JOB STRESS AND JOB SATISFACTION AS CORRELATES OF COVID-19 FEAR- A STUDY ON FRONTLINE HEALTHCARE WORKERS IN TERTIARY CARE HOSPITAL

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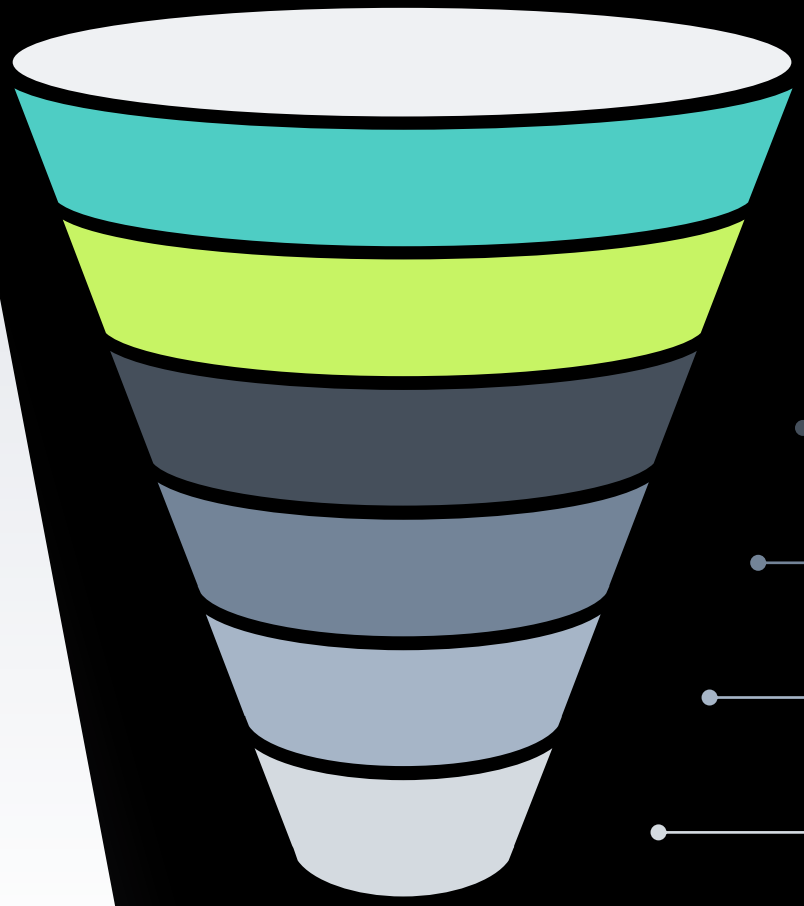
PRESENTATION OUTLINE



Terms to Know

Introduction

Research Question

Objective

Materials & Methodology

Analysis,Discussion And Conclusion

TERMS TO KNOW – WHAT IS ?

(Key Variables Of The Study)

Covid-19 Fear

It can be defined as an excessive triggered response of fear of contracting the virus causing COVID-19, leading to accompanied excessive concern over physiological symptoms, significant stress about personal and occupational loss, increased reassurance and safety seeking behaviors, and avoidance of public places and situations, causing marked impairment in daily life functioning.

Job Stress

The job stress can be defined as a prolonged state of high emotional instability and emotional drainage with stressors and demands that are difficult to cope with daily life.

Job Satisfaction

It can be defined as a subjective evaluation of the present nature of work.

INTRODUCTION

- The emergence of COVID-19 has significantly impacted the mental well-being of frontline health care workers.
- While healthcare workers remain committed to this role, the unprecedented pressure exerted by the pandemic on every country's health care system has presented various challenges to healthcare workers (e.g. increased patient volume, increased patient load, COVID-19 protocols) that could affect their well-being and Job performance.
- Much worse, these people are risking their lives in order to carry out their duties, causing intense fear of being infected or unknowingly infecting others.
- Evidence have shown a significant association between the COVID-19 outbreak and adverse mental health issues such as stress, burnout, depression and anxiety(Nemati et al, 2020) [1].

RATIONALE

- The first wave and second wave emergence of covid-19 has caused significant amount of influence on emotional and mental status of frontline healthcare workers, including doctors, nurses, pharmacy staff and others.
- The awareness of job stress, anxiety and influence on the job is predicted to be increasing day by day during this pandemic.
- The lockdown period in India has also aggravated the situation.
- Frontline healthcare workers who are in direct contact with Covid-19 patients and work along with them, routinely encounter patients experience of suffering and deaths, influencing their mental status and emotional wellbeing and leading to empathy exhaustion.
- Subsequently, supporting the frontline healthcare workers during the COVID-19 pandemic is of fundamental significance.

RESEARCH QUESTION

What is the influence of covid-19 fear on job stress and job satisfaction of healthcare workers?

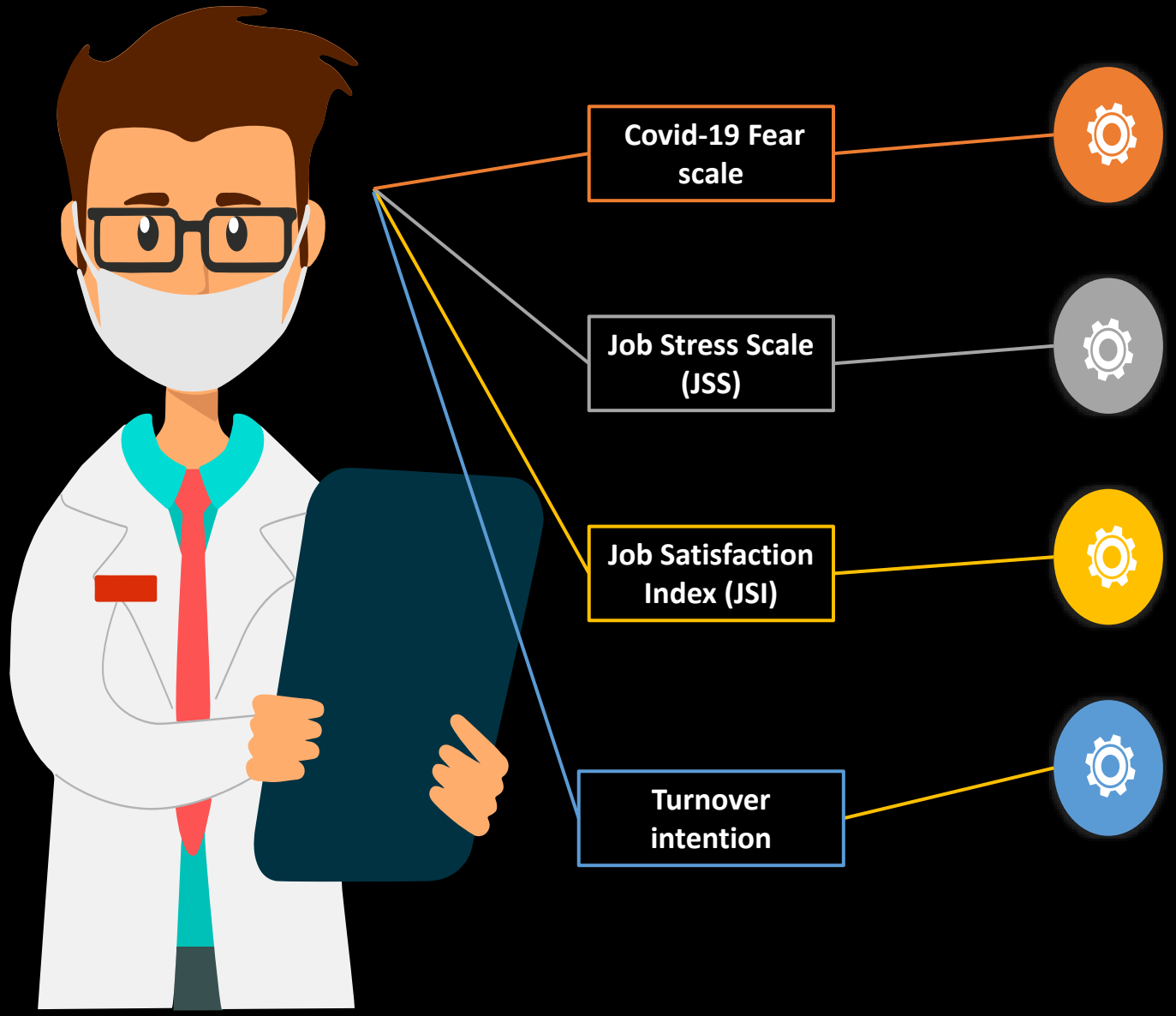
OBJECTIVES

1. To measure covid-19 fear among the healthcare workforce
2. To measure the job stress among the healthcare workforce
3. To measure the job satisfaction among the healthcare workforce
4.To find out whether covid-19 fear has a correlation with job stress and job satisfaction or not.

Materials & Methodology

- **Study Area :** Medanta –The Medicity Gurugram
- **Study Type:** Cross-sectional analytical study
- **Research Data**:
- Primary data collection through a survey using a structured questionnaire
- Secondary data**:** Available research data through research articles and available resources on data based platform.
- **Research Duration :** 3rd May 2021 to 25th June 2021
- **Inclusion criteria :** Healthcare professionals who were permanent staff of the facility, who had worked during the covid-19 crisis and had agreed and were available at the time of study
- **Exclusion criteria:** Nursing students , Those who weren't present during the study and one who didn't sign the consent form were excluded
- **Sampling Technique** : Purposive sampling technique
- **Sampling Plan** : A sample of 100 people from that organisation were evaluated for response.

QUESTIONAIRE TOOLS AND SCALES



- The Covid-19 Fear scale (Ahorsu et al.,2020) was used to examine apprehension about covid-19.
- This 7-item one-dimensional scale was answered by healthcare professionals using a 5-point Likert scale

- The Job Stress Scale (JSS) (House & Rizzo, 1972) was used to assess frontline workers' experience of stress while carrying out their work.

- JSI (Schriesheim & Tsui, 1980) This 5-item measure by 5 point likert scale consisted of items reflecting the 5 essential job elements: support from the organization, present work, coordination and support from co-workers, current salary and career progress and development.

- It is used to measure turnover intention towards the organisation and towards the professional field were asked and responses were collected from the participants in terms of Yes or No.

TABLE 1		Frequency	Percentages
Gender	Male	44	44%
	Female	56	56%
Job Category	Doctor	19	19%
	Nurses	58	58%
	GDA	13	13%
	Allied Staff	10	10%
Work Experience	Less Than Or Equal To 5 Years	66	66%
	5-9 Years	17	17%
	More Than 9 Years	17	17%
Educational Qualification	School Level	11	11%
	Graduate Level	65	65%
	Post Graduate	24	24%
Marital Status	Unmarried	72	72%
	Married	28	28%

RESULTS

- The mean age of the participants was 30.09 years.
- 56% of the respondents were female and 44% were males.
- 58% of the respondents were nurses with doctors, GDA and other allied staff to be around 42%.
- More than 66% of the respondents were either having experience equal to or less than 5 years.
- More than 9 years respondents were senior doctors and nursing team. The educational qualification of the respondents were mostly graduate level.
- Most of the respondents were unmarried and married respondents comprised of 28%.

TRAINING RELATED TO COVID-19

	I have attended training related to covid-19
Yes	83
No	17

Interpretation :

- **83% of the population had attended covid-19 related trainings**
- **Around 17 respondents didn’t attend training related to covid-19**

AWARENESS OF COVID-19 RELATED PROTOCOLS

	I am aware of the protocols related to covid-19
Yes	89
No	11

Interpretation : Following were the results obtained

- **89% of the population were aware of the covid-19 related protocols**
- **11% of the respondents responded that they were unaware of the protocols related to covid-19.**

Table 2 :Gender Percentage

Characteristics		Male	Percentage	Female	Percentage
Marital status	Unmarried	27	37.50%	45	**62.50%**
	Married	17	60.70%	11	39.30%
Job category	Doctors	14	73.70%	5	26.30%
	Nurses	9	15.50%	49	**84.50%**
	GDA	11	85%	2	15.40%
	Allied Staff	10	100.00%	0	0.00%
Work experience	Less than 5 years	26	39.40%	40	**60.60%**
	5-9 years	7	41.20%	10	58.80%
	More than 9 years	11	64.70%	6	35.30%
Educational Level	School Level	9	81.80%	2	18.20%
	Graduate level	20	30.80%	45	**69.20%**
	Post graduate level	15	62.50%	9	37.50%

GENDER CHARACTERSTICS AMONG RESPONDENTS

- 62.50% of the females are unmarried and mostly belong to the job category of nurses.
- Younger population of nurses are there with less than 5 years of experience in the health facility .
- Doctors mostly had completed with their post graduate degree(62.5%)
- Among the job category, nurses are mostly the respondents
- Among the educational level,around 70% of the respondents had completed the graduation

ATTENDED COVID-19 RELATED TRAINING WITH SOCIO-DEMOGRAPHIC VARIABLES

I have attended COVID-19 protocols related trainings?						
Characteristics		Yes		No		Total
Gender	Male	31	70.50%	13	29.50%	44
	Female	52	92.90%	4	7.10%	56
Job category	Doctor	18	94.70%	1	5.30%	19
	Nurse	55	94.80%	3	5.20%	58
	GDA	1	7.70%	12	92.30%	13
	Other Allied staff	9	90.00%	1	10.00%	10
Experience	Less than 5 years	53	80.30%	13	19.70%	66
	5-9 years	15	88.20%	2	11.80%	17
	More than 9 years	15	88.20%	2	11.80%	17
Educational qualification	School Level	1	9.10%	10	90.90%	11
	Graduate	61	93.80%	4	6.20%	65
	Post graduate	21	87.50%	3	12.50%	24
Marital status	Unmarried	57	79.20%	15	20.80%	72
	Married	26	92.90%	2	7.10%	28

- 92% of the females had attended training related to covid-19 protocols.
- From the job category aspect, the respondents from GDA had mostly not attended trainings related to covid-19.The reason may be attributed to their work schedules and lack of awareness.

AWARENESS OF EXISTING PROTOCOL RELATED TO COVID-19 WITH SOCIO-DEMOGRAPHIC VARIABLES

I am aware of existing protocol related to COVID-19?						
Characteristics		Yes		No		Total
Gender	Male	36	81.80%	8	18.20%	44
	Female	53	**94.60%**	3	5.40%	56
Job category	Doctor	19	**100.00%**	0	0.00%	19
	Nurse	54	93.10%	4	6.90%	58
	GDA	7	53.80%	6	46.20%	13
	Other Allied staff	9	89.00%	1	10.00%	10
Experience	Less than 5 years	53	87.90%	13	12.10%	66
	5-9 years	15	88.20%	2	11.80%	17
	More than 9 years	15	**94.10%**	2	5.90%	17
Educational qualification	School Level	7	63.60%	4	36.40%	11
	Graduate	58	89.20%	7	10.80%	65
	Post graduate	24	**100.00%**	0	0.00%	24
Marital status	Unmarried	62	86.10%	10	13.90%	72
	Married	27	**96.40%**	1	3.60%	28

- GDA's were the least aware of covid-19 protocols
- Most of the respondents who are unaware were from qualification of school level.
- Fully aware with the covid-19 protocols and had higher percentage were mostly doctors and post graduates.

COVID-19 FEAR SCALE											
Characteristics		Fear Scale 1	Fear Scale 2	Fear Scale 3	Fear Scale 4	Fear Scale 5	Fear Scale 6	Fear Scale 7	Fear Mean	Std Deviation	P value
Gender	Male	2.98	2.98	4.32	3	3	4.11	4.68	3.5812	0.61418	0.005
	Female	3.55	3.55	4.11	3.57	3.54	4	4.88	**3.8852**	0.49293	
Marital status	Unmarried	3.24	3.24	4.22	3.29	3.29	4.04	4.79	3.7302	0.60207	0.047
	Married	3.46	3.46	4.14	3.39	3.32	4.07	4.79	**3.8061**	0.47175	
Attended Covid-19 Related trainings?	Yes	3.39	3.39	4.14	3.41	3.41	3.98	4.8	**3.7866**	0.55927	0.005
	No	2.88	2.88	4.47	2.88	2.76	4.41	4.76	3.5798	0.59219	
Awareness regarding existing protocol	Yes	3.39	3.39	4.19	3.4	3.38	4.04	4.83	3.8058	0.56047	0.005
	No	2.55	2.55	4.27	2.64	2.64	4.09	4.45	3.3117	0.4277	
Job category	Doctor	3.63	3.63	4.32	3.53	3.53	4.16	5	3.777	0.47039	0.025
	Nurse	3.33	3.33	4.22	3.34	3.31	4.02	4.88	**3.9759**	0.52989	
	GDA	2.54	2.54	4.31	2.69	2.69	4.23	4.54	3.3626	0.46149	
	Allied Staff	3.5	3.5	3.7	3.6	3.6	3.8	4.2	3.7	0.84233	

COVID-19 FEAR SCALE WITH DEMOGRAPHIC VARIABLES

- Covid-19 fear mean score among female was higher as compared to males
- People who were married had more fear among them. This can be attributed to the fear among themselves that they may infect their family members.
- Among the job category, nurses had more fear among themselves as compared to doctors and other staff.

JOB STRESS SCALE

Characteristics		Stress1	Stress 2	Stress 3	Stress 4	Stress 5	Stress 6	Stress Mean
Gender	Male	3.09	2.14	3.09	4.61	2.82	2.14	**2.9811**
	Female	3	2.09	3	4.79	2.71	2.13	2.9524
Marital status	Unmarried	3.13	2.08	3.13	4.74	2.82	2.11	**3**
	Married	2.82	2.18	2.82	4.64	2.61	2.18	2.875
Job category	Doctor	2.42	2.11	2.42	4.74	2.32	2.11	2.6842
	Nurse	2.84	2.12	3.89	4.72	2.62	2.16	**3.105**
	GDA	4.69	2.15	2.5	2.6	3.85	2.15	2.8
	Allied Staff	3.2	2	3.2	4.6	3	2	2.7

JOB STRESS SCALE CONCERNING SOCIO-DEMOGRAPHIC VARIABLES

- Male had a higher mean score of 2.98 as compared to female counterpart. Higher mean score clearly indicate higher stress among male population with very less significant difference as compared to mean scores of female.
- Unmarried respondents were more wary to higher stress level .
- Nurses had higher level of stress when compared to other job category.

- Female respondents in the healthcare population were more satisfied with the job role.
- Doctors and professionals who had been working for more than 5 years seemed contented and jobs satisfied during the covid crisis too.
- Unmarried and married population didn't have a much wider mean score difference but professionals who had worked less than 5 years had a lower mean score

Job Satisfaction scale with reference to demographic variables

JOB SATISFACTION SCALE							
Characteristics		JS Scale 1	JS Scale 2	JS Scale 3	JS Scale 4	JS Scale 5	JS Scale Mean
Gender	Male	2.16	2.41	2.16	2.36	2.32	2.2818
	Female	2.07	2.5	2.07	2.55	2.5	**2.3393**
Marital status	Unmarried	2.08	2.49	2.08	2.5	2.43	**2.3167**
	Married	2.18	2.39	2.18	2.39	2.39	2.3071
Job category	Doctor	2.16	2.47	2.16	2.47	2.47	**2.3474**
	Nurse	2.1	2.5	2.1	2.55	2.5	2.3117
	GDA	2.15	2.46	2.15	2.31	2.23	2.2615
	Allied Staff	2	2.2	2	2.2	2.1	2.1
Work Experience	Less than 5 years	2.11	2.48	2.11	2.5	2.42	2.3242
	5-9 years	2.18	2.65	2.18	2.65	2.65	**2.4588**
	More than 9 years	2.06	2.18	2.06	2.18	2.18	2.1294

Results & Interpretation

Descriptive statistics

Scale	N	Minimum	Maximum	Mean	Std. Deviation
Covid Fear	100	1.00	5.00	3.7514	0.56731
Job Stress	100	1.00	5.00	2.9650	0.61968
Job Satisfaction	100	1.00	5.00	2.3140	0.36543

- The total composite score for covid-19 fear came around 3.75.
- The job stress level mean score came around 2.96
- For job satisfaction, the composite score came around 2.31.

Results & Interpretation

Correlates	Job Stress	Job Satisfaction
Covid-19 fear	0.79	-0.164
Job Stress		-0.297*

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

- There is a significant negative correlation between stress and job satisfaction .
- From the correlation of covid-19 fear on job stress and job satisfaction, there is a positive correlation and negative correlation respectively, but that cannot be significantly ruled out to covid-19 fear only.
- There can be many other possible reasons for job stress and job satisfaction (6.4)

DISCUSSION

- The following study measured the influence of covid fear with the covid-19 knowledge and various demographics related to it.
- From the covid fear among the job category, we could clearly see nurses had more fear than their other counterparts. The fear can be attributed to the fact that in spite of training programs related to covid-19 protocols being given to the team at frequent intervals, most of them are not attending the training or maybe not taking it seriously.
- It could be observed that nurses had higher level of job stress level and this can be closely related to covid-19 fear among them also to be higher.
- Since nursing professionals are straightforwardly associated with patient care, their danger of contracting COVID-19 is higher than others. It could add to their perceptions of fear or anxiety or dread of being tainted or unconsciously infecting others, including their relatives or companions.
- Additionally, pandemic-associated concerns like expanded patient level and symptomatic patient burden, prioritisation of Covid associated precautionary measures, social distancing and home isolation after covid duty hours can heighten fears among medical attendants, influencing their mental and emotional wellbeing including their work performance ability.

DISCUSSION

- It can further be depicted that job satisfaction level among the doctors are higher. The reason being they are provided with good remuneration for their work, extra incentive during the covid-19 pandemic crisis and other benefits by the health facility.
- The morale encouragement of every other staff should be done in the same way. Those professionals who had worked with the healthcare facility for more than 5 years were more job satisfied. Those more than 9 years if experience had a low mean score.
- Among the different variables among the job stress, healthcare workforce agreed to have work related stress during and after covid-19.The mean score came around 2.96 which significantly proves there is some amount of work related stress while working.
- For example, in an examination including 1 304 Turkish people, expanded degrees of fear of COVID-19 were unequivocally connected to negative emotional states including uneasiness, depression, anxiety and stress (Satici et al., 2020)[2].

ORGANISATIONAL TURNOVER INTENTION

	Frequency	Percentage
Yes	37	37
No	63	63
Can’t say	0	0
Total	100	100

- Finally if we analyse the organisational turnover intention among the workforce, we can see that 63% of the workforce is happy with the organisational protocols related to covid-19.
- They are willing to work with the organisation even in extreme pandemic situation.
- The reason is because the facility was providing them with adequate resources like PPE kit, various cash incentives along with the salary during the covid-19.So organisational turnover intention among the workforce turned out to be positively good

PROFESSIONAL TURNOVER INTENTION

	Frequency	Percentage
Yes	9	9
No	91	91
Can’t say	0	0
Total	100	100

- And the professional turnover intention among the workforce, we can that 91% of the respondents were not ready to shift to other profession owing to covid-19.
- They were happy with the current state of professions.
- Those 9% of the population who were unhappy with the professional turnover intention may be because of disorientation towards the work, unhappy with peers or dissatisfied with the boss leading to which burnout might have occurred. May be due to that, these may be the possible reasons. Other reasons can also be supported.

INTENTION TO WORK DURING COVID 3RD WAVE

	Frequency	Percentage
Yes	61	61
No	8	8
Can’t say	31	31
Total	100	100

- In terms of COVID-19 3rd wave support from workforce, around 61 % of the population had an agreement that they will join the healthcare facility if covid-19 3rd wave occurs.
- These people had been working even in the 2nd wave too.31% of the population had contemplated that they won’t be able to say anything as of now.

CONCLUSION

- The following study measured the influence of covid fear with the covid-19 knowledge and various demographics related to it.
- It also gave a schematic view of the job stress level, job satisfaction during the covid-19 and how they are related to socio-demographic variables.
- As per the study, we were able to gauge the demographic variables present in the hospital facility. Attendance to covid-19 training had a significant impact on the fear related to covid-19.
- In spite of most of the participant knowing about covid-19 protocols, still the stress level was quite high in number.
- The job satisfaction level was adequate and the professional and healthcare turnover intention came out with positive results.
- Empathetic consideration of the components that add to covid fear and its effects on healthcare professionals work results is critical when planning & carrying out efforts to address healthcare professionals' necessities and concerns.

RECOMMENDATIONS

- **ORGANISATIONAL RESPONSIBILITY** : The results of this study features the fundamental part of hospital directors and management staff in supporting healthcare professionals throughout the pandemic through evidence based interventions and strategy.

- **GET TOGETHERS** :They can have a family time with whole of hospital staff on Saturday or Sunday so that community participation with social distancing can connect them more with the co-workers and thereby stress level can be reduced. The mental health status of the workforce should be monitored timely and provided with necessary inputs.

- **PSYCHOLOGICAL RESOURCES** :Moreover, the arrangement of psychological materials (for example books, journals on emotional wellbeing), books on psychology and advising or psychoanalysis shall improvise frontline healthcare professionals' psychological well-being. .

- **CONSTANT UPDATE** : The healthcare professionals should be constantly updated with day to day new recent updates related to covid-19. So the information pertaining to covid-19 updates should be shared with the healthcare professionals constantly. This information ought to incorporate the idea of the causative infection, safeguards to forestall transmission of the infection to oneself as well as other people, how to successfully utilize hospital resources and assets and recent updates in the management of Covid patients

- **SUFFICIENT BREAK HOURS :** The frontline healthcare workers should be provided with sufficient break hours to permit them to take care of their wellbeing.

- **PROVIDE RESOURCES** :The management of the hospital should also support the healthcare professionals by providing them sufficient PPE kits, providing extra sanitizers for home.

- **FRONTLINE ASSOCIATIONS** : Further the chapters of doctors association of the state and nursing societies of the state/district level should regularly intervene and know the mental health status and orientation of the workforce in regular intervals.

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THANK YOU