

A Study of Professional Job Stress Among the Health Care Workers During the Emergency Period

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Abstract

Stress at work has been linked to health problems and accidents at work. Due to their particular work environment, health care workers make up a significant group of people who are impacted by emotional states and stress. The key determinants of the caliber of work and individual productivity are the employee's level of stress and job satisfaction. To evaluate medical professionals' job happiness, stress from their jobs, and psychological morbidity among physicians, surgeons and community pharmacists and provide a comparison with general practitioners. Occupational stress may harm one's health and lower productivity and efficiency. Due to a variety of issues, providing healthcare in rural locations is a taxing endeavor for healthcare professionals. They become less motivated and feel job stress due to a variety of circumstances, including inadequate staffing of personnel that results in overburdened workloads. According to the study's findings, patient care is significantly impacted by stress, exhaustion, burnout, depression, and overall psychological discomfort.

Keywords: Stress, Health-care workers, Professionals, Job stress, Stressors

I. INTRODUCTION

Stress is any situation or activity that puts an individual under unusual psychological or physical strain and threatens to upset their sense of equilibrium. Unfavorable outcomes and negative attitudes about one's work, family, and eventually oneself are inexorably brought on by decreased job satisfaction. Stress has become a widespread problem in the healthcare sector, as it contributes to health-related problems that lower efficiency and production. There are several sources of stress for healthcare workers. Workplace conflict, gender discrimination, marital

status, level of education, job satisfaction, and lack of recognition were some of the factors that were strongly associated with job stress among all of those healthcare workers. Other significant factors included work overload and the work environment. Stress may aggravate heart disease, elevate blood pressure, lower immunity, encourage drug abuse, cause impatience and irritability, and overall harm mental and physical health. It can also reduce happiness. In order to cope with their stress, workers who are under a lot of pressure may turn to drugs or alcohol. Life and work both certainly involve stress.

There are numerous potential sources of stress in every job, some of which are shared by both men and women and others of which are unique to each group. The term "occupational stress" is used to describe the wear and tear on the body, mind, and emotions as a result of a mismatch between job demands and an individual's abilities, resources, and needs to meet those demands. Workplace stress is a significant factor in poor physical and mental health, substance addiction, and tardiness, absenteeism, and emigration rates. Obtaining universal health coverage (UHC) without facing financial hardship, according to the World Health Organization, depends on receiving quality basic healthcare (WHO). In order to do this, the physical and mental well-being of healthcare workers providers must be protected. For monitoring burnout in healthcare workers, the Maslach Burnout Inventory (MBI) continues to be the standard. To prevent a health care worker from experiencing unmanageable levels of stress that are beyond their capacity to cope, it is vital to offer early therapies that are culturally and organizationally appropriate. Age, gender, marital status, and professional stress were found to be related among hospital-employed medical personnel in the present study.

II.LITERATURE REVIEW

Reddy and Ramamurthy (1991) examined how age affects how stressed out a person feels. In the sample, 200 executives were included. The findings showed that executives between the ages of 41 and 50 were more stressed than those between the ages of 51 and 60. The age of the executive and the number of years of employment are

moderating factors among executives who experience stress.

Sahu and Mishra (1995) made an effort to investigate gender differences in the relationship between stresses experienced in different spheres of life. 120 male teachers and 120 female teachers made up the study's sample. The findings showed that stress related to the workplace and stress related to society are significantly positively correlated in males. The relationship between family stress and stress related to society was, however, significantly positive in females.

According to Boran and Khader (2011) general practitioners, dentists, and pharmacists were significantly more stressed than medical specialists. The job title, being a woman, and long hours worked were all related to reported stress. Heavy workloads and uncooperative patients were other major issues. The most common health issues were feeling irritable, having headaches, and having a cold.

Vijaya Nirmala and Suresh Babu (2013), the health care professionals with the age of greater than 41 years feel high level of job stress when compared to other age groups. The male professionals feel high job stress levels when compared to female professionals. Also, the married health care professionals feel high level of job stress when compared with unmarried professionals. The married male professionals with the age of greater than 41 years feel high level of job stress when compared with other professionals.

Spoorthy Sagar (2017) ended with the main sources of stress have historically been associated with the workplace. Since increased stress levels may impair workers'

performance, this issue must be addressed. Arvind Kushal and Shakti K Ghupta (2019) conducted a systematic review. When employees and employers work together and develop a mutual understanding of one another's needs, an effective stress-free environment is possible in any organisation. Each of them must therefore contribute in some way to foster an environment that is peaceful, joyful, and conducive to good health.

Dr.N.Subburaj (2022) Stress is a state of mental pressure for a specific person experiencing issues with their social and environmental well-being, which can result in a variety of illnesses. A young person's life is going through a lot of changes, so this is a crucial time. They are supposed to be the social elite.

III. AIMS AND OBJECTIVES OF THE STUDY

AIM

The study's primary goal is to measure health care workers' stress levels and evaluate how it relates to their jobs, health, and related variables.

OBJECTIVES

- To know about the stress management practices of health care workers.
- To investigate the connection between stress at work and health.
- To examine the connection between years of work experience and workplace stress.
- To analyse the marital status affects stress levels.
- To determine the age groups most vulnerable to work stress.

- To assess the work life balance of the health care professionals during the emergency period.

IV. MATERIALS AND METHODS

Research Environment

Researcher have conducted an anonymous survey of healthcare professionals working in various departments and in hospital administration using the validated questionnaire. A total of 400 participants, including healthcare professionals, participated in the study.

Research Design

The study used two questionnaire-based techniques and was an analytical questionnaire study. The first questionnaire was meant to gauge workplace stress, and the second to evaluate overall wellness. To statistically analyse the responses, the Statistical Package for the Social Sciences, which was used for both data analysis and tabular display, was used. Descriptive statistical analysis was applied to quantitative variables. Analytical metrics included the Mann-Whitney test and Spearman correlation coefficient. The study's significance level was set at $p < 0.05$.

Research Questionnaire

400 participants were given the questionnaire-based study tools, which were used in the investigation. The questions that can be rated on a scale of 1/2/3/4 (Strongly agree = 4). Disagree = 1, Disagree = 2, Agree = 3, and The scores were interpreted

as, commonly experienced stress symptoms have effect on individuals' health.

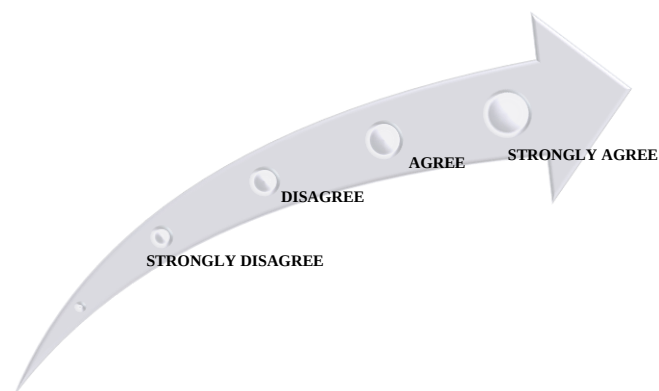


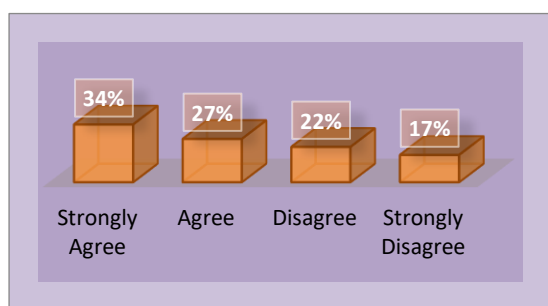
Fig1. Questionnaire

Response Rate

There were 400 participants who received the questionnaire, and 373 of them answered it. Respondents included medical staff from the hospitals clinical, administrative, emergency, and pharmacy areas. The appropriateness of the study design and the interest in the subject among the healthcare professionals are likely to be reflected in the satisfactory response rate.

V. OBSERVATION AND DISCUSSION

Work Related Stress



Out of the 373 research respondents, 125 firmly agreed that 34% of them had significant levels of work-related stress and needed intensive stress management. 102 out of 373 respondents agree that 27% of them experience moderate work-related stress and require some help managing their stress. 82 out of 373 people disagree that 22% experience modest levels of work-related stress and require minimal help managing their stress. 64 out of 373 strongly disagree, with 17% having extremely little work-related stress and needing very low levels of stress management (Graph 1).

Table 1: Work stress

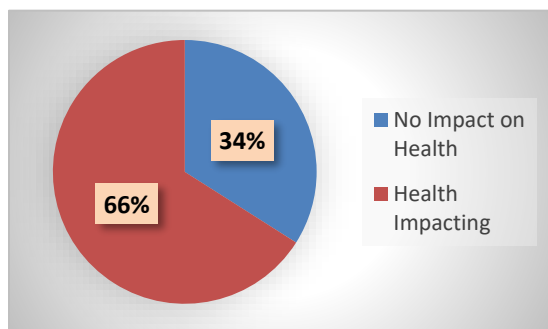
Strongly Agree (n=125)	34%
Agree (n=102)	27%
Disagree (n=82)	22%
Strongly Disagree (n=64)	17%

Graph 1: Work Related Stress

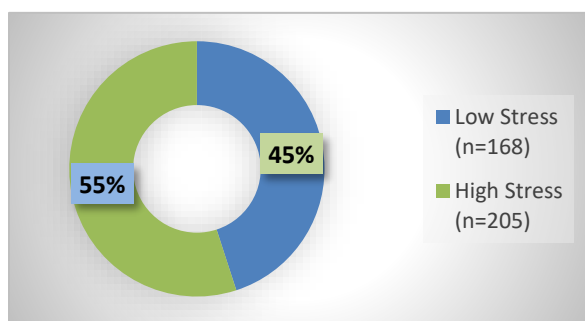
Health Status

34% of the study population (127) had good health status, while 66% (246) of the

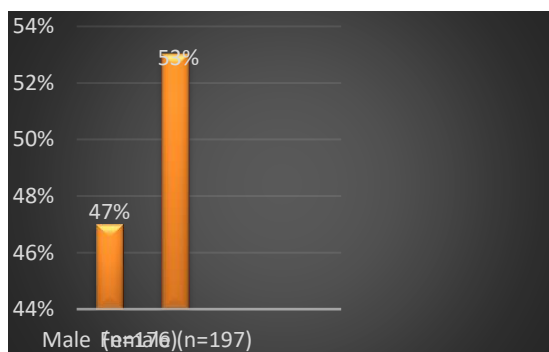
population displayed stress-related symptoms (Table 2 and Graph 2).

**Graph 2: Health Status****Impact of Stress on Health**

Only 45% of the population (168) that effectively managed work stress displayed

**Graph 3: Impact of Stress on Health****Gender and Stress Management**

47% of the male population (n = 176)

**Table 2: Health Status**

Health Impacting	66%
No Impact on Health	34%

symptoms, compared to 55% of the population (205), who did not effectively manage stress.

This demonstrates that better stress management reduces the likelihood of experiencing stress-related health symptoms. This outcome is statistically significant, and there is a 10% difference between the two populations (Table 3 and Graph 3).

Table 3: Impact of Stress on Health

Low Stress (n=168)	45%
High Stress (n=205)	55%

had stress. 53% of females (n = 197) reported stress (Table 4 and Graph 4). Female have marginally more stress (6%) than male respondents.

Table 4: Gender and Stress Management

Male (n=176)	47%
Female (n=197)	53%

Graph 4: Gender and Stress Management

Marital Status and stress

72% of married people (n = 268) reported having stress. Stress was present in 28% of the unmarried (n = 105) population. Married people experience slightly more stress (44%) than single people do (Table 5 & Graph 5).

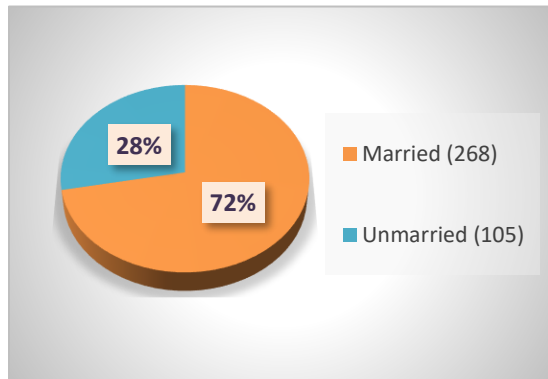


Table 5: Marital Status and Stress

Unmarried(n=105)	28%
Married (n=268)	72%

Graph 5: Marital Status and Stress

Job Profile and Stress

To compare the correlation between stress in healthcare workers and other professionals, the sample size category was excluded from the total population (n = 373). A total of 373 working professionals from all categories were included in the sample. 105 out of 373 health care professionals worked in the clinical area, and 28% of them displayed signs of stress; 64 out of 373 were in the administrative area, and 17% of them

displayed signs of stress; 31% of the 117 emergency room healthcare workers out of 373 displayed signs of stress; 87 of the 373 healthcare professionals in the Pharmacy area displayed stress, or 23% of them; This demonstrates that the level of stress among emergency medical personnel was slightly higher than that of other health care workers. The outcome was not statistically significant (Table 6 and Graph 6). The Chi Square test has a minimum expected count of 10.98. Tables 6.1 and 6.2 are provided.

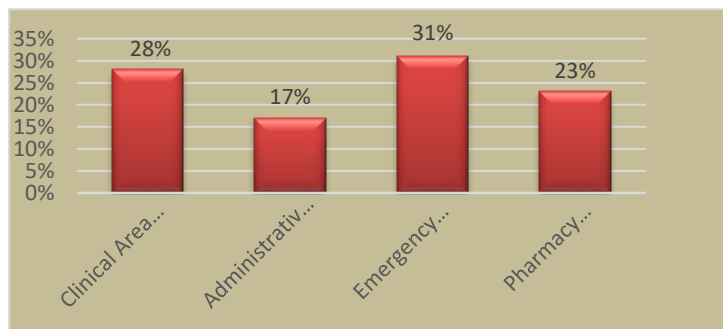


Table 6: Job Profile and Stress

Clinical area (n=105)	28%
Administrative area (n=64)	17%
Emergency area (n=117)	31%
Pharmacy area (n=87)	23%

Graph 6: Job Profile and Stress

Table 6.1 Job Profile * Work Related Stress Cross tabulation

			Work Related Stress				Total
			Strongly Agree	Agree	Disagree	Strongly Disagree	
Job Profile	Clinical area	Count	18	22	51	14	105
		Expected Count	35.2	28.7	23.1	18.0	105.0
	Administrative area	Count	35	14	9	6	64
		Expected Count	21.4	17.5	14.1	11.0	64.0
	Pharmacy Area	Count	28	29	12	18	87
		Expected Count	29.2	23.8	19.1	14.9	87.0
	Emergency Area	Count	44	37	10	26	117
		Expected Count	39.2	32.0	25.7	20.1	117.0
	Total	Count	125	102	82	64	373
		Expected Count	125.0	102.0	82.0	64.0	373.0

Table 6.2 Chi-Square Tests

	Value	df	Asymp. Sig. (2-sided)
Pearson Chi-Square	75.173 ^a	9	.000
Likelihood Ratio	70.905	9	.000
Linear-by-Linear Association	4.609	1	.032
N of Valid Cases	373		

a. 0 cells (.0%) have expected count less than 5. The minimum expected count is 10.98.

Work Experience and Stress

The sample population was divided into three groups:

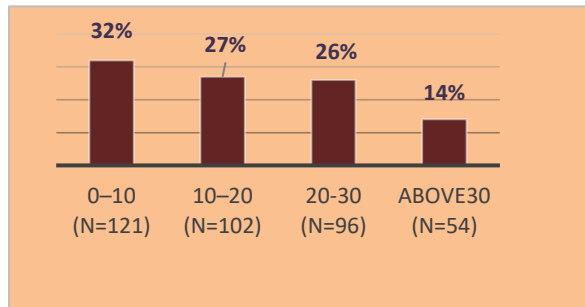
1. 32% of the population who have 0 to 10 years of work experience are stressed.

2. Stress affects 27% of people with 10 to 20 years of work experience.

3. People with 20 to 30 years of work experience: Stress affects 27% of the population.

4. 14% of people with more than 30 years of work experience who are stressed out.

It has been highlighted that as years of experience increase, stress management abilities advance and a person is able to handle stress better. This may not indicate



that stress decreases with years of employment, but rather just demonstrates a person's more mature approach to stress management (Table 7 and Graph 7). The 0.01 threshold of significance for correlation (2-tailed) correlated positively from Table 7.1.

Table 7: Work Experience and Stress

0-10 (n=121)	32%
10-20 (n=102)	27%
20-30 (n=96)	26%
Above 30 (n=54)	14%

Graph 7: Work Experience and Stress

Table 7.1 Correlations

		Work Related Stress	Experience
Work Related Stress	Pearson Correlation	1	.980**
	Sig. (2-tailed)		.000
	N	373	373
Experience	Pearson Correlation	.980**	1
	Sig. (2-tailed)	.000	
	N	373	373

**. Correlation is significant at the 0.01 level (2-tailed). Positive correlated

VI. FINDINGS

- 34% of them had significant levels of work-related stress and needed intensive stress management.
- 66% showed a stress associated symptom in their health status of the health workers.
- 55% showed symptoms and demonstrates that better stress management reduces the likelihood of

experiencing stress-related health symptoms.

- 53% of the female population had stress than male.
- 72% of the married people had stress and marginally higher stress than unmarried people.
- 31% of these health care workers showed stress and the minimum expected count is 10.98 in Chi Square test.

- 27% of population having 20 to 30 years of work experience that demonstrates a person's more mature approach to stress management. The 0.01 threshold of significance for correlation (2-tailed) correlated positively

VII. DISCUSSION

The majority of their time is spent in the field treating patients at their homes, making healthcare workers a crucial part of the rural health system. Stress may be caused by enrolling individuals in additional health programmes on top of those already in place, managing several responsibilities, combating a staffing shortage, and other problems. Investigating this is the purpose of the current study.

It's crucial to highlight that the majority of participants displayed one or more physical or psychological symptoms of stress, with gastrointestinal issues and sleep problems coming in second and third, respectively. Participants in the study reported psychological symptoms that were closely related to high stress levels. However, outside of stress, the study we conducted did not look at other potential causes for the symptoms. The same results were reached by additional research studies carried out by experts. In this investigation, workplace stressors were largely identified. It was found that the healthcare workers were overworked in the field and had difficulty getting to areas where the population they were responsible for was situated. Many others said that they were unable to finish the assignment by the due date.

The research participants had encouraging families who pushed them to

work, despite little attention being devoted to personal information. The majority agreed that they could discuss their worries with their family, proving that families serve as a shock absorber for people. The outcome may have been a lack of interest in and displeasure with the work. The outcome may have been a lack of interest in and displeasure with the work. However, the study found that interactions between superiors and subordinates are often constructive.

VIII. CONCLUSION

According to the study, there is a link between job stress and poor health. In turn, poor health lowers human productivity due to distraction, lack of concentration, absenteeism, and other related issues. Because higher levels of stress may have an impact on employees' performance, the workplace has historically been one of the main sources of stress. There were no discernible changes in stress levels across various levels of medical practitioners and administrative staff. Everyone who works in the healthcare sector is stressed. Stressed-out medical professionals may provide care that is less effective or of worse quality.

Any workplace may encourage a stress-free, productive environment if the employers and employees collaborate to understand one another's needs. Therefore, it is essential that each and every one of them make a contribution in some manner to promote a tranquil, happy, and healthy atmosphere.

IX. RECOMMENDATIONS

Stress screening ought to be included in induction and training programmes. People should undergo evaluations and receive counselling regarding stress management techniques. The government should take action

to regularly fill open positions. Additionally, there should be ongoing instruction and support for using technology. The healthcare professionals should be encouraged by the higher authorities. In order to keep employees motivated at work, the health system should also make sure that they receive thanks, recognition, and awards for their efforts.

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