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COPING STRATEGIES ADOPTED BY HEALTHCARE WORKERS TO ELIMINATE NEGATIVE STRESSORS

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Abstract: The Healthcare Workers (HCWs) comprises a wide variety of professions and occupations who provide some type of healthcare service, including such direct care workers like physicians, nurse practitioners, physician assistants, nurses, respiratory therapists, dentists, pharmacists, occupational therapists, physical and behaviour therapists, as well as allied health professionals such as medical laboratory scientists, dieticians, and social workers.

An exploratory study was conducted among 120 healthcare workers in hospitals as well as private clinics to investigate the impact of psychosocial stressors among healthcare workers. The specific objectives were to recognize the coping strategies adopted by them to eliminate the negative stressors affecting their performance and efficiency. A self-constructed and validated questionnaire was used to analyze the negative stressors.

It was observed that patient-related activities such as boarding, billing, collecting patient reports and data are some of the monotonous repetitive tasks carried out by healthcare workers. These tasks lead to psychological fatigue among them indirectly leading to stress. Healthcare workers in the age 31 - 40 years have the most monotonous tasks as compared to other age groups and 100.8 (84%) of them always accept the situation when the work is piled up and continue with their routine work.

The results recognized the need and urgency to reduce the negative stressors for healthcare workers.

Key Words: Healthcare Workers, Negative stressors, Coping Strategies, Ergonomics, Stress.

I. INTRODUCTION

The Healthcare system is known as the organized provision of medical care to individuals or a set of individuals (i.e., community) which includes a majority of work that is done in providing primary, secondary, and tertiary care, as well as in public health.

The Healthcare Workers (HCWs) work mainly in hospitals, healthcare centers, and other service delivery points, but also can be available in academic training, research, and administration. Medicine is said to be the bridge between science and society. Healthcare workers are important agents that facilitates this interpretation. They are recognized for their bravery and compassion during medical emergencies. In times of crisis, they deserve the utmost gratitude and support (<https://pubmed.ncbi.nlm.nih.gov/16408403/>, n.d.).

Stress is often caused by a bad "person-environment fit". Stress and health problems occur when there is a bad fit between workers and their (work) environment or equipment that they use. Poor relationships with other employees, lack of social support from supervisors, and family also contribute to psychosocial stress among Healthcare Workers (HCWs). The other reasons contributing to psychosocial stress are justice at work, physical environment (like exposure to heat and cold environment, low oxygen areas), nature of workspace, job demand, etc (<http://ilocis.org/documents/chpt34e.htm>, n.d.).

An exploratory study was conducted to identify these stressors, gain a better understanding of the working conditions and help cope to achieve maximum efficiency. Healthcare Workers (HCWs) use various coping strategies to cope up with their daily stress. Meditation is said to be the best method to cope up with stress. Many front-line officers can also listen to religious songs, or read religious books to calm themselves. And at last, give yourself some time. It is very much important.

Doctors, nurses, and other medical workers are widely praised for the hard work which is done on the front lines caring for patients. While they are heroes to many, it must not be forgotten that they are also vulnerable to the pressures of their demanding jobs. Coping strategies are important because they facilitate an individual's handling of a stressful experience." Burns-Nader said, "If a person is facing a difficult time, positive coping patterns provide extra resources that can help that person deal with the demand of a stressor

(<https://www.sciencedaily.com/releases/2013/04/130403112627.htm#:~:text=%22Coping%20patterns%20are%20important%20because,the%20demand%20of%20a%20stressor.%22,n.d.>). As in the end, "A good Healthcare worker only treats the patient, but a great one also takes care of himself" (<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5299814/>, n.d.).

II. REVIEW OF LITERATURE

A study by Walton, A. and Rogers, B. (2017) aimed to find out the various workplace hazards faced by the nursing assistants. The major findings of the study reported that the majority of the literature reviewed fell into the domain of psychosocial hazards and centered on stress from workplace organization issues such as mandatory overtime, lack of managerial support, feeling rushed, concern about hazardous occupational exposures, violence directed towards them, heavy workload, etc. These resulted in high-stress factors leading to negative stressors. Psychosocial includes Nursing Assistants (NAs) reported a moderate level of stress and burnout.

The research was concluded by stating that Nursing Assistants (NAs) faced the highest risk of a hazard in the psychological domain and stress-related from work organization issues but no specific coping strategies were used for the same. (<https://www.semanticscholar.org/paper/Workplace-Hazards-Faced-by-Nursing-Assistants-in-A-Walton-Rogers/2fc0dd8890e60f0f8535e0a23e87df30838725,n.d.>)

Through the literature review, it was noticed that there is a dearth of knowledge on coping strategies adopted by healthcare workers. No relevant study on this topic was found to be conducted. The stressors that afflict the HCWs are well known but how do they or how can they cope with this stress is not well documented yet.

The present study was hence conducted to bridge this gap, with the purpose to focus on the health and well-being of the Healthcare Workers. Many physicians and HCWs have lost sight of their health and well-being while they meet the stresses of increased workload, rapidly expanding knowledge base, and cumulative government regulations - all this while balancing their private and professional life.

Many of the nurses, doctors who are treating the patients are silently battling addiction and mental illness. Exposure to human tragedy is disturbing. Having a personal tragedy or just listening to the news many a time leaves an impact on us. Now more than ever, the world needs qualified healthcare professionals to handle the increasing demand for medical care, new policies, manage technological advancements, and further accelerate the biopharmaceutical industry. In the age of a highly dynamic and competitive world, the HCWs are exposed to several stressors, hence the growing importance of interventional strategies is important among the HCWs.

III. OBJECTIVES OF THE STUDY

This study was conducted among healthcare workers from Mumbai city and its suburbs to comprehend the coping strategy adopted and how they mitigate the negative stressors. The specific objectives of the study were to (i) to gain knowledge of the demographic profile of the healthcare workers (HCWs), (ii) discuss the coping strategies adopted by the HCWs to the negative stressors affecting their performance and efficiency, and (iii) recommend effective ergonomic intervention and preventive strategies to mitigate the onset of occupational stress among HCWs.

IV. MATERIALS AND METHODS

An exploratory study was conducted among 120 healthcare workers from 23 multispecialty, private hospitals, and clinics to investigate the impact of negative stressors among healthcare workers. Healthcare workers with no medication, no intake of drugs; of any gender with more than 1 year of experience were included.

- A self-constructed and validated questionnaire was used to collect data for the research. The questionnaire was divided into three parts for easy convenience:
 - Part A consisted of the demographic profile of the participants
 - Part B concentrated to gather work-related information like Nature of employment, Job designation, working method, work timings, shift types, rest breaks, frequency of breaks/holidays, sleep duration, and quality of sleep which resulted in negative stressors.
 - Part C was about the coping strategies they implemented in their way of working or working procedures to cope up with the stressors and also an additional comment section was provided to state any other point about their way of tackling this issue (if present).
- Stress Prevention at work checklist by ILO - This checklist includes 50 checkpoints for identifying stressors in working life and mitigating their harmful effects. Each describes an action, indicates why it is necessary and how to carry it out, and provides further hints and points to remember which would help tackle those stressors (https://www.ilo.org/global/publications/books/WCMS_168053/lang--en/index.htm,n.d.).

The basic foundation of the research was planned. Then, after the formation of the Self-structured questionnaire, the process of data collection was initiated. The data was collected with the help of online and offline that is face to face interview methods. When the

data collection process through a self-structured questionnaire was completed then, the data was gathered in a single place (MS Excel Sheet). The collected data was entered in MS Excel 2019 spreadsheet and pivot charts were developed to help analyze the data.

V. RESULTS AND DISCUSSIONS

Age:

- 50 (41.6%) consists of female healthcare workers.
- 70 (58.3%) consists of male healthcare workers.
- The highest number of healthcare workers that is 22 (18.3%) male and 17 (14.1%) females lie between 41-50 years of age

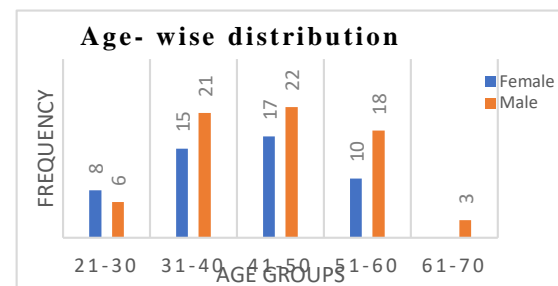


Fig 1: Age-Wise Distribution

Work Experience

- 24 (20%) of healthcare workers have 1-10 years of experience between the age group 31-40.
- 20 (16.67%) of healthcare workers have 10.1-20 years of experience between 41-50 years of age.
- 48 (40%) of healthcare workers have 1-10 years of experience.

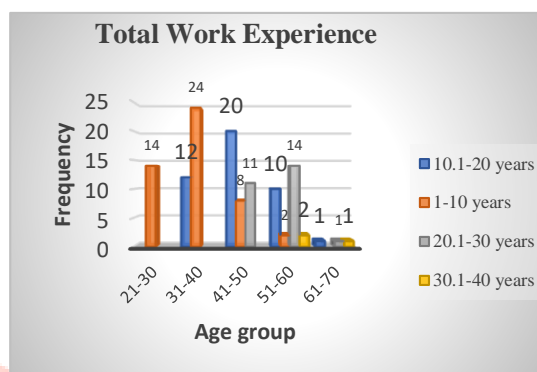


Fig 2: Total Work Experience

Rigidity in working method

- 67(56%) of Healthcare Worker agreed in rigidity being present in working operations due to strict protocols to be followed in the health industry

Work-life balance

- 59% said that their social life is affected due to work.
- 41% said that their social life is not affected due to work.

Work life balance- Social relation

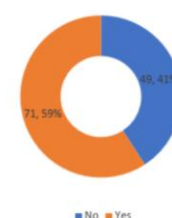


Fig 3: Social relations

Variety in task

- Healthcare workers in the age 31-40 years have the most monotonous tasks as compared to other age groups
- Healthcare workers in the age 41-50 years have more variety in the task as compared to other age groups

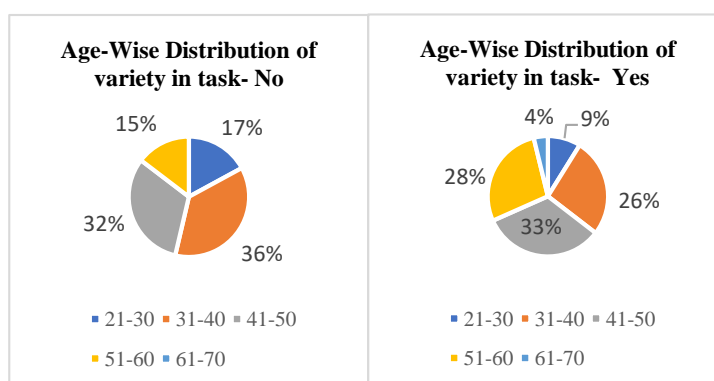


Fig 4: Age-Wise Distribution of Variety in task

High-stress factors

Table 1: High-Stress factors vs Age group

High-Stress factors	Age Group											
	21-30		31-40		41-50		51-60		61-70		Grand Total	
	F	%	F	%	F	%	F	%	F	%	F	%
Dealing with emergency cases	0	0	1	0.83	6	5	1	0.83	0	0	8	6.67
Dealing with sensitive/offensive patients	2	1.67	3	2.50	5	4.17	5	4.17	2	1.67	17	14.17
Documentation/ Workload	5	4.17	5	4.17	7	5.83	1	0.83	0	0.00	18	15.00
Long working hours	2	1.67	10	8.33	6	5	4	3.33	0	0.00	22	18.33
None	2	1.67	12	10.00	15	12.5	13	10.83	0	0.00	42	35.00
Shift Hours, Timings of work	0	0.00	0	0.00	0	0	2	1.67	1	0.83	3	2.50
Technology and its use	1	0.83	1	0.83	0	0	0	0.00	0	0.00	2	1.67
Travelling	0	0.00	1	0.83	0	0	1	0.83	0	0.00	2	1.67
Work-Life Balance	2	1.67	4	3.33	0	0	0	0.00	0	0.00	6	5.00
Grand Total	14	11.67	37	30.83	39	32.5	27	22.50	3	2.50	120	

- The age group of 51-60 with of 22.50% are the majority who deal with high-stress factors.
- It was found out that long working hour was the highest stress factor seen among them.
- The age group with 61-70 (2.50%) are the lowest percentage dealing with stress factors.

Piling up of Work

- 101(84%) of healthcare workers always accept the situation when it is piled up
- 59(49%) of healthcare workers do not have work piled up but always accept the situation as it is; 2% of healthcare workers do not accept the situation as it is when the work is piled up; 4% of healthcare workers never accept the situation as it is and do not have work piled up

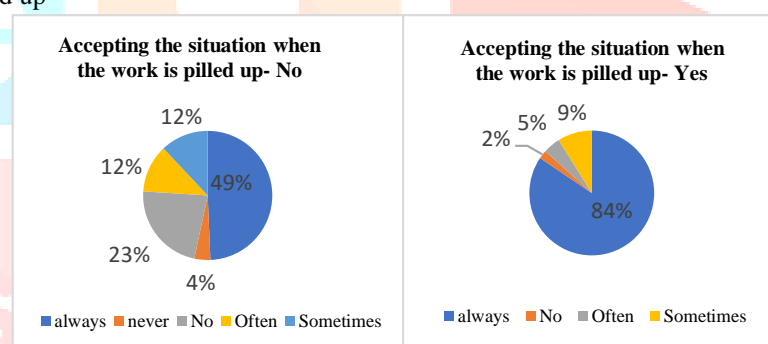


Fig 5: Accepting the situation when the work is piled up

Coping strategies used under stress

Table 2: Coping Strategies used under stress

Coping strategies used under stress	Frequency	Percentage
	F	%
Entertainment/ Music	19	15.83
Exercise/ Gym/ Meditation	31	25.83
Practising Hobbies	31	25.83
Sleep	16	13.33
Socializing	23	19.17
Grand Total	120	

- 31 (25.83%) of healthcare workers prefer practicing hobbies and exercising as a way to cope up with stress; 16 (13.33%) of healthcare workers prefer sleeping or taking rest when under stress and 23 (19.17%) of healthcare workers like talking to colleagues, family & friends when stressed

Gender wise coping strategies

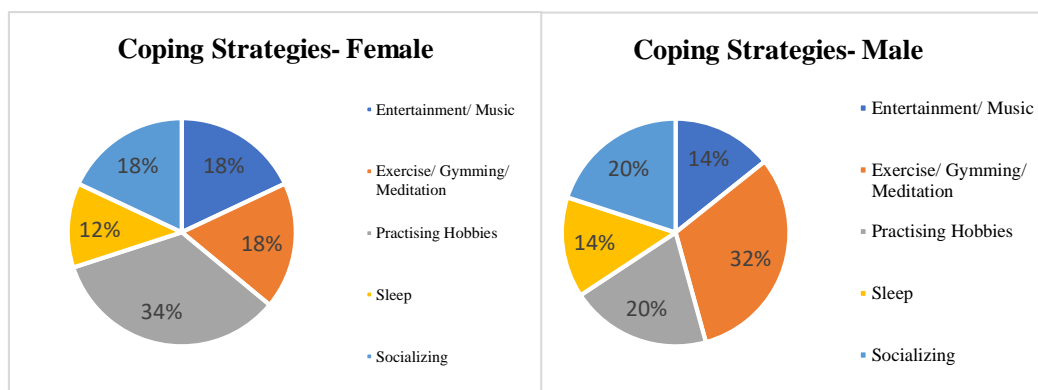


Fig 6: Gender-wise Distribution of Coping strategies

- Most male (32%) healthcare workers engage in exercising and Gym as a way to cope up with stress
- Most females (34%) healthcare workers engage in practicing hobbies when stressed

General Illness

- 12 (10%) healthcare workers having hypertension/hypotension always share their negative stressors with others
- 4(3.3%) healthcare workers having body aches & pains always share their negative stressors with others

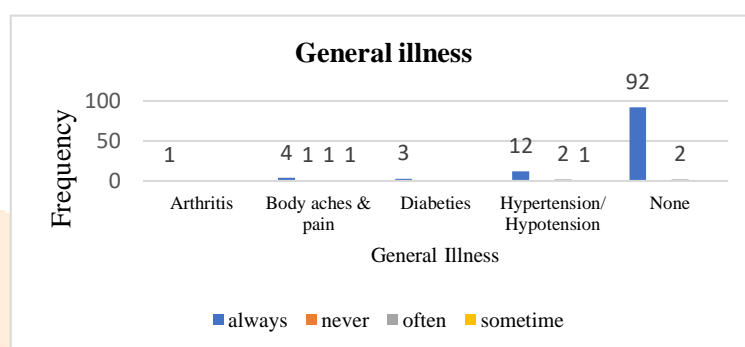


Fig 7: General illness

Sharing Negative Stressors

- 31-40 age group has been seen of sharing their negative stressors always.
- We have seen in the age group of 51-60 only 1(0.8%) of healthcare workers not sharing their stressors at all.

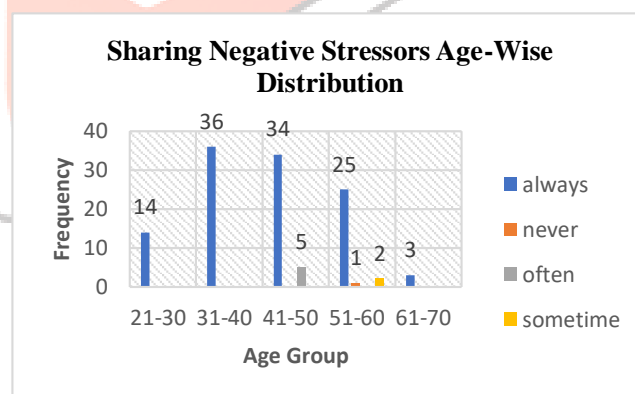


Fig 8: Sharing Negative Stressors Age-Wise Distribution

VI. DISCUSSION

70(58.3%) Healthcare workers included in the study were male and belonged to the age group of 41-50 years, which is the average age of the sample. 48(40%) of healthcare workers had 1-10 years of work experience, out of which 24(20%) were in the age group of 31-40 years. 110(91.7%).

Lack of rest breaks can lead to disturbed sleeping patterns, affect social life, and even cause medical conditions like high blood pressure, cholesterol, diabetes, and much more. Rigidity in working operations was a major stress factor among hospital staff. 71(59%) of healthcare workers believed that their social life was compromised due to work demands. Insufficient staff, high workload, and family demands, altogether, lead to negative stress among them. During the pandemic, keeping their fears aside to serve the patient, in itself was a challenge and a stress factor. Only 49(41%) disagreed with their private life being affected, either due to them being self-employed or not being a part of the frontline workers. They could have adequate rest breaks and also control the number of patients they would attend in a day, leading to a good work-life balance and lower stress.

Patient-related tasks such as onboarding, billing, collecting patient reports and data are some of the monotonous repetitive tasks carried out by healthcare workers. These tasks lead to psychological fatigue among them indirectly leading to stress. Healthcare workers 31-

40 years age group have the most monotonous tasks as compared to other age groups and 84% of them always accept the situation when the work is piled up and continue with their routine work. 30(25.8%) of healthcare workers prefer practicing hobbies and exercising as a way to cope up with stress, 16(13.3%) prefer sleeping or taking rest, while 23(19.2%) like talking to colleagues, family, and friends when under stress. Most male 38(32%) healthcare workers engage in exercising and going to the gym as a way to cope up with stress while the most female 40(34%) healthcare workers engage in practicing hobbies when stressed. 14(12%) female and 16(14%) male healthcare workers prefer sleeping and most nurses 5(4.2%) prefer socializing with their colleagues when stressed.

12(10%) healthcare workers having hypertension/hypotension always share their negative stressors with others which is a good sign as sharing their stressors will help them cope up with the stress and eventually will help them in reducing hypertension/hypotension. 4(3.33%) healthcare workers having body aches & pains always share their negative stressors with others. It has been seen that the majority of the people in the age group from 31-50 always share their negative stressors with someone to cope up with stress. Only a few people from the age group 51-60 years that is the experienced generation prefer not to share their negative stressors with someone. Sharing the negative stressors helps to relieve the stress and it will make the mind, and body feels at ease. This will also help to increase concentration levels at work tasks at hand. If the stress is not shared or is not being coped with properly then it will hinder the performance levels which will affect the quality of work and will eventually lead to various illnesses like hypertension, hypotension, diabetes, etc.

VII. RECOMMENDATIONS

The outcome of this study is a journey from negative factors at the workplace leading to psychosocial hazards, stress, and burnout to working at improving coping strategies and tackling those stressors effectively not only for the betterment of their health but to also improve patient care.

According to the National Institution for Occupational Safety and Health (NIOSH) there is three main hierarchy of controls which is used in executing effective control solutions. The most effective is Engineering Controls because it is designed to remove the hazard at the source. The next is the Administrative Controls which less effective than Engineering Control, but more effective than Personal Controls. Last but not least is Personal Protective Equipment that is (PPE). When both Engineering and Administrative methods cannot be used, then PPE is used.

Engineering Controls:

Engineering Controls are known to be the most effective way to eradicate the hazard. Engineering controls are measures taken to physically modify a job or job task with the intent to eradicate exposure to potential hazards using isolation, ventilation, and insulation.

- Re-organize the work structure to eliminate organizationally induced stress which will help them in the long run.
- “Stress Audit” sessions should be introduced weekly or monthly.
- If possible, hiring more staff and reducing the workload so that they get a good sleep which will help them to cope up better with negative stressors.

Administrative Controls

In places where engineering methods cannot be used, administrative methods can be the best next option.

- Providing employee training for best practices and work methods.
- Provide staff with more accurate training to recognize and intervene earlier in escalating behaviours likely to turn violent.
- Review and revise policies and procedures that produce workload stress.
- Introduce job rotation

Long-term support by top-level management in including job enrichment, job rotation, group-problem solving, and human relations training will not only lead to a reduction in the psychosocial stresses that the healthcare workers feel but also promote job autonomy, increase recognition at the workplace and job control.

Personal Controls

Personal Protective Equipment (PPEs) an easy to comply with but the least effective method for hazard control.

Personal stress relief techniques can be used to de-stress, such as:

- Breathing and relaxation exercises
- Visualization
- Improved personal habits like sleep, play, consume nutrition foods, and achievement of a work-life balance
- Exercise
- Avoidance of negative coping mechanisms like self-medication and illegal drugs, alcohol, binge eating.
- Recognized the stressors and avoiding them

VIII. CONCLUSION

To deal with rigidity, work-life balance, negative stressors these techniques were used to be found in this research:

- Indulging in hobbies, taking rest, and socializing were reported to be the most practiced coping strategies among female HCWs.
- In males gymming, meditation is the most applied coping strategy, followed by practicing hobbies and socializing.
- Younger adults tend to share their negative stressors compare to older or more experienced generations.

From the Review of Literature, it is seen that majority of the Healthcare Workers face negative stressors leading to dissatisfaction and poor work-life balance, and no such coping strategies are used to deal with it. Hence, by gaining a better understanding of their working condition, the researchers wish to share the outcome of this research to help them cope up with negative stressors and how to deal with them.

E-booklets, containing desirable stress relief exercises would be shared, which would help alleviate negative stressors and increase job satisfaction. The organizations would be encouraged to undergo a predesigned “Stress Audit”, which is a management strategy

for tackling stress in the workplace. Online workshops will be conducted enriching Healthcare Workers (HCWs) with productive coping strategies and helping them maintain a healthy work-life balance.

IX. SCOPE OF THE STUDY

This research will create awareness about the psychological aspects of the work environment that prove as significant factors contributing to negative stressors among Healthcare Workers (HCWs). The importance of having an ergonomist in the workplace can play a vital role in reducing negative stressors among HCWs, Ergonomists can plan, organize workshops to indulge the HCWs on how to train will teach them how to cope with work-related stress.

X. AUTHOR STATEMENT

Acknowledgment: The author is grateful to the department for providing the opportunity for conducting this research, the healthcare workers for their valuable inputs amidst this pandemic and stressful working hours. The research was done as part of a group.

Informed Consent: A written informed consent was taken from all 120 healthcare workers.

Conflict of Interest: The authors declare that they possess no conflict of interest.

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