori et al., 2022). In nursing, it directly affects quality of care, patient safety, and retention, and declining satisfaction has been associated with turnover rates exceeding 20% per year in high-stress specialty roles (Jachmann et al., 2025). Intrinsic factors include autonomy, professional growth, meaningful work, and quality care (Hudays et al., 2024), while extrinsic factors include compensation, benefits, scheduling, supervisory support, and resources. Bragadóttir et al. (2023) identified teamwork as closely related to nurses' job satisfaction, and Shah and Ayub (2021) found that person–organization fit strongly influences satisfaction.

Job satisfaction is closely tied to retention. Alshaibani et al. (2024) found that satisfied nurses were more likely to intend to stay and remain committed to their organizations, whereas low satisfaction predicts turnover intention and actual turnover, which increases recruitment and training costs, disrupts continuity of care, and raises the risk of errors (Wynendaele et al., 2025). Understanding the factors that influence satisfaction is therefore essential for retaining a committed nursing workforce (Ghani et al., 2022).

ISSN: 3116-3475
International Journal
of Education, Research, and Innovation Perspectives
Volume 2 Issue 11 (November 2026)

In the cruise ship setting, job satisfaction is complicated by environmental and occupational factors. Seafarers face workplace challenges and stressors related to isolation, workload, and working conditions (Strukcinskiene et al., 2025), and the confined environment limits access to alternative social or recreational outlets (Brooks & Greenberg, 2022). Turnover is also costly: cruise nursing orientation to maritime protocols, equipment, and environments is more demanding than land-based training (Lau et al., 2022), turnover periods overburden remaining staff (Ashipala & Nghole, 2022), and high turnover threatens continuity of care (Al-Rjoub, 2025).

Stress and Well-Being in the Maritime Context

Maritime research highlights conditions that distinguish shipboard work from land-based practice. In a survey of 13,008 seafarers from 154 nationalities and 44 shipping companies, Hayes-Mejia and Stafström (2024) found that although some participants reported well-being, loneliness, poor sleep quality, limited socialization, and workplace discrimination were common concerns. Svetina et al. (2024) identified factors affecting seafarers' mental health and career intentions, and Brooks and Greenberg (2022) systematically reviewed the mental health and psychological well-being of maritime personnel.

Studies specific to cruise ship nursing remain scarce. Espinoza (2025) described cruise ship nurses' experiences of heavy workload and organizational shortcomings, while Susaeta et al. (2024) discussed the challenges of managing diversity and communication in multinational cruise workforces. These accounts suggest that cruise ship nurses form a distinct occupational group whose stress, coping, and satisfaction cannot be assumed to mirror those of hospital-based nurses.

Empirical Studies on Stress, Coping, and Job Satisfaction

Hospital-based studies have linked organizational conditions with nurses' satisfaction and well-being. Bae (2024), studying 264 nurses in 28 South Korean hospitals, found that more patients per nurse and higher turnover were associated with lower job satisfaction and that mandatory overtime was linked to greater intention to leave. Norful et al. (2024), in a study of nurses across 13 countries, identified modifiable work stressors associated with burnout, anxiety, depression, low job satisfaction, and turnover intention, and Falguera et al. (2023) found among 549 nurses in Central Philippines that low work engagement was associated with greater burnout and turnover intention, whereas dedication was associated with higher job satisfaction.

Other studies have focused on coping. Vallone et al. (2024) identified active, emotion-focused, and passive coping patterns among 265 nurses, with emotion-focused copers reporting more psychological problems and fewer workplace resources. Antczak-Komoterska et al. (2023) examined stress and coping among 220 Polish nurses using the Perceived Stress Scale and the Brief COPE, and Zhu et al. (2023) found that transition shock was negatively related to job satisfaction and intention to stay among newly graduated nurses, with negative coping and job satisfaction playing partial roles in this relationship.

Further studies have highlighted psychological resources. Qiu et al. (2025), in a longitudinal study of 494 new nurses in China, found that organizational commitment was positively associated with perceived professional benefit, with psychological capital and positive coping styles showing significant indirect associations, while Alkubati et al. (2025) found among Saudi critical care nurses that occupational stress was negatively related to task performance and that resilience and job satisfaction played mediating roles. Collectively, these studies relate stress, coping, and satisfaction to individual and organizational characteristics, but few have examined physical, emotional, and mental stress; problem-focused, emotion-focused, and avoidance coping; and intrinsic and extrinsic job satisfaction together among cruise ship nurses, which is the gap the present study addressed.

Theoretical Framework

The study was anchored on four complementary theories. The General Adaptation Syndrome (Selye, 1956, as cited in Jackson, 2014) explains how individuals respond to stress through stages of alarm, resistance, and exhaustion, and was used to frame the physical, emotional, and mental stress that nurses experience from long shifts, emergencies, understaffing, and extended separation from family. Herzberg's Two-Factor Theory

ISSN: 3116-3475
International Journal
of Education, Research, and Innovation Perspectives
Volume 2 Issue 11 (November 2026)

(Herzberg, 1959, as cited in Abdulkhamidova, 2021) distinguishes motivator or intrinsic factors, such as achievement, recognition, and growth, from hygiene or extrinsic factors, such as salary, working conditions, and company policy, and was used to examine job satisfaction.

Lazarus and Folkman's Stress and Coping Theory (Lazarus & Folkman, 1984, as cited in Stanisławski, 2019) explains how people manage stressful experiences through problem-focused coping, which addresses the problem itself; emotion-focused coping, which manages emotional reactions; and avoidance coping, which evades or delays dealing with stressors. Their Transactional Model of Stress and Coping further views stress as a function of the relationship between persons and their environments, shaped by primary appraisal of a situation as threatening or challenging and secondary appraisal of available coping resources.

Together, these perspectives explain physiological stress responses (General Adaptation Syndrome), workplace satisfaction (Herzberg), and cognitive appraisal and coping (Lazarus and Folkman). They guided the interpretation of the statistical associations among stress, coping, and job satisfaction without assuming causal effects, and informed the design of a program addressing occupational stress, coping, and organizational factors.

Conceptual Framework

Figure 1 presents the conceptual framework of the study, which illustrates the relationships among work-related stressors, perceived stress level, coping mechanisms, and job satisfaction among cruise ship nurses. Work-related stressors refer to the demands of the cruise ship nurse's job, such as long working hours, high patient workload, limited medical facilities, long-term contracts, and lack of family support. Perceived stress level refers to the degree of stress nurses experience as a result of these demands, which may differ according to experience, professional skills, and resources. Both are linked to coping mechanisms, indicating that job demands and the subjective perception of stress may shape the strategies nurses use.

Coping mechanisms, comprising problem-focused, emotion-focused, and avoidance coping, serve as the connecting factor in the framework and are linked to job satisfaction, the outcome variable, defined as how satisfied nurses are with their jobs, responsibilities, and working environment. These relationships were examined as associations rather than causal effects, with the aim of informing a proposed support program to reduce stress, strengthen coping, and enhance the professional well-being of cruise ship nurses.

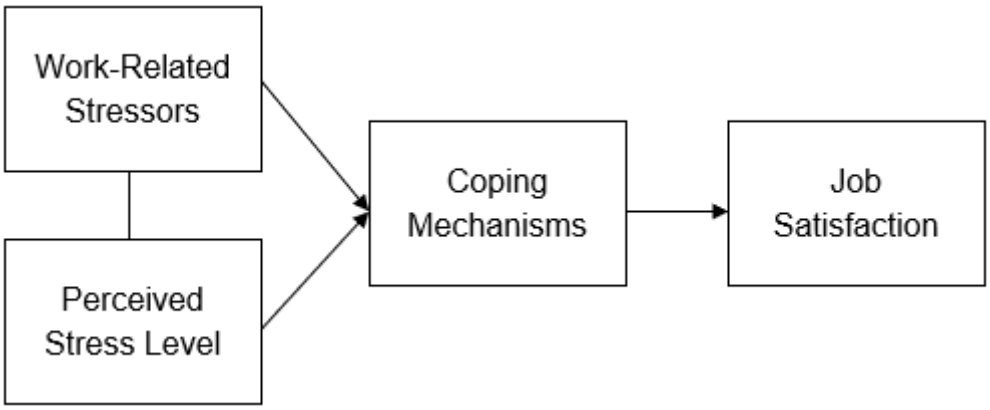


Figure 1. *Conceptual Framework of the Study*

METHODS

Research Design

The study used a quantitative descriptive-correlational design with a cross-sectional survey method. The design was suitable for describing the respondents' characteristics, determining the levels of the study variables,

ISSN: 3116-3475
International Journal
of Education, Research, and Innovation Perspectives
Volume 2 Issue 11 (November 2026)

and examining their naturally occurring relationships without manipulating the respondents' working conditions (Devi et al., 2023). Stress was examined in terms of physical, emotional, and mental stress; coping mechanisms in terms of problem-focused, emotion-focused, and avoidance coping; and job satisfaction in terms of motivators (intrinsic factors) and hygiene factors (extrinsic factors). Because of the cross-sectional and non-experimental nature of the design, the findings were interpreted as statistical associations rather than causal relationships.

Research Locale

The study was conducted in the maritime healthcare environment of international cruise ships, focusing on registered nurses providing healthcare services to passengers and crew. Cruise ships operate in a unique, mobile, and relatively isolated environment characterized by long-term contracts, multinational staff, limited access to land-based health facilities, emergency responsibilities, and operational demands that differ from those of conventional healthcare facilities.

Participants and Sampling Technique

The target population consisted of registered nurses with professional experience on international cruise ships. Nurses from cruise ship medical departments identified by medical directors were invited through recruitment flyers, staff meetings, and crew briefings, and recruitment continued until the desired number of participants was reached. A total of 158 respondents provided complete and unique responses that were included in the final analysis. All respondents had completed at least two cruise ship contracts. Table 1 presents their demographic profile.

Research Instruments

A structured survey questionnaire with four sections was used: a demographic profile, a stress scale, a coping scale, and a job satisfaction scale. Stress was measured using the 30-item Perceived Stress Questionnaire (PSQ; Levenstein et al., 1993), rated on a four-point scale and grouped into physical stress (8 items), emotional stress (10 items), and mental stress (12 items); positively worded items were reverse-scored so that higher scores indicated greater perceived stress. Coping was measured using the 28-item Brief COPE Inventory (Carver, 1997), rated on a four-point scale and adapted to stressors specific to cruise ship nursing; responses were classified into problem-focused (6 items), emotion-focused (10 items), and avoidance coping (12 items).

Job satisfaction was measured using a 30-item questionnaire based on Herzberg's Two-Factor Theory and adapted from the measurement approach of Hipos and Benavides (2023), consisting of 14 motivator (intrinsic) items covering achievement, recognition, the work itself, advancement, and growth, and 16 hygiene (extrinsic) items covering organizational policies, supervision, interpersonal relations, working conditions, compensation, safety, and job security. Responses were rated on a five-point scale from strongly disagree to strongly agree, with higher scores indicating more favorable perceptions. The instruments were selected for their relevance to the study objectives and theoretical framework, and their content validity and item groupings were reviewed for the cruise ship nursing context.

Data Gathering Procedure

Data collection proceeded in six stages. First, institutional approval was obtained from cruise line management and medical directors, and data protection arrangements, recruitment plans, and onboard support instructions were prepared. Second, nurses were recruited and informed of the study's purpose, procedures, and voluntary nature. Third, interested participants received an informed consent form and provided written consent. Fourth, the questionnaire was administered, requiring about 25 to 30 minutes to complete, with privacy maintained and clarification provided as needed. Fifth, completed questionnaires were checked for completeness, assigned identification codes, and entered into a secure database. Finally, participants were given contact information for any concerns, cruise companies received a summary of aggregated results, and the data were securely transmitted for statistical analysis.

ISSN: 3116-3475
International Journal
of Education, Research, and Innovation Perspectives
Volume 2 Issue 11 (November 2026)

Data Analysis

Frequency and percentage were used to describe the respondents' demographic characteristics, and the mean and standard deviation were used to determine the levels of stress, coping, and job satisfaction. Stress means were interpreted as 1.00–1.75, almost never; 1.76–2.50, sometimes; 2.51–3.25, often; and 3.26–4.00, usually. Coping means were interpreted as 1.00–1.75, not at all; 1.76–2.50, a little bit; 2.51–3.25, a medium amount; and 3.26–4.00, a lot. Job satisfaction means were interpreted as 1.00–1.80, strongly disagree; 1.81–2.60, disagree; 2.61–3.40, neutral; 3.41–4.20, agree; and 4.21–5.00, strongly agree. Pearson product-moment correlation was used to determine the direction, strength, and significance of the relationships among stress, coping mechanisms, and job satisfaction, with absolute values interpreted as .00–.19, very low; .20–.39, low; .40–.59, medium; .60–.79, high; and .80–1.00, very high. Hypotheses were tested at the .05 level of significance.

Ethical Considerations

The study adhered to the principles of beneficence, non-maleficence, and respect for persons, and the protocol underwent review and approval by an institutional review board or ethics committee before data collection. All potential participants received an informed consent form describing the study objectives, procedures, risks, benefits, and their rights. Participation was voluntary, and participants could decline or withdraw at any time without consequences for their employment, promotion, or performance evaluation; the research was conducted independently of cruise line management to minimize perceived coercion. No personally identifiable information, such as names, employee identification numbers, or vessel assignments, was collected; random codes were used instead. Data were stored in password-protected systems and locked cabinets accessible only to the research team, and only aggregated results were reported, so that cruise line management could not view individual responses.

RESULTS AND DISCUSSION

Demographic Profile of the Respondents

Table 1. *Demographic Profile of the Respondents (N = 158)*

Profile Variable and Category	Frequency	Percentage
Age		
Under 25	1	0.6
25 to 34	48	30.4
35 to 44	66	41.8
45 to 54	29	18.4
55 or older	12	7.6
Prefer not to say	2	1.3
Nationality		
Philippines	33	20.9
South Africa	29	18.4
India	10	6.3
United Kingdom	9	5.7
Colombia	8	5.1
Kenya	8	5.1
Other nationalities (14 countries)	53	33.5
Prefer not to say / not reported	8	5.1
Marital status		
Single	65	41.1
Married	55	34.8
Divorced / annulled / separated	22	13.9

ISSN: 3116-3475
International Journal
of Education, Research, and Innovation Perspectives
Volume 2 Issue 11 (November 2026)

Profile Variable and Category	Frequency	Percentage
Widowed	1	0.6
Other	1	0.6
Prefer not to say	14	8.9
Cruise ship nursing experience		
2–5 completed contracts	35	22.2
6–10 completed contracts	71	44.9
11–15 completed contracts	32	20.3
More than 15 completed contracts	20	12.7
Monthly salary		
Below USD 3,500	5	3.2
USD 3,501–6,500	118	74.7
USD 6,501–10,000	25	15.8
Prefer not to say	10	6.3
Employment status		
Contractual	120	75.9
Full-time	16	10.1
Part-time	16	10.1
Prefer not to say	6	3.8

Note. Other nationalities comprise China and Indonesia (5 each); Malaysia and Thailand (7 each); Portugal and Zimbabwe (6 each); Canada (4); Botswana (3); Brazil, Mexico, Romania, and Serbia (2 each); and Spain and the United States (1 each). Percentages may not total exactly 100.0 because of rounding.

As shown in Table 1, most respondents were 35 to 44 years old (41.8%), followed by those aged 25 to 34 (30.4%). Filipino (20.9%) and South African nurses (18.4%) formed the largest nationality groups, although no single nationality constituted a majority. Single (41.1%) and married nurses (34.8%) made up most of the sample. Most respondents had completed 6 to 10 contracts (44.9%), and 77.8% had completed at least six. Nearly three-fourths earned USD 3,501 to 6,500 monthly (74.7%), and contractual employment predominated (75.9%).

The respondents thus represent an experienced, contract-based, multinational nursing workforce, consistent with the multinational maritime workforce described by Hayes-Mejia and Stafström (2024) and the communication demands of culturally diverse cruise teams discussed by Susaeta et al. (2024). Within the Transactional Model of Stress and Coping, these characteristics form part of the work and personal context in which nurses appraise shipboard demands and resources. However, differences in stress, coping, or satisfaction by demographic group were not tested, and completed contracts reflect accumulated experience rather than the length of the current deployment.

Stress, Job Satisfaction, and Coping of Cruise Ship Nurses

Table 2 summarizes the levels of stress, job satisfaction, and coping mechanisms of the respondents.

Table 2. *Summary of the Stress, Job Satisfaction, and Coping Mechanisms of Cruise Ship Nurses (N = 158)*

Variable and Dimension	Mean	SD	Interpretation
Stress (4-point scale)			
Physical stress	2.50	0.36	Sometimes
Emotional stress	2.47	0.35	Sometimes
Mental stress	2.53	0.31	Often
Overall stress	2.50	0.28	Sometimes
Job satisfaction (5-point scale)			
Motivators (intrinsic factors)	3.23	0.45	Neutral
Hygiene factors (extrinsic factors)	3.19	0.43	Neutral
Overall job satisfaction	3.20	0.42	Neutral
Coping mechanisms (4-point scale)			

ISSN: 3116-3475
International Journal
of Education, Research, and Innovation Perspectives
Volume 2 Issue 11 (November 2026)

Variable and Dimension	Mean	SD	Interpretation
Problem-focused coping	2.58	0.38	A medium amount
Emotion-focused coping	2.54	0.33	A medium amount
Avoidance coping	2.41	0.38	A little bit

Note. Stress: 1.00–1.75, almost never; 1.76–2.50, sometimes; 2.51–3.25, often; 3.26–4.00, usually. Job satisfaction: 2.61–3.40, neutral; 3.41–4.20, agree. Coping: 1.76–2.50, a little bit; 2.51–3.25, a medium amount.

Stress level

Overall stress was experienced sometimes (M = 2.50, SD = 0.28). Mental stress was the highest-rated dimension and the only one interpreted as often (M = 2.53, SD = 0.31), followed by physical stress (M = 2.50, SD = 0.36) and emotional stress (M = 2.47, SD = 0.35). The most prominent stress indicator was the perception that too many demands were being made (M = 2.73), followed by irritability and feeling hurried (both M = 2.59). Within physical stress, feeling tired (M = 2.59) and having too many decisions to make (M = 2.57) were most prominent, while within emotional stress, the reverse-scored item on feeling full of energy (M = 2.56) and feeling criticized or judged (M = 2.54) ranked highest.

The prominence of workload and mental demands is consistent with Dartey et al. (2023) and Khatatbeh et al. (2022) on occupational workload, with Espinoza's (2025) account of heavy workloads in cruise ship nursing, and with the sleep and working-condition concerns among seafarers reported by Hayes-Mejia and Stafström (2024). The General Adaptation Syndrome explains why sustained adjustment to such demands warrants attention, although the findings cannot establish that respondents progressed through Selye's stages. Because overall stress fell within the sometimes category, the results identify persistent areas of pressure, particularly demands, fatigue, and mental urgency, rather than evidence of severe stress among all cruise ship nurses.

Job satisfaction

Overall job satisfaction was neutral (M = 3.20, SD = 0.42), with motivators (M = 3.23, SD = 0.45) rated slightly higher than hygiene factors (M = 3.19, SD = 0.43). Among motivators, a sense of accomplishment (M = 3.34) and contributing positively to the workplace (M = 3.30) were rated highest, while organizational acknowledgment and the job improving skills and experience were rated lowest (both M = 3.13). Among hygiene factors, getting along with colleagues was the only item rated agree (M = 3.42), whereas job security (M = 2.99), fair salary (M = 3.01), and safety at work (M = 3.03) were rated lowest.

Herzberg's Two-Factor Theory helps interpret this pattern by distinguishing satisfaction with the work itself from the employment conditions surrounding it, although the narrow difference between dimensions should not be treated as a substantial separation. The multidimensional character of satisfaction corresponds with Montuori et al. (2022); the relatively favorable collegial ratings align with the importance of teamwork and support emphasized by Bragadóttir et al. (2023); and the concerns about security, pay, and safety echo Bae's (2024) findings on staffing and employment conditions. Nurses appear to value the professional and interpersonal aspects of their work while remaining uncertain about key organizational conditions.

Coping mechanisms

Problem-focused coping (M = 2.58, SD = 0.38) and emotion-focused coping (M = 2.54, SD = 0.33) were used to a medium amount, whereas avoidance coping (M = 2.41, SD = 0.38) was used a little bit. Making a plan (M = 2.65) and taking action to improve the situation (M = 2.61) were the most frequent problem-focused strategies, and seeking advice from others was the least frequent (M = 2.51). Acceptance (M = 2.61), looking for something good, and praying or meditating (both M = 2.57) were the most frequent emotion-focused strategies. Within the avoidance composite, seeking comfort in religion or spirituality (M = 2.63) and distraction (M = 2.56) ranked highest, while substance use and giving up the attempt to cope ranked lowest (both M = 2.25).

These patterns are consistent with Lazarus and Folkman's view that individuals may simultaneously try to change a situation, regulate their emotions, or distance themselves from stressors, and with the variation in nurses' coping responses reported by Antczak-Komoterska et al. (2023) and Vallone et al. (2024). Planning,

ISSN: 3116-3475
International Journal
of Education, Research, and Innovation Perspectives
Volume 2 Issue 11 (November 2026)

acceptance, and support-seeking have likewise been identified as relevant coping practices (Nompo, 2024). Because the avoidance composite combines heterogeneous behaviors, including spiritual comfort and distraction as well as disengagement, its items should not be regarded as equally maladaptive, and frequency of use does not by itself indicate effective coping.

Relationships Among Stress, Coping Mechanisms, and Job Satisfaction

Table 3 presents the Pearson correlations among the study variables.

Table 3. *Pearson Correlations Among Stress, Coping Mechanisms, and Job Satisfaction (N = 158)*

Variable Pair	r	p	Strength	Decision
Stress and job satisfaction (H_{01})				
Overall stress – Overall job satisfaction	−.101	.206	Very low	Not significant
Overall stress – Motivators	−.070	.381	Very low	Not significant
Overall stress – Hygiene factors	−.121	.129	Very low	Not significant
Physical stress – Overall job satisfaction	−.096	.228	Very low	Not significant
Emotional stress – Overall job satisfaction	−.097	.225	Very low	Not significant
Mental stress – Overall job satisfaction	−.066	.410	Very low	Not significant
Stress and coping mechanisms (H_{02})				
Overall stress – Problem-focused coping	.262	.001	Low	Significant
Overall stress – Emotion-focused coping	.292	< .001	Low	Significant
Overall stress – Avoidance coping	.319	< .001	Low	Significant
Physical stress – Problem-focused coping	.309	< .001	Low	Significant
Physical stress – Emotion-focused coping	.326	< .001	Low	Significant
Physical stress – Avoidance coping	.221	.005	Low	Significant
Emotional stress – Problem-focused coping	.190	.017	Very low	Significant
Emotional stress – Emotion-focused coping	.172	.031	Very low	Significant
Emotional stress – Avoidance coping	.349	< .001	Low	Significant
Mental stress – Problem-focused coping	.182	.022	Very low	Significant
Mental stress – Emotion-focused coping	.254	.001	Low	Significant
Mental stress – Avoidance coping	.233	.003	Low	Significant
Coping mechanisms and job satisfaction (H_{03})				
Problem-focused coping – Overall job satisfaction	.016	.843	Very low	Not significant
Emotion-focused coping – Overall job satisfaction	.108	.177	Very low	Not significant
Avoidance coping – Overall job satisfaction	−.288	< .001	Low	Significant
Avoidance coping – Motivators	−.232	.003	Low	Significant
Avoidance coping – Hygiene factors	−.315	< .001	Low	Significant

Note. Correlation strength: .00–.19, very low; .20–.39, low. Dimension-level correlations between individual stress dimensions and motivators or hygiene factors (r = −.138 to −.044) and between problem- or emotion-focused coping and motivators or hygiene factors (r = −.017 to .132) were all nonsignificant. Significance was evaluated at $\alpha = .05$.

Stress and job satisfaction

Overall stress was not significantly correlated with overall job satisfaction (r = −.101, p = .206), and all dimension-level correlations were very low and nonsignificant; H_{01} was therefore not rejected. This qualifies the assumption that more stressed nurses are necessarily less satisfied. Herzberg's theory suggests that evaluations of

ISSN: 3116-3475
International Journal
of Education, Research, and Innovation Perspectives
Volume 2 Issue 11 (November 2026)

accomplishment, recognition, and employment conditions need not mirror stress levels, and the Transactional Model recognizes that responses to demands depend on appraisal and coping. The result differs in emphasis from Zhu et al. (2023), who found a negative relationship between transition shock and satisfaction among new graduates, and from Alkubati et al. (2025), who examined stress, resilience, and satisfaction among critical care nurses; differences in experience, setting, instruments, or the stress construct may account for the contrast. The absence of a significant correlation should not be taken to mean that stress is unimportant.

Stress and coping mechanisms

Overall stress was significantly and positively correlated with problem-focused ($r = .262$, $p = .001$), emotion-focused ($r = .292$, $p < .001$), and avoidance coping ($r = .319$, $p < .001$), all low correlations; H_{02} was therefore rejected. All dimension-level correlations were also significant, with emotional stress and avoidance coping showing the strongest association ($r = .349$, $p < .001$). Consistent with the Transactional Model, nurses reporting higher stress tended to use several kinds of coping more frequently. This supports examining stress and coping together, as Antczak-Komoterska et al. (2023) did, and the coexistence of distinct coping patterns reported by Vallone et al. (2024) and Qiu et al. (2025). Because coping categories are not mutually exclusive and the data are cross-sectional, these correlations do not show whether stress preceded coping or that greater coping represents successful stress management.

Coping mechanisms and job satisfaction

Avoidance coping was significantly and negatively correlated with overall job satisfaction ($r = -.288$, $p < .001$), motivators ($r = -.232$, $p = .003$), and hygiene factors ($r = -.315$, $p < .001$), whereas neither problem-focused ($r = .016$, $p = .843$) nor emotion-focused coping ($r = .108$, $p = .177$) was significantly related to satisfaction. H_{03} was therefore rejected for avoidance coping only. This is consistent with concerns about negative coping raised by Zhu et al. (2023) and Joseph and Ravindran (2025) and with the association between avoidance and lower satisfaction reported by Iwanowicz-Palus et al. (2022). Notably, avoidance was the least-used coping category, indicating that even infrequent use may be related to how work is evaluated. Unlike broad claims that adaptive coping automatically yields higher satisfaction, the present results suggest that avoidance-related behaviors specifically warrant attention.

Proposed Onboard Nurse Stress and Adaptive Coping Support Program

Based on the findings, the Onboard Nurse Stress and Adaptive Coping Support Program was developed for cruise line medical departments, nurse managers, human resources, occupational health specialists, and onboard nurses. Its overall goal is to support the well-being and work functioning of cruise ship nurses by strengthening adaptive coping and organizational support while reducing avoidable mental and workload-related strain. The program comprises five components, each derived from specific findings (Table 4), and is implemented in five phases: preparation and baseline assessment; orientation and skills preparation; ongoing implementation throughout the contract; monthly and quarterly monitoring; and end-of-cycle evaluation. The estimated budget for a one-vessel pilot is USD 3,740.

Table 4. *Components and Empirical Basis of the Onboard Nurse Stress and Adaptive Coping Support Program*

ISSN: 3116-3475
International Journal
of Education, Research, and Innovation Perspectives
Volume 2 Issue 11 (November 2026)

Component	Statistical Basis	Objective and Core Activities
Workload and mental fatigue management	Mental stress ranked highest (M = 2.53); excessive demands had the highest stress-item mean (M = 2.73).	Reduce cognitive overload, fatigue, and decision strain through staffing and task-allocation review, protected micro-breaks, duty rotation and escalation procedures, and fatigue-risk and task-prioritization sessions.
Adaptive coping and avoidance reduction	Stress was positively related to avoidance coping ($r = .319$, $p < .001$); avoidance was negatively related to job satisfaction ($r = -.288$, $p < .001$).	Reduce reliance on denial, disengagement, self-blame, and substance-based coping through confidential brief counseling, early recognition of avoidance, personal coping plans, referral pathways, and education on substance-related risk and support seeking.
Problem solving and emotional regulation	Stress was significantly related to problem-focused and emotion-focused coping.	Improve the appropriateness and flexibility of coping through scenario-based problem solving, positive reframing, emotional-regulation training, structured peer debriefing, and post-critical-incident support.
Organizational support and employment communication	Contractual employment accounted for 75.9%; job security (M = 2.99), salary fairness (M = 3.01), workplace safety (M = 3.03), and favorable policies (M = 3.11) were among the lowest-rated indicators.	Improve clarity, fairness, safety, and access to management support through contract-renewal briefings, compensation and benefits orientation, confidential safety reporting, scheduled supervisor consultations, and written feedback on reported concerns.
Peer cohesion and multicultural support	Collegial relationships received the highest satisfaction rating (M = 3.42).	Preserve collegial support and belonging through buddy and mentorship systems, multicultural communication activities, peer check-ins, recognition of team contributions, and orientation of new nurses to support resources.

Note. The program components are proposed actions derived from the study findings; they were not implemented or evaluated in the present study.

The program draws on the study's theoretical framework: the General Adaptation Syndrome supports attention to continuing demands and fatigue; Lazarus and Folkman's theories support appraisal, problem-solving, emotional regulation, and recognition of unhelpful responses; and Herzberg's theory directs attention to employment communication and working conditions. It is also consistent with literature emphasizing modifiable workplace stressors and organizational action (Norful et al., 2024), staffing and working-hour conditions (Bae, 2024), teamwork and organizational support (Bragadóttir et al., 2023), and social support (Acoba, 2024). Its multicomponent design recognizes that coping workshops alone would not address the employment and workload concerns identified by the respondents.

ISSN: 3116-3475
International Journal
of Education, Research, and Innovation Perspectives
Volume 2 Issue 11 (November 2026)

Expected Outcomes of the Proposed Program

Table 5 presents the expected outcomes and evaluation indicators of the program.

Table 5. *Expected Outcomes and Evaluation Indicators of the Proposed Program*

Intervention Area	Expected Outcome	Suggested Evaluation Indicator
Workload and mental fatigue management	Lower physical, emotional, mental, and overall stress relative to baseline.	Pretest–posttest item and dimension means; duty-hour and break records; fatigue-related incidents.
Adaptive coping and avoidance reduction	Lower avoidance coping and earlier use of confidential support.	Avoidance means; counseling and referral uptake; participant feedback.
Problem solving and emotional regulation	Maintained or improved use of planning, direct action, positive reframing, acceptance, and emotional support.	Problem- and emotion-focused coping means; session attendance; debriefing utilization.
Organizational support and employment communication	Improved perceptions of job security, compensation fairness, workplace safety, policies, and supervisory responsiveness.	Targeted job-satisfaction items; hygiene-factor mean; concern-resolution records.
Peer cohesion and multicultural support	Sustained collegial relationships, teamwork, belonging, and access to peer support.	Colleague-related satisfaction items; mentorship participation; peer-support ratings.
Overall program outcome	Improved nurse well-being and job satisfaction with less reliance on avoidance coping.	Baseline and follow-up composite scores; retention, absence, and safety indicators where available.

Note. Expected outcomes are prospective evaluation targets, not observed effects.

The program is expected to lower perceived stress, reduce reliance on avoidance coping, sustain constructive problem-focused and emotion-focused practices, improve access to confidential support and organizational communication, and maintain peer cohesion. These are prospective evaluation targets rather than outcomes demonstrated in the present cross-sectional study. Given the nonsignificant stress–satisfaction correlation, the program should not be expected to increase satisfaction through stress reduction alone; its effects should be established through baseline and follow-up measurement after implementation, consistent with the emphasis on monitoring workload and psychosocial support in shipboard settings (Hayes-Mejia & Stafström, 2024; Norful et al., 2024).

CONCLUSION

The respondents were an experienced, multinational, and predominantly contractual population of cruise ship nurses. Cognitive and workload-related demands were the most evident contributors to stress, suggesting that cognitive load, fatigue, urgency, and responsibility deserve administrative attention. Job satisfaction was neutral and mixed: nurses found meaning in their work and maintained good collegial relationships, but rated job security, compensation fairness, workplace safety, and organizational policies less favorably. Nurses used constructive problem-focused and emotion-focused coping to a moderate extent, and the presence of avoidance coping indicates that the appropriateness of coping responses remains an important concern.

Stress was not significantly related to job satisfaction, indicating that satisfaction cannot be explained by stress levels alone. Higher stress was associated with greater use of all coping strategies, and avoidance coping, although the least used, was the only coping category consistently associated with lower satisfaction. These findings imply that an effective organizational response should address workload, communication, safety, supervision, and peer support in addition to individual coping. The study contributes context-specific evidence on an understudied nursing population and offers the Onboard Nurse Stress and Adaptive Coping Support Program as an evidence-informed framework whose effectiveness must be established through implementation and

evaluation. Because the design was cross-sectional and correlational and relied on self-reported data, the findings should be interpreted as associations and not generalized to all cruise ship nurses.

Recommendations

Based on the findings and conclusions, the following recommendations are offered:

1. Cruise line administrators may pilot the Onboard Nurse Stress and Adaptive Coping Support Program, beginning with workload evaluation, fatigue-risk management, recovery time where feasible, and escalation pathways for periods of excessive workload.
2. Medical directors, nurse supervisors, human resources personnel, and occupational health specialists may maintain confidential counseling and referral pathways and provide targeted support in problem-solving, emotional regulation, help-seeking, and the reduction of avoidance behaviors.
3. Employers may strengthen employment policies and communication to provide greater clarity on contract renewal, job security, salaries and benefits, workplace safety, organizational policies, and the resolution of reported concerns.
4. Nurse leaders may preserve the positive collegial relationships observed in this study through mentoring, buddy systems, peer consultation, recognition, and culturally sensitive communication within multinational nursing teams.
5. Program implementation may include baseline and follow-up assessment of stress, coping, and job satisfaction, together with operational data such as working hours, breaks, referrals, concern-resolution time, fatigue-related incidents, attendance, retention, and participant feedback.
6. Future researchers may use longitudinal or repeated-measures designs across contracts and deployment periods; evaluate the proposed program through quasi-experimental or mixed-methods studies; use larger and more representative samples to examine differences by nationality, experience, employment status, and ship type; and measure the actual duration of current contracts in addition to the number of completed contracts.

References

Abdulkhamidova, F. (2021, June). *Herzberg's two-factor theory*. ResearchGate. https://www.researchgate.net/publication/352465259_Herzberg's_Two-Factor_Theory

Acoba, E. F. (2024). Social support and mental health: The mediating role of perceived stress. *Frontiers in Psychology, 15*, Article 1330720. https://doi.org/10.3389/fpsyg.2024.1330720

Albakri, U., Smeets, N., Drotos, E., Kant, I., Gabrio, A., & Meertens, R. (2024). Sleep quality and the need for recovery among nurses working irregular shifts: A cross-sectional study. *Work, 79*(3), 1477–1490. https://doi.org/10.3233/WOR-230500

Aldbyani, A., Wang, G., Qi, Y., Chuanxia, Z., Li, J., Leng, J., & Alhimaidi, A. (2025). Positive psychological traits and psychological well-being: Investigating roles of positive coping strategies and life stressors. *BMC Psychology, 13*(1), Article 465. https://doi.org/10.1186/s40359-025-02807-9

Alkubati, S. A., Alrashidi, O. A., Albaqawi, H., Alharbi, A., Laradhi, A. O., Albani, G. F., Alsaqri, S., Pasay-An, E., & Ali, A. Z. (2025). The mediating effect of resilience and job satisfaction on the relationship between critical care nurses' stress and task performance: Findings to improve nursing care. *BMC Nursing, 24*, Article 579. https://doi.org/10.1186/s12912-025-03225-3

Al-Rjoub, S. (2025). When leadership drives nurses away: Empirical research qualitative on high turnover rates reasons. *Nursing Open, 12*(7), Article e70271. https://doi.org/10.1002/nop2.70271

Alshaibani, N. M., Aboshaiqah, A. E., & Alanazi, N. H. (2024). Association of job satisfaction, intention to stay, organizational commitment, and general self-efficacy among clinical nurses in Riyadh, Saudi Arabia. *Behavioral Sciences, 14*(12), Article 1140. https://doi.org/10.3390/bs14121140

Amer, S. A. A. M., Elotla, S. F., Ameen, A. E., Shah, J., & Fouad, A. M. (2022). Occupational burnout and productivity loss: A cross-sectional study among academic university staff. *Frontiers in Public Health, 10*, Article 861674. https://doi.org/10.3389/fpubh.2022.861674

Amjad, A., Kordel, P., & Fernandes, G. (2023). A review on innovation in healthcare sector (telehealth) through artificial intelligence. *Sustainability, 15*(8), Article 6655. https://doi.org/10.3390/su15086655

Antczak-Komoterska, A., Haor, B., Malinowska, M., Grzelak, L., Biercewicz, M., Kochman, D., Krajewska, K., Filipska-Blejder, K., Wiśniewski, A., & Ślusarz, R. (2023). Analysis of the level of stress and methods of coping with stress among the nursing staff. *Nursing Reports, 13*(3), 1318–1330. https://doi.org/10.3390/nursrep13030111

Ashipala, D. O., & Nghole, T. M. (2022). Factors contributing to burnout among nurses at a district hospital in Namibia: A qualitative perspective of nurses. *Journal of Nursing Management, 30*(7), 2982–2991. https://doi.org/10.1111/jonm.13693

Bae, S.-H. (2024). Nurse staffing, work hours, mandatory overtime, and turnover in acute care hospitals affect nurse job satisfaction, intent to leave, and burnout: A cross-sectional study. *International Journal of Public Health, 69*, Article 1607068. https://doi.org/10.3389/ijph.2024.1607068

Bean, M. (2025, December 22). Nurse turnover rates by specialty. *Becker's Clinical Leadership*. https://www.beckershospitalreview.com/quality/nursing/nurse-turnover-rates-by-specialty/

Bragadóttir, H., Kalisch, B. J., Flygenring, B. G., & Tryggvadóttir, G. B. (2023). The relationship of nursing teamwork and job satisfaction in hospitals. *SAGE Open Nursing, 9*. https://doi.org/10.1177/23779608231175027

Brooks, S. K., & Greenberg, N. (2022). Mental health and psychological wellbeing of maritime personnel: A systematic review. *BMC Psychology, 10*(1), Article 139. https://doi.org/10.1186/s40359-022-00850-4

Carver, C. S. (1997). You want to measure coping but your protocol's too long: Consider the Brief COPE. *International Journal of Behavioral Medicine, 4*(1), 92–100. https://doi.org/10.1207/s15327558ijbm0401_6

Chaaya, R., Sfeir, M., Khoury, S. E., Malhab, S. B., & Khoury-Malhame, M. E. (2025). Adaptive versus maladaptive coping strategies: Insight from Lebanese young adults navigating multiple crises. *BMC Public Health, 25*(1), Article 1464. https://doi.org/10.1186/s12889-025-22608-4

Chen, Y. C., Wu, H. C., Ho, J. J., Cheng, N. Y., Guo, Y. L., & Shiao, J. S. (2025). Exploring the association between patient–nurse ratio and nurses' occupational stressors: A cross-sectional study. *Journal of Nursing Management, 2025*, Article 6160674. https://doi.org/10.1155/jonm/6160674

Dartey, A. F., Tackie, V., Worna Lotse, C., Dziwornu, E., Affrim, D., & Delanyo Akosua, D. R. (2023). Occupational stress and its effects on nurses at a health facility in Ho Municipality, Ghana. *SAGE Open Nursing, 9*. https://doi.org/10.1177/23779608231186044

Devi, B., Lepcha, N., & Basnet, S. (2023). Application of correlational research design in nursing and medical research. *Journal of Xi'an Shiyou University, Natural Science Edition, 65*(11), 60–69. https://www.researchgate.net/publication/368958213

Espinoza, E. R. B. (2025). Sailing on open waters: Experiences of cruise ship nurses. *Psychology and Education: A Multidisciplinary Journal, 41*(1), 71–90. https://www.researchgate.net/publication/392897797

Falguera, C. C., Labrague, L. J., Firmo, C. N., De los Santos, J. A. A., & Tsaras, K. (2023). Relationship of work engagement with nurse work and patient outcomes among nurses in Central Philippines. *Acta Medica Philippina, 57*(4), 24–31. https://doi.org/10.47895/amp.vi0.4426

Getie, A., Ayenew, T., Amlak, B. T., Gedfew, M., Edmealem, A., & Kebede, W. M. (2025). Global prevalence and contributing factors of nurse burnout: An umbrella review of systematic review and meta-analysis. *BMC Nursing, 24*(1), Article 596. https://doi.org/10.1186/s12912-025-03266-8

Ghani, B., Zada, M., Memon, K. R., Ullah, R., Khattak, A., Han, H., Ariza-Montes, A., & Araya-Castillo, L. (2022). Challenges and strategies for employee retention in the hospitality industry: A review. *Sustainability, 14*(5), Article 2885. https://doi.org/10.3390/su14052885

Giao, H. N. K., Vuong, B. N., & Tushar, H. (2020). The impact of social support on job-related behaviors through the mediating role of job stress and the moderating role of locus of control: Empirical evidence from the Vietnamese banking industry. *Cogent Business & Management, 7*(1), Article 1841359. https://doi.org/10.1080/23311975.2020.1841359

Hayes-Mejia, R., & Stafström, M. (2024). Wellbeing and happiness and their association with working conditions at sea: A cross-sectional study among the global workforce of seafarers. *INQUIRY: The Journal of Health Care Organization, Provision, and Financing, 61*. https://doi.org/10.1177/00469580241256349

Hilli, Y., Tast, A., Vaag, J. R., & Bölenius, K. (2025). The importance of collegial support and a caring workplace culture for newly qualified nurses in becoming confident during their transition: A multi-method study. *BMC Nursing, 24*(1). https://www.researchgate.net/publication/397875966

Hipos, A. M. G., & Benavides, N. G. (2023). Motivation, hygiene factors, and job satisfaction of elementary teachers in Irosin districts. *United International Journal for Research & Technology, 4*(5). https://uijrt.com/articles/v4/i5/UIJRTV4I50012.pdf

Hudays, A., Gary, F., Voss, J. G., Arishi, A., Alfar, Z. A., Algodimi, A. M., & Fitzpatrick, J. J. (2024). Factors influencing job satisfaction among mental health nurses: A systematic review. *Healthcare, 12*(20), Article 2040. https://doi.org/10.3390/healthcare12202040

Iwanowicz-Palus, G., Mróz, M., Kowalczuk, K., Szlendak, B., Bień, A., & Cybulski, M. (2022). Nurses coping with stressful situations—A cross-sectional study. *International Journal of Environmental Research and Public Health, 19*(17), Article 10924. https://doi.org/10.3390/ijerph191710924

J.P. Morgan. (2024, June 7). *Is the outlook for the cruise industry plain sailing?* https://www.jpmorgan.com/insights/global-research/travel/cruise-outlook

Jachmann, A., Loser, A., Mettler, A., Exadaktylos, A., Müller, M., & Klingberg, K. (2025). Burnout, depression, and stress in emergency department nurses and physicians and the impact on private and work life: A systematic review. *JACEP Open, 6*(2), Article 100046. https://www.sciencedirect.com/science/article/pii/S2688115225000049

Jackson, M. (2014). Evaluating the role of Hans Selye in the modern history of stress. In D. Cantor & E. Ramsden (Eds.), *Stress, shock, and adaptation in the twentieth century* (Chapter 1). University of Rochester Press. https://www.ncbi.nlm.nih.gov/books/NBK349158/

Jing, M. J., Li, H., Li, C. P., Wei, X. J., Lin, W. Q., Zhu, S. C., Xu, Y. L., & Li, L. M. (2023). The association between working hours with vigilance and executive function of intensive care unit nurses. *Journal of Nursing Management, 2023*, Article 3770404. https://doi.org/10.1155/2023/3770404

Joseph, H. B., & Ravindran, V. (2025). Workplace coping strategies among the nursing workforce: A cross-sectional study from an Indian perspective. *Cureus, 17*(10), Article e95812. https://doi.org/10.7759/cureus.95812

Khammissa, R. A. G., Nemutandani, S., Feller, G., Lemmer, J., & Feller, L. (2022). Burnout phenomenon: Neurophysiological factors, clinical features, and aspects of management. *Journal of International Medical Research, 50*(9). https://doi.org/10.1177/03000605221106428

Khatatbeh, H., Pakai, A., Al-Dwaikat, T., Onchonga, D., Amer, F., Prémusz, V., & Oláh, A. (2022). Nurses' burnout and quality of life: A systematic review and critical analysis of measures used. *Nursing Open, 9*(3), 1564–1574. https://doi.org/10.1002/nop2.936

Lau, Y.-y., Yip, T. L., & Kanrak, M. (2022). Fundamental shifts of cruise shipping in the post-COVID-19 era. *Sustainability, 14*(22), Article 14990. https://doi.org/10.3390/su142214990

Leszko, M., Iwański, R., & Jarzębińska, A. (2020). The relationship between personality traits and coping styles among first-time and recurrent prisoners in Poland. *Frontiers in Psychology, 10*, Article 2969. https://doi.org/10.3389/fpsyg.2019.02969

Levenstein, S., Prantera, C., Varvo, V., Scribano, M. L., Berto, E., Luzi, C., & Andreoli, A. (1993). Development of the Perceived Stress Questionnaire: A new tool for psychosomatic research. *Journal of Psychosomatic Research, 37*(1), 19–32. https://doi.org/10.1016/0022-3999(93)90120-5

Marcatto, F., Patriarca, E., Bramuzzo, D., Lucci, E., & Filon, F. L. (2024). Investigating the role of organizational stress in nurses' psychosomatic complaints: Evidence from a study in northeastern Italy. *AIMS Public Health, 11*(2), 420–431. https://doi.org/10.3934/publichealth.2024021

Mihanović, A., Kljajić, Z., & Luković, T. (2025). *Healthcare planning and control on cruise ships as a safety factor*. https://hrcak.srce.hr/file/491396

Montuori, P., Sorrentino, M., Sarnacchiaro, P., Di Duca, F., Nardo, A., Ferrante, B., D'Angelo, D., Di Sarno, S., Pennino, F., Masucci, A., Triassi, M., & Nardone, A. (2022). Job satisfaction: Knowledge, attitudes, and practices analysis in a well-educated population. *International Journal of Environmental Research and Public Health, 19*(21), Article 14214. https://doi.org/10.3390/ijerph192114214

Musio, M. E., Russo, M., Barbieri, M., Moro, A., Zanini, M., Sasso, L., Bagnasco, A., & Catania, G. (2025). Influencing factors of nurses' well-being in critical care during pandemic era: A systematic review. *Public Health Nursing, 42*(2), 996–1016. https://doi.org/10.1111/phn.13471

Nompo, R. S. (2024). The effectiveness of adaptive coping strategies for work stress: A meta-analysis. *Indonesian Journal of Medical Reviews, 4*(3), 634–644. https://www.researchgate.net/publication/382108719

Norful, A. A., Albloushi, M., Zhao, J., Gao, Y., Castro, J., Palaganas, E., Magsingit, N. S., Molo, J., Alenazy, B. A., & Rivera, R. (2024). Modifiable work stress factors and psychological health risk among nurses working within 13 countries. *Journal of Nursing Scholarship, 56*(5), 742–751. https://doi.org/10.1111/jnu.12994

Nuetzel, B. (2023). Coping strategies for handling stress and providing mental health in elite athletes: A systematic review. *Frontiers in Sports and Active Living, 5*, Article 1265783. https://doi.org/10.3389/fspor.2023.1265783

Okuhara, M., Sato, K., & Kodama, Y. (2021). The nurses' occupational stress components and outcomes: Findings from an integrative review. *Nursing Open, 8*(5), 2153–2174. https://doi.org/10.1002/nop2.780

Qiu, H., Jing, J., Ma, Z., Fu, Y., Liu, D., Zhang, H., Liu, J., & Chen, C. (2025). The relationship between organizational commitment, psychological capital, positive coping styles, and perceived professional benefit among new nurses: A longitudinal study. *BMC Nursing, 24*, Article 886. https://doi.org/10.1186/s12912-025-03524-9

Sels, L., Hoorelbeke, K., & Koster, E. H. W. (2025). *Rumination reconsidered: A dynamic interpersonal model* [Preprint]. ResearchGate. https://www.researchgate.net/publication/388870192

Shah, S., & Ayub, M. (2021). The impact of person–job fit, person–organization fit on job satisfaction. *Journal of Entrepreneurship Management and Innovation, 3*(1), 57–76. https://www.researchgate.net/publication/355424662

Spaan, P., van den Boogert, F., Bouman, Y. H. A., Hoogendijk, W. J. G., & Roza, S. J. (2024). How are you coping? Stress, coping, burnout, and aggression in forensic mental healthcare workers. *Frontiers in Psychology, 14*, Article 1301878. https://doi.org/10.3389/fpsyg.2023.1301878

Stanisławski, K. (2019). The Coping Circumplex Model: An integrative model of the structure of coping with stress. *Frontiers in Psychology, 10*, Article 694. https://doi.org/10.3389/fpsyg.2019.00694

Strukcinskiene, B., Razbadauskas, A., Grigoliene, R., Jeriomenkaite, A., Jurgaitis, J., Punys, V., Kontautiene, V., Beniusiene, A., Martisauskiene, D., Zuperkiene, E., Papadakaki, M., Zuperkaite, D., & Genowska, A. (2025). Occupational stressors and workplace challenges faced by seafarers in Lithuania: A cross-sectional study. *Healthcare, 13*(11), Article 1334. https://doi.org/10.3390/healthcare13111334

Susaeta, L., Suarez, E., & Babinger, F. (2024). Managing diversity in the cruise industry: Exploring practices and metrics. In *Diversity, equity, and inclusion (DEI) management*. https://www.researchgate.net/publication/383085833

Svetina, M., Perkovič, M., Yang, C., Gu, Y., Mindadze, A., Mikeltadze, N., Davitadze, L., & Gabedava, G. (2024). Factors impacting seafarers' mental health and career intentions. *INQUIRY: The Journal of Health Care Organization, Provision, and Financing, 61*. https://doi.org/10.1177/00469580241229617

Vallone, F., Cattaneo Della Volta, M. F., & Zurlo, M. C. (2024). Stress dimensions, patterns of coping, and psychopathological risk among nurses: A person-centred approach. *BMC Nursing, 23*, Article 569. https://doi.org/10.1186/s12912-024-02250-y

Van Mersbergen-de Bruin, M., Van Oostveen, C., & Weggelaar-Jansen, A. M. (2025). Nurses' challenges and strategies for safeguarding care quality and safety: A qualitative study on situated resilience. *International Journal of Nursing Studies Advances, 9*, Article 100365. https://doi.org/10.1016/j.ijnsa.2025.100365

Wynendaele, H., Clays, E., Peeters, E., DeJonghe, Y., Van Hecke, A., & Trybou, J. (2025). Understanding turnover in healthcare and welfare sectors of high-income countries: An umbrella review. *BMC Health Services Research, 25*(1), Article 806. https://doi.org/10.1186/s12913-025-12966-5

Xu, Y. W., & Fan, L. (2023). Emotional labor and job satisfaction among nurses: The mediating effect of nurse–patient relationship. *Frontiers in Psychology, 14*, Article 1094358. https://doi.org/10.3389/fpsyg.2023.1094358

Zhu, Y., Tang, W., Zhang, Y., Li, M., Zhu, W., & Zhang, Y. (2023). Job satisfaction and negative coping style affect the relationship between transition shock and intent to stay among newly graduated nurses during the COVID-19 pandemic. *Journal of Nursing Management, 2023*, Article 4286004. https://doi.org/10.1155/2023/4286004