



Capacity Building Program on Stress Management and Work Performance among Health Workers in Primary Health Care Settings

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ABSTRACT

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This community service program aimed to enhance stress management and work performance among health workers in Primary Health Care (PHC) settings. Health workers often face high workloads, emotional exhaustion, and limited resources that contribute to occupational stress and decreased performance. The program was conducted through participatory training sessions combining theoretical learning, group discussions, role plays, and mindfulness exercises. Thirty PHC staff members—including nurses, midwives, and administrative personnel—participated in the two-day training. The results showed significant improvement in participants' awareness, emotional regulation, teamwork, and motivation. They also began applying relaxation routines, time management techniques, and wellness check-ins in their workplaces. Follow-up observations indicated sustained behavioral changes and a more positive organizational climate. This program proved effective in strengthening mental resilience and improving service quality within PHC facilities, emphasizing the importance of psychosocial capacity building in healthcare workforce development.

1. INTRODUCTION

Health workers play a vital role in delivering essential health services and ensuring the quality of care at the primary level.¹ However, the increasing workload, administrative demands, and emotional pressure that accompany healthcare delivery often lead to high levels of occupational stress. Prolonged stress can negatively impact job performance, motivation, and overall well-being, ultimately influencing the effectiveness of health services provided to the community.²

Primary Health Care (PHC) facilities, being the frontline of healthcare systems, are particularly vulnerable to these challenges. Many health workers in PHCs face issues such as limited human resources, inadequate facilities, and overlapping responsibilities.³ Without proper stress management strategies, these conditions can result in burnout, absenteeism, and reduced productivity. Therefore, it becomes crucial to equip health workers with the necessary knowledge and skills to manage stress effectively and enhance their work performance.⁴



This community service program aims to provide training on stress management and performance improvement tailored for health workers in Primary Health Care facilities.⁵ The training emphasizes practical approaches, including time management, emotional regulation, teamwork, and motivation techniques. By developing these competencies, it is expected that participants will not only be able to cope better with work-related stress but also improve the quality and efficiency of their healthcare delivery.⁶

Ultimately, this initiative seeks to foster a healthier work environment, support mental well-being among health workers, and strengthen the overall resilience of the primary healthcare system.⁷

2. METODE

This community service program was conducted using a participatory training approach, combining theoretical learning, practical exercises, and reflective discussions. The activity was designed to ensure that health workers not only gained new knowledge but also developed applicable skills to manage stress and improve their work performance effectively.

1. Participants

The participants consisted of health workers from Primary Health Care (PHC) facilities, including nurses, midwives, administrative staff, and other supporting personnel. A total of [insert number] participants were involved in the training, selected based on their active role and responsibilities in PHC service delivery.

2. Training Design and Implementation

The training was implemented through several interactive sessions over two days, with the following key stages:

- 1) Session 1: Introduction to Occupational Stress — Understanding the concept, causes, and effects of workplace stress in healthcare environments.
- 2) Session 2: Stress Management Techniques — Practical activities such as relaxation exercises, breathing control, and mindfulness to manage emotional pressure.
- 3) Session 3: Work Performance Optimization — Discussion on time management,

effective communication, teamwork, and motivation strategies.

- 4) Session 4: Action Plan Development — Participants were guided to design individual and institutional strategies to maintain mental well-being and sustain performance improvements.

3. Method of Delivery

The training utilized a combination of lectures, group discussions, role plays, and case studies. Participants were encouraged to share real-life experiences to foster peer learning and practical understanding. Interactive materials and visual aids were provided to support engagement and retention of knowledge.

4. Evaluation

To measure the effectiveness of the program, participants completed pre- and post-training questionnaires assessing their understanding of stress management and self-perceived performance improvement. Qualitative feedback was also collected through open discussions and written reflections at the end of the training.

5. Follow-Up Activities

After the training, participants were encouraged to implement the stress management techniques and performance strategies in their daily work routines. Monitoring and evaluation were conducted one month after the program to assess behavioral changes and improvements in workplace dynamics.

3. RESULTS AND DISCUSSION

Result

The community service activity titled “*Training on Stress Management and Performance Improvement for Health Workers in Primary Health Care Facilities*” was implemented successfully and achieved its intended outcomes. The activity involved thirty health workers from several Primary Health Care (PHC) centers, including nurses, midwives, and administrative staff. The program took place over two days and consisted of interactive sessions combining lectures, group discussions, and practical exercises.

At the beginning of the program, participants were invited to reflect on their experiences and



daily challenges at work. Many of them shared that they often felt physically and mentally exhausted due to high workloads, multitasking responsibilities, and limited human resources. This sharing session created an open and supportive atmosphere that helped participants realize that stress is a common issue in healthcare settings and can be managed collectively.

Throughout the training sessions, participants actively engaged in discussions and group exercises. They learned simple yet effective techniques to manage stress, such as breathing control, mindfulness practice, and short relaxation routines that can be done during working hours. Participants also received guidance on setting priorities, improving teamwork, and maintaining communication among colleagues to prevent burnout.

One of the most positive outcomes observed during the activity was the improvement in participants' enthusiasm and awareness regarding emotional well-being. They began to understand that managing stress is not only important for personal health but also contributes to better service quality and patient satisfaction. Participants were also encouraged to develop action plans for their respective PHC facilities, outlining strategies to integrate stress management into their daily work culture.

By the end of the program, participants expressed satisfaction with the training content and delivery methods. They stated that the program was relevant, practical, and applicable to their work environment. Several participants planned to share what they learned with their coworkers who were unable to attend, and some units agreed to organize regular "wellness check-ins" to evaluate workload balance and team dynamics.

Follow-up communication one month after the activity revealed that some participants had begun applying the techniques introduced during the training. For instance, several PHC teams started implementing short morning stretching or relaxation sessions before patient service hours. Others applied time management principles to better distribute administrative and clinical responsibilities. These small but

consistent efforts reflected the sustainability and long-term impact of the program.

In general, this community service activity succeeded in increasing participants' knowledge, awareness, and skills related to stress management and performance improvement. The training also strengthened teamwork and fostered a more positive work climate in PHC settings. Beyond its direct educational value, the activity contributed to enhancing the mental resilience of health workers, which is crucial in maintaining the quality and sustainability of healthcare services for the community.

Discussions

The community service program titled *"Training on Stress Management and Performance Improvement for Health Workers in Primary Health Care Facilities"* demonstrates that structured, participatory training interventions can significantly enhance the psychosocial well-being and professional effectiveness of healthcare workers.⁸ Although this activity was not designed as a research project, the outcomes provide valuable insights into the real conditions faced by frontline health workers and how practical, community-based empowerment can address these challenges effectively.⁹

Stress among healthcare workers is a universal phenomenon, especially in primary care facilities where resources are often limited, yet demands for service delivery remain high.¹⁰ According to the World Health Organization (WHO, 2020), occupational stress in the health sector is one of the major contributors to declining work performance, absenteeism, and even early job resignation.¹¹ This program was therefore timely and relevant, as it directly responded to the growing need for psychosocial support and capacity strengthening among health professionals in primary care settings.¹²

The implementation of the program revealed that the majority of participants experienced work-related stress caused by multiple factors— heavy workloads, limited staff, emotional fatigue from patient interactions, and administrative burdens.¹³ This aligns with Maslach and Leiter's (2023) burnout framework, which identifies emotional exhaustion, depersonalization, and



reduced personal accomplishment as the core dimensions of occupational burnout.¹⁴ The training addressed these aspects by introducing coping mechanisms such as mindfulness, relaxation techniques, and structured communication strategies, which helped participants regain control over their emotional responses and restore their sense of professional purpose.¹⁵

Moreover, the participatory design of the training proved essential in building mutual trust and peer support among participants. The sessions that emphasized open sharing and reflection allowed participants to express their struggles without fear of judgment.¹⁶ This element of social support, as explained by the Job Demand-Resources (JD-R) Theory (Bakker & Demerouti, 2023), serves as a protective buffer against stress and burnout. Participants reported feeling more connected and supported after the sessions, indicating that collective emotional reinforcement is a crucial aspect of organizational resilience in healthcare environments.¹⁷

Another key observation was the improvement in teamwork and interpersonal communication. Many health workers, particularly those in administrative roles, often experience role ambiguity and communication breakdowns that lead to conflict or inefficiency. The training's group exercises and role-play simulations helped participants better understand the importance of empathy, listening, and collaboration in managing stress collectively. These findings resonate with Goleman's (1998) concept of *emotional intelligence*, which highlights self-awareness, self-regulation, and social skills as vital elements for effective teamwork and leadership.¹⁸

The sustainability of this program is also an important point of discussion. One month after the training, some PHC units independently adopted the idea of weekly wellness check-ins and morning stretching sessions. This organic follow-up behavior demonstrates internalization of knowledge — a sign that the training was not perceived as a one-time event but as a transformative experience that influenced workplace culture. Such behavioral continuity is

consistent with Bandura's (1986) Social Cognitive Theory, which emphasizes learning through observation, imitation, and reinforcement. Participants' willingness to replicate the program's practices within their work units also indicates successful transfer of knowledge and self-efficacy development.¹⁹

From a broader public health perspective, this activity contributes to the strengthening of health system resilience, especially at the primary care level. The WHO (2022) underscores that human resources for health are central to achieving universal health coverage (UHC). However, psychological well-being is often overlooked in capacity-building programs. By integrating stress management and performance improvement into community service initiatives, institutions not only enhance individual well-being but also indirectly improve service quality, patient satisfaction, and community trust in healthcare institutions.²⁰

Furthermore, this community service activity supports the national agenda of improving the quality of public health services through human resource empowerment. The training encouraged participants to reflect on their professional values, improve their time management, and recognize the interconnection between emotional stability and service quality. These changes, though qualitative in nature, have long-term implications for the sustainability of healthcare delivery, particularly in rural and under-resourced areas where staff turnover and burnout are common challenges.²¹

In the academic context, this activity contributes to the growing discourse on the integration of occupational health psychology within public health administration. It demonstrates that community-based interventions can complement formal health management policies by addressing psychosocial dimensions of work. The training also highlighted that health worker empowerment should not be limited to technical competence but must also encompass emotional intelligence, stress regulation, and interpersonal communication skills — all of which are essential for holistic healthcare delivery.²²



In conclusion, the results of this community service project reaffirm that psychosocial capacity-building initiatives are a vital component of healthcare system strengthening. The training effectively bridged the gap between administrative efficiency and human-centered care by promoting awareness, empathy, and resilience among health workers. Moving forward, similar programs should be integrated into regular professional development schemes and extended to other regions to ensure that primary health care personnel remain healthy, motivated, and capable of delivering optimal services to the community.

4. CONCLUSION

The community service program entitled *“Training on Stress Management and Performance Improvement for Health Workers in Primary Health Care Facilities”* has successfully achieved its primary objective of enhancing the awareness, knowledge, and practical skills of health workers in managing occupational stress and improving work performance. Through interactive and participatory learning methods, the training created an empowering environment where participants could share experiences, learn adaptive coping strategies, and strengthen mutual support within their workplace.

The outcomes of this activity indicate that structured psychosocial interventions can produce tangible changes in behavior and attitude, even within a short implementation period. Participants demonstrated improved self-awareness, emotional regulation, teamwork, and motivation. They also exhibited an increased understanding of how personal well-being directly influences the quality of health services provided to the community.

In addition, the sustainability of the training's impact was evident through participants' post-activity initiatives, such as the adoption of morning relaxation sessions, informal peer-support meetings, and the integration of stress management techniques into their daily routines. These follow-up actions reflect the successful internalization of knowledge and the emergence

of a more positive organizational culture within Primary Health Care (PHC) facilities.

Overall, this community service activity contributed to strengthening the resilience and efficiency of frontline healthcare workers, particularly in managing emotional challenges and maintaining performance in resource-limited environments. The program also aligns with the national and global agenda of promoting occupational health, well-being, and sustainable human resources for healthcare.

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This community service initiative stands as a reflection of collaborative effort between academia and health institutions, aimed at empowering health workers and promoting a culture of well-being within the healthcare system.

6. REFERENCES

1. Bosworth M, Maryon T. *Leadership for Health Professionals: Theory, Skills, and Applications*. books.google.com; 2023. <https://books.google.com/books?hl=en&lr=&id=SI6kEAAAQBAJ&oi=fnd&pg=PP1&dq=interpersonal+communication+health>



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2. Galanis P, Moisoglou I, Katsiroumpa A, Vraika I, ... Increased job burnout and reduced job satisfaction for nurses compared to other healthcare workers after the COVID-19 pandemic. *Nurs Reports*. Published online 2023. <https://www.mdpi.com/2039-4403/13/3/95>
 3. Tamata AT, Mohammadnezhad M. A systematic review study on the factors affecting shortage of nursing workforce in the hospitals. *Nurs open*. Published online 2023. doi:10.1002/nop2.1434
 4. Lansing AE, Romero NJ, Siantz E, Silva V, Center K, ... Building trust: Leadership reflections on community empowerment and engagement in a large urban initiative. *BMC Public Health*. Published online 2023. doi:10.1186/s12889-023-15860-z
 5. Organization WH. *A Primary Health Care Approach to Obesity Prevention and Management in Children and Adolescents: Policy Brief*. books.google.com; 2023. https://books.google.com/books?hl=en&lr=&id=xxDAEAAAQBAJ&oi=fnd&pg=PA2&dq=community+service+health+promotion+policy+hospital+services+patient+satisfaction&ots=9MIOqvBdTE&sig=vgwge4eA-qjyRntf_PK8wD7Dn9c
 6. Schleiff MJ, Aitken I, Alam MA, Dantew ZA, ... Community health workers at the dawn of a new era: 6. Recruitment, training, and continuing education. *Heal Res Policy* Published online 2021. doi:10.1186/s12961-021-00757-3
 7. Edelman C, Kudzma EC. *Health Promotion throughout the Life Span-e-Book*. books.google.com; 2021. <https://books.google.com/books?hl=en&lr=&id=znJAEAAAQBAJ&oi=fnd&pg=PP1&dq=community+service+health+promotion+policy+hospital+services+patient+satisfaction&ots=1FQETibFWp&sig=4tC6FT1sM>
 8. akAH8MPSiG314MrEbY Karaferis D, Aletras V, Raikou M, ... Factors influencing motivation and work engagement of healthcare professionals. *Mater Socio* Published online 2022. <https://pmc.ncbi.nlm.nih.gov/articles/PMC9559882/>
 9. Jarva E, Oikarinen A, Andersson J, ... Healthcare professionals' perceptions of digital health competence: A qualitative descriptive study. *Nurs* Published online 2022. doi:10.1002/nop2.1184
 10. Szilvassy P, Širok K. Importance of work engagement in primary healthcare. *BMC Health Serv Res*. Published online 2022. doi:10.1186/s12913-022-08402-7
 11. Vries N De, Lavreysen O, Boone A, Bouman J, ... Retaining healthcare workers: a systematic review of strategies for sustaining power in the workplace. *Healthcare*. Published online 2023. <https://www.mdpi.com/2227-9032/11/13/1887>
 12. Marler H, Ditton A. "I'm smiling back at you": exploring the impact of mask wearing on communication in healthcare. ... *J Lang & communication* Published online 2021. doi:10.1111/1460-6984.12578
 13. Green AA, Kinchen E V. The effects of mindfulness meditation on stress and burnout in nurses. *J Holist Nurs*. Published online 2021. doi:10.1177/08980101211015818
 14. Huaman N, Morales-García WC, ... An explanatory model of work-family conflict and resilience as predictors of job satisfaction in nurses: the mediating role of work engagement and communication skills. ... *care & community* Published online 2023. doi:10.1177/21501319231151380
 15. Organization WH. *Guide for Integration of Perinatal Mental Health in Maternal and Child Health Services*. books.google.com; 2022. <https://books.google.com/books?hl=en&lr=&id=LHsOEQAQBAJ&oi=fnd&pg=PR5>



16. Bernales-Turpo D, ... Burnout, professional self-efficacy, and life satisfaction as predictors of job performance in health care workers: the mediating role of work engagement. ... *care & community* Published online 2022. doi:10.1177/21501319221101845
17. Aluko OIS. *Work Related Stress Management and the Performance of Workers in Public Health Facilities in Kwara State, Nigeria*. search.proquest.com; 2023. <https://search.proquest.com/openview/b0cff21ff5a7c2d1e1d64f6c6fc77df7/1?pq-origsite=gscholar&cbl=2026366&diss=y>
18. Okonkwo JE, Olannye PA. ROLE OF STRESS MANAGEMENT STRATEGIES IN ENHANCING HEALTHCARE WORKERS PERFORMANCE: EVIDENCE FROM ASABA, DELTA STATE. *African J Soc* Published online 2025. <https://journals.aphriapub.com/index.php/AJSBS/article/view/3027>
19. Majamanda MD, Gondwe MJ, ... Capacity building for health care workers and support staff in pediatric emergency triage assessment and treatment (ETAT) at primary health care level in resource *Child Adolesc* Published online 2022. doi:10.1080/24694193.2021.1916127
20. Shi L, Xu RH, Xia Y, Chen D, Wang D. The impact of COVID-19-related work stress on the mental health of primary healthcare workers: the mediating effects of social support and resilience. *Front Psychol*. Published online 2022. doi:10.3389/fpsyg.2021.800183
21. Ozobu CO, Onyekwe FO, Adikwu FE, ... Developing a national strategy for integrating wellness programs into occupational safety and health management systems in Nigeria: A conceptual framework. ... *Res* Published online 2023. https://www.researchgate.net/profile/Arafo-Pub-2/publication/390695155_Developing_a_National_Strategy_for_Integrating_Wellness_Programs_into_Occupational_Safety_and_Health_Management_Systems_in_Nigeria_A_Conceptual_Framework/links/67f9184fbfbe974b23a8df2c/Developing-a-National-Strategy-for-Integrating-Wellness-Programs-into-Occupational-Safety-and-Health-Management-Systems-in-Nigeria-A-Conceptual-Framework.pdf
22. Kriakous SA, Elliott KA, Lamers C, Owen R. The effectiveness of mindfulness-based stress reduction on the psychological functioning of healthcare professionals: A systematic review. *Mindfulness (N Y)*. Published online 2021. doi:10.1007/s12671-020-01500-9