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Unravelling Stress: Insights into the Challenges Faced by Healthcare Workers in Tertiary Care Hospital

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ABSTRACT:
The medical profession is characterised by intense stress and high burnout rates, significantly impacting doctors' mental health, job satisfaction, and patient care quality. This study explores stress and burnout among healthcare professionals in a tertiary care hospital in a tier-one city, aiming to identify key stressors, the role of experience, and coping mechanisms. A cross-sectional study involved 70 healthcare professionals at the hospital over 30 days.
The study found that 10% of participants reported high levels of emotional exhaustion, while 40% experienced high levels of depersonalisation. Despite high levels of personal achievement (84%), significant burnout persisted. Variations in burnout were observed based on years of experience and field of practice, with early-career professionals and those in medical fields experiencing higher levels of burnout.
The study highlights the complexity of burnout in healthcare settings, emphasising the need for targeted interventions to enhance coping skills and reduce stressors. Comprehensive strategies, including training programs, organisational changes, and mental health resources, mitigate burnout and improve job satisfaction and patient care. Burnout remains a significant issue among healthcare professionals, driven by high emotional demands and ineffective coping strategies. Proactive measures to enhance resilience, support, and work-life balance are essential in addressing burnout, focusing on preventive strategies to safeguard the well-being of healthcare workers and ensure high-quality patient care.

Key Words: Healthcare Professionals, Mental Health, Stress, Burnout, Coping Strategies.

INTRODUCTION

Healthcare providers more often deal with stress, which raises the risk of mental health problems that lead to poor performance. (1) The requirement is to save patients anger at the way to face the patient's sickness and its prognosis, anxiety, and sadness about one's health. The intense feeling between doctor and patient bond significantly reduces work-related stress.
The healthcare provider deals with constantly changing bureaucracy and the laws in healthcare. Above all, the work is more demanding; one must keep up with the rapid medical and technology breakthroughs. This additional stress is beyond the doctor-patient interaction. This stress becomes worse with a lack of resources and a harsh environment. (2)
The workplace and its complexities have a significant impact on burnout. One of the essential qualities of the workplace is to reduce stress and prevent burnout. These qualities include motivation and clear communication chances for career progression; on the other hand, work settings harmed by endless working hours, heavy workloads, insufficient reforms, and emotional strain raise the risk of burnout. The complex relationship between job satisfaction and burnout emphasises the need for sophisticated methods to address burnout effectively. Demographic variables and work satisfaction further complicate the burnout phenomena, which have different effects in cultural and geographic contexts. (3)
Today, health models frequently have more administrative/ managerial burdens on doctors in domains for which they don't have any professional expertise, which makes them more stressed. (4) The evolution of productive support networks and therapies requires a detailed understanding of physicians' psychological difficulties with increasingly demanding work situations. Burnout is a growing problem that needs to be addressed because it hurts healthcare workers' well-being.
The primary aim of this research article is to systematically examine the levels and determinants of stress among healthcare professionals working in a tertiary care hospital located in a tier-one city. By focusing on this high-stakes environment, the study seeks to identify critical stressors and their impact on the mental well-being of medical, surgical, and paramedical staff. (5) The objectives are threefold: first, to assess the prevalence and intensity of stress and burnout across different

professional roles and levels of experience within the hospital; second, to investigate the relation between years of experience and stress levels, aiming to understand how professional attitude influences stress resilience; and third, to explore differences in stress levels between various fields of healthcare, providing insights into field-specific stressors and coping mechanisms.

MATERIALS AND METHODS

A cross-sectional study was conducted on 70 healthcare professionals working at a tertiary care hospital in a tier-one city. Data for this study was collected using a convenience sampling technique. This study comprises both qualitative and quantitative approaches. (6). Primary data was collected through three anonymous questionnaires designed to ensure participant confidentiality.

- **1st set of questioners:** Focused on demographic data (age, sex, marital status, years of experience, and history of mental illness)
- **2nd set Maslach Burnout Inventory (BMI):** Tool for assessing burnout among professionals to measure depersonalisation, emotional exhaustion, and personal accomplishment. (7)
- **3rd Set to Brief COPE Inventory to evaluate participants:** Tool to assess participants' coping strategies in response to stress. (8)

In the study, data collection responses were categorised into demographic variables and any previous history of mental illness. This allowed for an in-depth analysis of burnout levels and coping strategies for demographic factors.
To identify patterns and correlations between demographic characteristics, burnout, and coping scores, statistical analysis was performed to provide a comprehensive understanding of factors influencing healthcare professionals' well-being. (9)

RESULTS

This section elaborates on the analysis of MBI – Degree of Burnout that reveals that:
Emotional Exhaustion: Healthcare providers in hospitals experience emotional exhaustion. It was reported that (20%) of healthcare providers have moderate levels, and (10%) are experiencing high levels of burnout.
Depersonalisation healthcare providers in hospitals on depersonalisation reported that (20%) of healthcare providers have moderate levels, and (40%) are experiencing high levels.
Personal Achievement, the burnout was notably high (84%) of participants reporting high levels of burnout.
The results also discussed in the Brief COPE inventory emphasise the participant coping strategies include problem-focused and emotional:
Problem-focused (32.8%) respondents found that problem-focused was not very effective. Emotional–focused (44.2%) respondents found emotional focus ineffective. The results suggest a considerable percentage of healthcare providers are struggling with burnout and may benefit from some intervention to improve overall job satisfaction and coping mechanisms.

TABLE : 01: Maslach Burnout Inventory Analysis

Level Of Burnout	Emotional Exhaustion	Depersonalisation	Personal Achievement
High-Level Burnout	7	28	59
Moderate Level Burnout	14	14	11
Low-Level Burnout	49	28	0
Total No. Of Responses	70	70	70

TABLE : 02: Maslach Burnout Inventory Analysis Based on Number of Years of Experience

Level Of Burnout	0-9 years	10 – 19 years	20 – 29 years	More than 30 years
High-Level Burnout	8	8	8	3
Moderate Level Burnout	1	6	4	1
Low-Level Burnout	5	10	11	5
Total No. Of Responses	14	25	22	9

TABLE: 03: Maslach Burnout Inventory Analysis Based on Field of Work

Level Of Burnout	Medical	Surgical	Paramedical
High-Level Burnout	11	10	9
Moderate Level Burnout	2	3	1
Low-Level Burnout	20	10	4
Total No. Of Responses	33	23	14

TABLE: 04: Brief C.O.P.E. Analysis

Type Of Coping Strategies	Problem-Focused	Emotion- Focused	Avoidant
Good Coping	47	39	56
Bad Coping	23	31	14
Total No. Of Responses	70	70	70

DISCUSSION

The study reveals significant insight into burnout and coping mechanisms among healthcare providers at tertiary care hospitals. 10% of participants experience high levels, and 20% moderate levels reported elevated emotional exhaustion. This suggests that a significant portion of healthcare providers are grappling with fatigue and stress. The study's findings align with the literature on burnout, emphasising emotional exhaustion as a critical factor contributing to reduced performance and job satisfaction. (10)

This aspect of burnout is particularly concerning as it directly affects patient care and professional relationships. The relatively high level of personal achievement (85%) reported suggests that while healthcare professionals may derive significant satisfaction and fulfilment from their work, this sense of accomplishment does not necessarily counterbalance the adverse effects of burnout. The high levels of personal achievement may create a heightened awareness of the gap between professional aspirations and the reality of burnout. (11)

The analysis of burnout levels across different variables reveals distinct patterns. For years of experience, the data indicates a high level of burnout among professionals with 0-9 years and 10-19 years of experience, each reporting eight high burnout cases, while those with 20-29 years of experience show a moderate decrease, and individuals with over 30 years experience exhibit a significantly lower incidence of high burnout. This suggests that while burnout is prevalent early in one's career, it appears to decrease with more extensive experience, possibly due to better coping mechanisms or adaptation. (12) When examining burnout by field, medical professionals experience the highest level of burnout, followed by surgical and paramedical staff, which aligns with the high-stress environment typical of medical fields. The low level of burnout reported among paramedical staff might indicate less exposure to high-stress situations compared to their medical and surgical counterparts. These findings underscore the need for targeted interventions and support systems to mitigate burnout and enhance professional well-being, particularly for those early in their careers and the medical field. (13)

The Brief COPE inventory results underscore the complexities of coping strategies among the participants. The results suggested that (32.8%) of respondents have ineffective problem-focused strategies that propose a gap in resources or skills for managing stressors related to work, and about (44.2%) of participants demonstrated poor emotionally focused coping, which further complicates the issue, as this manages emotional response rather than stress. These findings suggest the need to address both burnout and ineffective coping mechanisms. The training program should be provided to improve problem-focused and emotionally-focused coping skills, and managerial changes are required to reduce stressors and promote the working environment. (14) Addressing these issues proactively can lead to better patient care and job satisfaction that enhance the overall well-being of healthcare providers.

CONCLUSION

Because medicine is such a demanding career, burnout among doctors is a widespread and widely acknowledged problem. This study highlights the high levels of emotional weariness, depersonalisation, and inadequate coping mechanisms displayed by medical staff in tertiary care hospitals. These results support the general knowledge that physician burnout can result in lower-quality patient care, a higher frequency of medical errors, lower retention rates, and ultimately worse patient outcomes. (15) It is clear that building a supportive and family-friendly work environment, encouraging resilience and improving individual job engagement are essential for reducing burnout. Achieving a healthy work-life balance and guaranteeing job security are two crucial preventative strategies against burnout. Little evidence supports the effectiveness of cognitive behavioural therapy, relaxation methods, or environmental changes once burnout has set in. To combat burnout, it is crucial to prioritise preventative methods over remedial ones, highlighting that proactive measures are considerably superior to reactive solutions in preserving the well-being and effectiveness of healthcare personnel.

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