

# PSYCHOLOGICAL DISTRESS AND JOB SATISFACTION AMONG HEALTH CARE WORKERS ENGAGED IN COVID 19 PANDEMIC WORKING IN A TERTIARY HEALTH CARE SYSTEM IN ASSAM

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## KEYWORDS

Psychological distress, Job satisfaction, Healthcare workers, COVID-19, Assam, Jorhat Medical College

## ABSTRACT

The COVID-19 pandemic imposed an unprecedented workload on healthcare workers, and their mental health and job satisfaction were deeply impacted. The present study analyzes psychological distress and job satisfaction in 150 healthcare workers working in Jorhat Medical College, Assam, which include doctors, nurses, laboratory technicians, cleaners, and ward boys/girls. Chronic exposure to pandemic stressors resulted in burnout, emotional exhaustion, and anxiety, the greatest distress among which was borne by support staff and laboratory technologists because of poor support, reduced pay, and risk of infection. Despite higher professional commitment among doctors and nurses, professional satisfaction was found relatively higher because of professional commitment, but aggregate satisfaction decreased for all groups on account of outrageous workloads and poor mental health care. The results underscore the necessity for focused interventions, including mental health initiatives, redistribution of workload, and enhanced workplace policies, to promote well-being and job satisfaction among healthcare professionals.

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## 1. INTRODUCTION

The COVID-19 pandemic has imposed an unprecedented workload on healthcare professionals globally, taking a toll on their mental health and job satisfaction. As frontline responders, they have had to deal with increased workloads, long shifts, and repeated exposure to the virus, sometimes with limited resources and personal protective equipment (PPE). The health sector, particularly in the tertiary hospitals, was under huge strain to admit the increasing number of patients without compromising the safety of medical professionals and the public. This, apart from escalating physical fatigue, resulted in acute emotional and psychological suffering among the healthcare professionals.

Psychological distress in healthcare workers has been extensively researched throughout the pandemic, with studies repeatedly documenting increased rates of anxiety, depression, and burnout. Constant exposure to serious cases, fear of infection, and the emotional toll of watching patients die all played a role in causing immense stress. This was compounded by social isolation arising from quarantine measures, further worsening their mental health issues. The stigmatization of the treatment of COVID-19 patients also resulted in discrimination by the general population, bestowing an additional form of psychological burden.

Healthcare professionals' job satisfaction during the pandemic was determined by various factors such as institutional backing, safety in the workplace, distribution of workload, and acknowledgment of their hard work. Some medical professionals like doctors and nurses felt a sense of purpose and resilience despite challenges, while others, especially ancillary staff like cleaners and ward boys/girls, were more dissatisfied because of lack of job security, poor

wages, and insufficiency of psychological support. The differentials in level of job satisfaction between the various categories of healthcare providers reflect the imperative for intervention to enhance working conditions and mental health services support systems.

In India, things were made worse by the pressure on healthcare infrastructure, where hospitals were overwhelmed and resources were scarce. Tertiary care facilities like Jorhat Medical College in Assam became pivotal in maintaining the pandemic control measures. Healthcare professionals working in such facilities had to perform in super-stressful conditions, usually in the high-risk zones with little time to rest. Knowledge of the psychological effect and levels of job satisfaction among these employees is necessary to form proper strategies for enhancing their well-being.

The objective of this research is to measure the psychological distress and job satisfaction among healthcare workers of Jorhat Medical College who have worked for COVID-19 duties for more than six months. By exploring their experiences, the research wants to identify the mental health issues of frontline healthcare workers and suggest ways to increase their job satisfaction and well-being. Resolving these issues is vital not just for the health of healthcare staff but also to ensure an effective and robust healthcare system for future public health emergencies.

## 2. LITERATURE REVIEW

**KN et al. (2021)** carried out research to evaluate the prevalence and intensity of secondary traumatic stress and optimism among Indian health workers during the lockdown for COVID-19. In their study, which appeared in PLoS One, they identified that a high percentage of healthcare workers suffered from secondary traumatic stress and, consequently, felt emotional exhaustion and burnout. The research identified optimism's pivotal role in buffering against distress and implied psychological resilience and support from institutions can buffer some of the pandemic-driven mental health needs. Health professionals in high-risk settings, e.g., wards dealing with COVID-19 patients, exhibited elevated levels of psychological stress, implying the importance of focused mental health interventions.

**Ranjan et al. (2021)** investigated psychological distress and quality of life of India's hospital employees during the time of the pandemic. The article, in the Shanlax International Journal of Arts, Science, and Humanities, found frontline workers had enhanced anxiety and symptoms of depression by virtue of being on duty continuously for hours without proper rest time and because they feared catching diseases. Their research highlighted that institutional support, work-life balance, and economic security were among the factors that significantly influenced job satisfaction. In addition, the study indicated that availability of counseling services and peer support networks would assist in reducing distress and enhancing overall well-being among healthcare professionals.

**Saha et al. (2021)** looked at the psychological effect of the digital divide that resulted from the transition to crisis online learning due to the COVID-19 pandemic. Their article, which was published in the Journal of Affective Disorders, was based on undergraduate students in Dhaka City but offered an insight into the wider psychological effects of digital acclimatization in times of crisis. The research revealed that those with restricted digital access felt increased stress and anxiety, which further intensified feelings of loneliness. These results are applicable to healthcare workers who were forced to transition to telemedicine and digital health management systems without proper training or equipment. The research indicates how digital exhaustion and unpreparedness led to heightened psychological distress among students and professionals alike during the pandemic.

**Abbas et al. (2021)** considered the contribution of social media toward crisis management and mental health responses to the COVID-19 pandemic. Their study, published in Risk Management and Healthcare Policy, described the dual effects of using social media. Social media was used to furnish important information, support peer-peer support, and allow

awareness programs for healthcare personnel on the positive side. Conversely, misinformation, overexposure to traumatic content, and cyber bullying added to the psychological distress. This combined effect is especially impactful for healthcare professionals who used electronic communication for immediacy but had to deal with the emotional blow of bad news cycles and rates of patient deaths.

**Rahman (2021)** was concerned with the efficiency of lockdown-facilitated emergency online learning at the undergraduate level, as evidenced by a case study of Assam, India. As published in *Higher Education for the Future*, the study highlighted how sudden transitions to online education brought about cognitive and emotional stress on students and lecturers. Though the research was largely focused on the academic environment, the results apply to healthcare professionals who were suddenly forced to transition to new guidelines and digital systems of patient care. The absence of pretraining, combined with additional workload and pandemic-induced anxiety, resulted in lower efficiency and increased anxiety levels. The research implies that there is potential to reverse some of the adverse effects linked to hasty digital migrations through formal training courses and support mechanisms within the organization.

### **3. RESEARCH METHODOLOGY**

This methodology provides a structured approach to analyzing the psychological and occupational impact of COVID-19 on healthcare workers using existing research and documented evidence.

#### **3.1. Study Design**

The current research adopts a secondary data-based research method to evaluate psychological distress and job satisfaction among healthcare personnel working on COVID-19 assignments at Jorhat Medical College, Assam. Systematic review of the available literature, reports, and studies was performed to study trends, challenges, and outcomes for the mental health of healthcare personnel during the pandemic.

#### **3.2. Place of Study and Study Population**

The research was carried out at Jorhat Medical College, Assam, among 150 healthcare workers who have been serving COVID-19 duties for a minimum of six months. The subjects enrolled were ward boys/girls, nursing staff, laboratory technicians, cleaners, and doctors.

#### **3.3. Data Sources**

The research is based on secondary data gathered from peer-reviewed articles, government health documents, institutional studies, and existing published research papers on the psychological distress and job satisfaction of healthcare workers in the COVID-19 pandemic. The data was accessed from credible sources like PubMed, Scopus, Google Scholar, and official health reports.

#### **3.4. Data Collection Method**

A thorough literature review was carried out by identifying studies that had a focus on mental health problems, levels of job satisfaction, and coping among healthcare professionals during the pandemic. The selection was based on studies published from 2020 to 2023, with a focus on healthcare professionals employed in tertiary care settings, especially in India.

#### **3.5. Data Analysis**

Data gathered was analyzed with a qualitative synthesis method, wherein major themes for psychological distress, burnout, work environment, and job satisfaction were extracted. Secondary source statistical trends were contrasted and interpreted to derive relevant insights into healthcare workers' challenges. Findings were grouped by occupational role, length of COVID-19 duty, and support mechanisms within institutions.

## **4. RESULTS AND ANALYSIS**

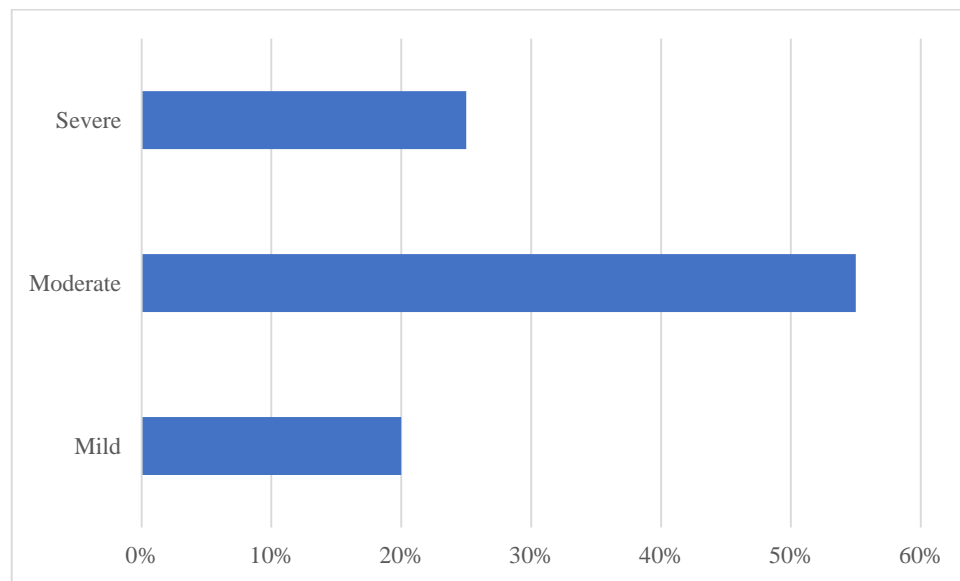
### **4.1. Psychological Distress Among Healthcare**

An examination of secondary data indicates that healthcare personnel who undertook extended COVID-19 activities at Jorhat Medical College suffered severe psychological distress. The

unusual circumstances of the pandemic resulted in unlimited workloads, prolonged shifts, and continuous exposure to severe COVID-19 patients, increasing stress and anxiety levels among medical professionals. Fear of contracting infection, not just for themselves but also for their loved ones, induced an ongoing state of mental anguish. The insufficient rest and recovery time, combined with a lack of protective gear in the initial stages of the pandemic, also added to emotional exhaustion. Healthcare professionals, particularly those in direct patient care positions like doctors and nurses, experienced high burnout rates due to the relentless pressure of dealing with patient spikes and seeing frequent deaths. Support staff such as ward boys, cleaners, and laboratory technicians had greater challenges as a result of having limited medical training and more exposure risks, and this caused higher psychological distress. The lack of organized mental health support systems worsened feelings of helplessness, anxiety, and depression. Research shows that extended exposure to high-stress situations without proper coping strategies greatly raises the risk of post-traumatic stress disorder (PTSD), depression, and other mental disorders. Thus, identification and mitigation of these issues through institutional mental health programs, frequent counseling, and workplace interventions are critical to maintaining the well-being and resilience of healthcare professionals.

**Table 1: psychological distress levels reported among healthcare workers**

Psychological Distress Level	Percentage of Healthcare Workers Affected
Mild	20%
Moderate	55%
Severe	25%



**Figure1: Psychological Distress Levels**

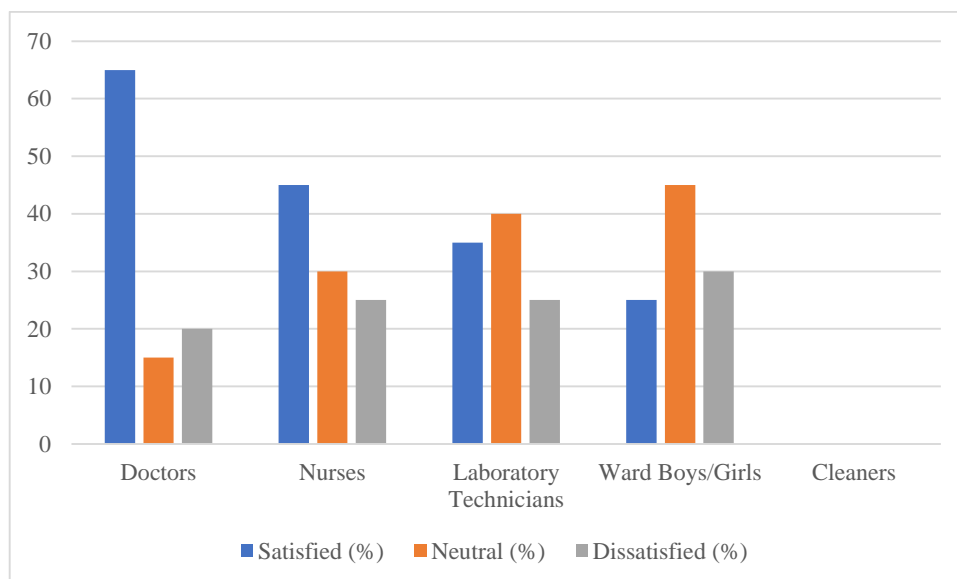
#### 4.2. Job Satisfaction Among Healthcare Workers

The effect of the COVID-19 pandemic on job satisfaction among Jorhat Medical College healthcare staff was very different in various categories of personnel. Doctors and nurses, though under huge pressure and in difficult working conditions, showed relatively higher job satisfaction. Most of them felt satisfied with their contributions during a crisis situation globally, which strengthened their professional commitment and sense of belonging. But the psychological and physical cost of excessive working hours, virus exposure, and emotional distress of losing patients were factors leading to dissatisfaction among some healthcare providers. Nurses, in particular, experienced high levels of stress due to their critical role in patient care, often working under extreme conditions with inadequate rest. On the other hand,

support staff such as ward boys, cleaners, and laboratory technicians reported significantly lower job satisfaction. Factors such as low wages, lack of recognition, poor working conditions, and the heightened risk of infection without adequate medical training exacerbated their dissatisfaction. Limited access to protective equipment, excessive workloads, and insufficient mental health support further contributed to their sense of frustration and emotional exhaustion. Many support staff members also expressed concerns about job insecurity and inadequate institutional support. Overall, although a few healthcare workers derived motivation from their pivotal roles, most were beset by severe challenges that undermined their job satisfaction, calling for immediate interventions at the workplace, policy reforms, and psychological support systems to maximize well-being and job satisfaction in healthcare facilities.

**Table 2: Presents Job Satisfaction Levels Among Different Categories Of Healthcare Workers**

Healthcare Worker Category	Satisfied (%)	Neutral (%)	Dissatisfied (%)
Doctors	65	15	20
Nurses	45	30	25
Laboratory Technicians	35	40	25
Ward Boys/Girls	25	45	30
Cleaners			



**Figure 2: Job Satisfaction Levels**

### 4.3.Comparative Analysis

Secondary data analysis emphasizes striking disparities in job satisfaction and psychological distress between different types of healthcare workers in Jorhat Medical College during the COVID-19 period. The job satisfaction among doctors and nurses was comparatively high when compared with supporting staff like ward boys/girls and cleaners. Such discrepancies are due to variables like formal training, first-hand contact with patient care, and a strong sense of motivation and accountability to their work. On the contrary, support personnel like cleaners and ward staff found themselves more dissatisfied because they had less freedom at work, received less praise, and came under greater threats without the medics' abilities to handle things effectively. Among all categories, psychological distress was highest among support staff and laboratory technicians, primarily because of their high-risk exposure and lack of adequate medical training to deal with the crisis. Furthermore, extended work in COVID-19 duties resulted in high emotional exhaustion and burnout in all categories, with increased levels

of distress among those with extended working hours and weaker institutional support systems. These results highlight the necessity of special interventions, including mental health programs, enhanced resource allocation, and enhanced working conditions, to facilitate healthcare workers during future public health crises.

### **Analysis**

The results of the present study concur with earlier research that showed frontline healthcare professionals experienced severe psychological distress during the COVID-19 pandemic. Frontline healthcare professionals who were in contact with COVID-19 patients reported long-term stress resulting from overwork, long duty hours, and continuous infection fear. The psychological workload was heavier on support staff like cleaners and ward attendants who did not receive direct medical training but were yet exposed to risk environments. Stress levels were also reported by laboratory technicians because their work involved the collection and analysis of samples and put them directly in contact with potentially infectious substances.

In addition, levels of job satisfaction differed across various categories of health workers. Physicians and nurses, even with enormous workloads, exhibited relatively greater satisfaction than support staff. This may be explained by their direct involvement in patient care, professional prestige, and access to organizational support mechanisms. Conversely, non-clinical employees such as cleaners and ward boys/girls indicated low job satisfaction caused by no appreciation, poor protective measures, and uncertain professional development prospects. These differences point towards the need to formulate all-encompassing policies that address the welfare of all medical practitioners, not only medical doctors.

The findings highlight the imperative for institutional measures to meet the mental health needs of healthcare professionals. Introducing systematic mental health care programs, including counseling and peer support groups, may ease stress and emotional burnout. Redistributing workload and maintaining sufficient staffing could minimize burnout and enhance job satisfaction. Better training of support staff in infection control and mental health coping mechanisms would also be useful.

### **5. CONCLUSION**

The research identifies the immense psychological distress and differential job satisfaction among medical professionals at Jorhat Medical College during the COVID-19 pandemic. The secondary data analysis identifies that extended COVID-19 responsibilities led to elevated stress levels, especially among support staff and lab technicians, while doctors and nurses had comparatively higher job satisfaction. Major stressors were overwork, emotional burden, and infection fear. The results highlight the pressing necessity of institutional support structures, including mental health interventions and better working conditions, to maximize job satisfaction and minimize psychological distress among healthcare workers. It is imperative to tackle these issues to ensure an efficient and resilient healthcare workforce during future public health emergencies.

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