

# An Analytical Study of Stress in Doctors Working in MCGM Hospitals in Mumbai

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### **ABSTRACT**

Affordable mass services for is the primary goal of Indian government. The city of Mumbai being the financial capital of India is densely populated city in India. Mumbai government hospitals provide health care facilities for the common man in Mumbai. These hospitals are called MCGM hospitals. Doctor is a life saver angel for patients. Doctor's occupation is incredibly challenging. The major challenge is availability of number of hospitals, and number of patients to be treated. This challenging profession leads to stress among doctors. This paper discusses concept of stress. It further analyses stress among doctors in MCGM hospitals with the help of focused group discussions. Finally, it suggests strategies to manage stress among MCGM doctors.

**Keywords :** Stress, Doctor, health care, MCGM hospital

### **INTRODUCTION**

Stress is a common human feeling and an unavoidable part of human lives. It is a standard reaction to difficult circumstances or an uncertain situation. It turns into a problem when situational demands exceed an individual's adaptation ability. Stress management is the initiative of various efforts to control and reduce the tension that occurs in stressful situations. Stress management involves making emotional and physical changes. Medical profession accounts for the health of the people. If the profession is unhealthy, the question will be raised on the quality of the treatments offered to the people and its pattern. Thus stress can be termed as the physiological and psychological stage where individual cannot cope up with the demands due to the limitations of resources and mental state.

The presence of stress is perceived on the basis of its intensity and impact on the performance of an employee in the organization. Today, numerous circumstances or occasions that don't require a physical reaction trigger stress reaction, including social, intellectual and recreational ones. These external circumstances or occasions are called stressors. Stress is not the outside pressure; it is a human reaction to the surroundings.

Stress is not bad but excessive stress always leads to critical problems for the organizations in terms of burnouts, accidents, suicides, lack of performance and dehumanization at work place. Stress can be caused by external factors i.e. environmental, internal factors i.e. personal and on professional levels.

Stress is a resultant of the happenings or settings of the workplace. Following are the workplace factors (job stressors) which can result in stress:

- Occupational demands (work overload, role ambiguity, lack of task control)

- Administrative factors (biased management practices, poor interpersonal relations)
- Financial factors (unconvincing work – payment balance)
- Conflicting work – life balance
- Training and career growth issues (lack of opportunity for promotion or growth)
- Poor organizational culture (contradictory communication styles, absence of managerial commitments to core values)

Stressors may vary in different health care occupations and also within the occupation, depending on the nature of the job.

The stress lists both negative as well as positive changes that elicit stress. This can include a major events in one's life like marriage, birth or death, firing from job, increase work pressure etc.

### **DEFINITION OF STRESS**

Stress is the physical response of the human body that equips a person to meet life's difficult situations and helps to bounce back. This "fight or flight" reaction is acquired from the "cave man" who needed to battle wild mammoths or escape from physical dangers to survive.

According to Jit, S. Chandan, (1995), "Stress is a state of mind which reflects certain biochemical reactions in the human body and is projected by a sense of anxiety, tension and depression and is caused by such demands by the environmental forces or internal factors that cannot be met by the resources available to the person." Whereas according to Shahsavarani, et al, (2015), "Any effect of change in surrounding environment on living being which results in disruption of homeostasis (internal balance) of that living being is called stress."

### **REVIEW OF LITERATURE**

The concept of stress and job stress, particularly, has targeted everyone and so has gained substantial attention. Stress today is a part of life, and so it is unavoidable (Nayak, 2008). According to researcher Olson, "a state that is caused due to real or apparent demands which requires adjustment behaviour is called stress" (Olson et al., 1989). In common, terms stress can be described as a psychological and biological process experienced by an individual while dealing with the surrounding intimidations. Occupational stress is the psychological and biological implications of negative connections amid workplace demands and one's skills, knowledge, or expectations (Malek M. et. al., 2011).

N K Saini et al (2010) studied stress among resident doctors of the medical colleges of Delhi. It was found that the most important sources of stress for the residents were lack of sleep, long working hours, work overload, financial conditions and academic work pressure. Whereas the factors that were associated with the stress included marital status, presence of children, academic year, type of specialization and department. It was suggested to undertake coping mechanisms

so as to handle the various stressors and its sources. The stress level seems to be directly proportional to their workload. Some of the identified stressors were Work condition, Sleep deprivation, Role overload, Relation with peers and night shifts. However if coping mechanisms are provided to the junior doctors, they can be in a better position to handle stress (Jayant D Deshpande et al, 2013). The paper by Dola Saha et al (2011), assesses job stress among healthcare staff of a super specialty hospital. It was noted that low income, work load, insufficient resources and emotional exhaustion are the main sources of stress. It was necessary to implement stress management strategies in order to enhance the work performance and job satisfaction. Irfana Rashid et al (2015) studied the effect demographics and work environment can have on the occupational stress and coping strategies of doctors working in government hospitals of India. It was noted in the study that female doctors were comparatively more stressed than the male doctors. Besides, doctors without proper working conditions and infrastructure experienced more stress. For the doctors, the quantum of stress and work load also differs as per their specialization and experience. The results majorly showed the doctors opting for defensive copying mechanisms rather than imperceptive styles.

In another study led by Hussain & Singh (2002), the role stress was studied among 150 doctors, who were specialists as Surgeons, Gynaecologists and Ophthalmologists from Aligarh city's nursing homes and private hospitals. The result of this study showed that the surgeons or the gynaecologists scored considerably high than Ophthalmologists on identified stress effects. Thus, they concluded that the surgery or operation increases the level of stress for gynaecologists and surgeons both. Sandeep Grover et al (2020) studied the problems both psychological and burnout that the medical professionals face. The respondents worked at a tertiary hospital in North India. Most common stressors that were identified were long working hours, interpersonal interactions and doctor-patient relationship. These resulted in stress, burnout and depression among the doctors. The study by Mrs. B. Prasila Leelavathy Pappathy et al, (2016) was done with the aim to manage the effects of occupational stress among doctors. In this study, doctors working in government, private and other health services are taken as population. It was observed that doctors across all the hospitals experienced occupational stress. The stress varied with factors such as marital status, presence of children, experience, age of the doctors, income and financial conditions and family support system. It was concluded that the hospitals need to address the issue of occupational stress and provide the necessary support for the same. While studying the stress among the doctors in India in the government hospitals it is observed by Irfana Baba (2012) that the stress among doctors is very high in the government hospitals. The factors of Inter Role Distance (IRD) stressor and resource inadequacy contribute more to the Organizational Role Stress. One of the major conclusions of the paper is that male doctors feel more stressful as compared to the female doctors. The stress is also directly proportional to the number of years of service in the organization. The paper suggests few facts in the government hospitals i.e. overload among senior doctors, at the same time doctors within the age band of 22-35 scored higher on stress scores as they cannot initially balance

the organizational and non-organizational roles. They report twice in a week the night shift. They are at the learning phase and hence to gain excellence creates more stress for them.

Stress in health care professionals can stem from everyday interactions with patients having critical health issues (Maslach C, 1996) and tense interactions with associates. A lot of research is done in the performance of government/public hospitals, their working conditions and its effect on the working staff (doctors, nurses, etc.). Numerous problems were reported including work-load, inadequate resources, long waiting hours, and patient disappointment. All these factors create stress among doctors (Agdelen, Ersoz, & Sarp, 2010). High-stress levels affect doctors' mental and physical state, personal development, life quality, and goal achievement (Kaur et al., 2009). These working conditions also result in the frequent change of jobs, absenteeism, conflict among colleagues, errors and low quality work (Khawaja et al, 2004). The common work stressor for public hospital doctors is an emergency call during the surgery time, night calls or night shifts, time pressure from management and patients, day & night working, dealing with difficult patients, frustrating patient criticisms, disruption in family life, unrealistically high expectations and 24X7 responsibilities (French et al., 2001).

Doctor's involvement in teams, participation during rounds and meetings, palliative work, field trips, counselling to patients and their families, along with social services causes rise in levels of their stress. Conditions, like, poor physical working situations, overcrowding, noise, absence of good ventilation, air pollution, decreased lighting, poor ergonomics and irregular hours are found to be the contributory factors of stress.

## **THEORIES OF STRESS**

Various theories on stress and the related concepts have been proposed over the years.

- **Fight or Flight Theory**

Walter Cannon proposed the fight or flight theory in 1915. It says that the changes that happen in the nervous system especially the brain stimulate the body. The said mobilisation of energy results in a reaction. As a result the body will either fight and overcome the situation or run away from the situation.

- **General Adaptation Syndrome Theory**

Hans Selye in 1936 developed the theory of General Adaptation Syndrome. The said theory revolved around body's reaction divided in three stages. The alarm stage where the body is alerted by the presence of stress, secondly the adaptation stage where the body tries to adapt and adjust to stress and the last stage of exhaustion where the body loses its capacity to fight. It was observed by Hans that the body's reaction is due to immediate activation of the nervous system when subjected to stress. As a result, the body has the potential to control stress and adapt accordingly. However continuous exposure to stress can cause the energy to decrease or reduce significantly.

- **Meta-Model Facet of Occupational Stress Theory**

Beehr and John Newman in 1978 developed the meta-model facet of occupational stress. This theory focussed on the workplace stress. The major facets being the environmental facets and human consequences facets. The first facet was related to the workplace stress while the latter was related to individual strain. The presence of both these factors is important to access workplace stress. It depended on personal facets, organizational facets and time facets.

- **Cognitive Appraisal Theory**

Lazarus and Folkman developed the theory of cognitive appraisal in the year 1984. This theory postulated that throughout the process of stress both the individual and environmental factors play an important role. At the centre of stress are the concepts of coping and appraisal. In the concept of appraisal, the individual assess his or her importance to the workplace and also determines individual wellbeing. Whereas the concept of coping revolves around the individual initiative to think and act so as to overcome the stress and manage the demands of the job. Thus it ascertains that an individual is said to be stressed when an individual is unable to cope with the over exceeding job demands and is not able to arbitrate stress.

- **Bio Psychosocial Model Of Stress Theory**

Bernard and Krupat in 1994 developed the bio psychosocial model of stress theory. The said model helped in assessing stress affecting biological, psychological and social systems. The model consisted of internal components, external components and the linkages between both these components. The external components comprised of the environmental factors that instigate stress like role strain, whereas the internal components comprised of the body's reaction to stress like psychological and neurological. The linkages included the transaction between the environment and individual. This theory explained in detail each component and the coping regarding all the systems.

- **Cognitive Activation Theory of Stress**

Ursin and Eriksen in 2004 developed the cognitive activation theory of stress. It involved formal and systemic analysis of psychological and physiological consequences of stress. This theory illustrated the significance between the coping of stress and the related challenges. IT mainly focussed on behaviour, physiology, cognitive and subjective experience domains. The concept of stress dampening mechanism, expectancy, coping mechanisms and potential path physiology of stress are manifested in the theory.

## **MCGM hospitals in Mumbai**

The health care services in Mumbai are met through dispensaries and hospitals run by the Municipal Corporation of Greater Mumbai (MCGM), the private segment and the Maharashtra state. The MCGM is a civic body whose representatives the public of the city chooses. Mumbai has a decent general public-health foundation. The MCGM consists of the network of 4 medical college, 1 dental college, 16 municipal general Hospitals, 6 specialty Hospitals, 175 municipal dispensaries, 29 maternity homes, and 183 health

posts. The complex framework of MCGM is planned and designed to achieve the city's inhabitants through primitive, preventive, and curative care through established hospitals and dispensaries spread everywhere throughout the city catering the medical needs of the general population.

## **RESEARCH METHODOLOGY**

This paper basically employs relevant literature reviews through published researched journal articles, books, conference proceedings, unpublished thesis, and monographs. The literature review examined and synthesized underlying subject aimed at identifying issues relating to qualitative research.

## **OBJECTIVES OF THE RESEARCH**

1. To understand concept of stress.
2. To find out working culture of MCGM hospitals.
3. To know the factors affecting on stress of doctors in MCGM hospitals.
4. To suggest stress management strategies to MCGM doctors.

## **RESEARCH DESIGN**

Qualitative focus group study is used.

Focus group discussions were held undertaken with doctors in MCGM hospitals. Focus groups were recorded and transcribed. Five focus groups were conducted with a total of 25 practicing doctors who worked in MCGM hospitals. Each group consisted of three to five doctors. Criteria for effective FGDs are summarized as a range of relevant topics, specificity and depth to direct the discussions towards the participants' experiences and the interaction of different experiences..

## **DISCUSSION**

The focus group discussions carried out with the doctors ascertained a definite presence of stress among them. A few stressors that were pivotal included working conditions, long duty hours, stipend/income received and managing the work-life balance.

Physical infrastructure and working conditions play a crucial role to motivate employees and help them serve better especially when the doctors spend a considerable time doing their duty. A decent infrastructure facility and sound working conditions can help increase the productivity of the doctors helping them reduce stress. The physical infrastructure like lack of proper ventilated rooms, spacious hostel rooms, better canteen facilities, Air-conditioning, limited resources are a few examples of the inadequate infrastructure facilities that has an impact on the working of the doctors.

The only source of income for the doctors is the stipend that they receive from the hospital. The over-time and regular work hours per day do not leave them time for private practice or consultancy. As a result the doctors struggle hard to cope with the routine expenses. The doctors need to adapt and adjust to the changes and challenges of living in a major metro city like Mumbai.

The doctors work for long work hours and over-time work hours ending up on duty more than 14 hours per day. The very nature of their job demands them to be available 24 hours giving them less or no time for relaxation and sleep. For a normal human being to be healthy, 7 to 8 hours of undisturbed sleep is very important. Most of the said doctors work for long hours every day. Sometimes when on-call they end up spending almost 20 hours at their work place. This can result in a severe impact on the health of the doctors as their sleeping and eating patterns completely change resulting in tiredness and fatigue. Many a times the very nature of work, long work hours, erratic sleeping and eating patterns, result in fatigue and impacts the health of the doctors. The psychological impact of the work schedules results in the doctors feeling tired and vary without reason. The long hours of doctors at the work place coupled by the over-time work hours, leaves them very little time for physical activity and exercise. The doctors may then find it difficult to overcome the physical exhaustion as jogging or other exercises may demand more energy from the body. However, it can positively improve physical and mental fitness of individuals if done in the right manner.

Some of the said doctors have additional personal responsibilities (presence of spouse, children) and need to support the family back home. This leaves them with little or no room for personal commitments. They are most often unable to balance their professional and personal commitments. The stress that the doctor's experience can cause them physical and emotional harm thereby affecting their decision making and increasing the chances of them making mistakes. Most of the doctors miss their social life. Because of their hectic work schedule and their hostel stay away from home, they miss the emotional and social connect with their near and dear ones. This adds to the stress.

Besides, all the doctors follow the necessary safety protocols required while treating the patients. However, the fear of themselves being susceptible to the infections can cause a lot of stress for the doctors. This is owing to the possibility of negligence to follow safety protocols under work pressure.

## **CONCLUSION AND SUGGESTIONS**

Stress has a powerful impact on all the individuals. So much so that in today's scenario its slowly becoming a "worldwide epidemic". Doctors especially with their profession with the ever increasing number of patients need to actually increase their awareness of stress. Besides being able to enjoy some form of activity or the other apart from the routine job can really prove to be a stress buster for them. It is however not the responsibility of the doctors alone to beat stress but the duty of the HR department of the hospitals to function in a thoroughly professional manner.

A doctor's role in treating patients is important, but the time he spends with patients is very less compared to others. Yet, it is always the doctor who is treated as demi-god both by patients and management, forgetting others who are also serving the patient. A 360-degree change in HR approach, so that the support staff is also given the equal importance they deserve is the need of the hour. Hence the following suggestions and measures can be adopted by the doctors to help them cope with stress:

**1) Relaxation:** With constant physical activity there is bound to be fatigue and stress in the life of doctors. Hence any form of relaxation can prove to be extremely beneficial for them. This can include a 10-15 minutes nap in between patients, sitting quietly all alone for at least 10 minutes a day etc. Studies show that a simple form of yoga like “the pranayam” done at any time of the day but with complete devotion and dedication can be a powerful stress buster.

**2) Counselling:** Death, tragedy, accidents, pain, suffering etc are synonymous with the life of doctors. Talk therapy can renew their spirits. It can include a team of specialists meeting with the doctors regularly to talk about the stress and provide emotional support.

**3) Activities:** The research done shows the doctors are overworked and hence stressed out. At such times, using one or more of the many activities or past times, such as guided imagery, listening to music, reading, dancing, watching movies, watching television etc. can actually prove soothing for them. The emphasis here should not be on the type of activity chosen but the fact that the doctors seriously need to indulge themselves in some form of activity or the other. The most important parameter here remains that of pleasure.

**4) Balanced Diet:** Doctors often neglect their own health while treating their patients and thus often fall prey to diseases themselves. Besides, doctors have to attend to various casualties. As a result they fail to have routine meals on time resulting in increase stress and acidity levels. Thereby eating an appropriate amount and healthy food at a reasonable schedule and a well-balanced diet is a must for all the doctors. It shall help them to maintain the energy levels and relieve them of stress.

**5) Innovative HR practices:** HR in healthcare is sketchy and hence it is important to actually implement a thoroughly professional HR department in the hospitals. It will help decrease the stress levels automatically as the workplace will be increasingly people-centric. The innovative HR practices that could be implemented are as follows:

- 1) Celebration of birthdays of all employees by the department heads.
- 2) Presentations by employees after attending external training programmes for knowledge of other employees.
- 3) Group discussions.
- 4) Role plays.
- 5) Picnics/Outdoors
- 6) Recreational classes for doctors and administrative staff.
- 7) Training programmes.

For proper implementation of all these activities, there could be a large and spacious recreational room especially designed to cater to the needs of the doctors. Here, it is necessary to view these techniques not from the lucrative point of view but as a way of relieving stress of the doctors and diverting their minds from the routine monotony of their jobs.

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