

FREQUENCY OF STRESS LEVEL AMONG FEMALE DOCTORS IN A PUBLIC SECTOR HOSPITAL OF PESHAWAR

Ambreen Afridi, Romana Ayub, Hayat Muhammad Khan, Umar Ayub, Rubina Gul

Khyber Medical College

ABSTRACT

Objective: To assess the prevalence of stress in lady doctors working in Khyber Teaching Hospital Peshawar.

Material and Methods: This cross-sectional descriptive study with a sample size of 130 selected through simple random sampling technique in six month duration at Khyber teaching hospital Peshawar.

Results: Of the total 130 subjects, 13 (10 %) were normal, 90 (69 %) had moderate and 27 (21 %) had severe stress. Out of the total, 21 (16 %) had duty hours of < 10 hours/day and 109 (84 %) had duty hours > 10 hours/day. Prevalence of stress was more in married (100/130) than unmarried doctors. Depression was recorded in 88 subjects having dependents more than three and 28 had having dependents less than three in their families.

Key words: Stress, Work place tension, Status of stress

INTRODUCTION

Stress is defined by Richard S. Lazarus as “the condition or feeling experienced when a person perceives that demands exceed the personal and social resources the individual is able to mobilize”¹.

Stress is a condition that can affects all people of all age group. Stress is an acute threat to the homeostasis of an organism. It can be real (physical) or perceived (psychological) and posed by events which can be from inside or outside environment². Since stress is perceived in nature, so it is determined by mental intellect which determine the source of stress³. Job stress is subjective cognition because different people working in the same environment perceive different levels of job stress⁴. The hospital doctors in the workplace suffer from too many stressors⁵. The American Institute of Stress reports that between 75% to 90% of visits to doctors are related to stress. As many as 400 physicians commit suicide per year. However, the suicide rate in female physicians is 2.5 to 4 times higher than that of general population⁶. Residency and training programs can be extremely challenging⁷. In Pakistan employees experience stress because of work load, technological

problems at work, long working hours and inadequate salary⁸. According to a study conducted in Lahore, junior doctors are unhappy because of low pay (73%), no positive feedback (70%), job insecurity (64%) and poor mutual support (47%)⁹. A high level of stress may have negative effect on cognitive functioning and learning¹⁰. The aim of this study is to determined the frequency of stress levels among female doctors working in a public sector hospital.

METHODS AND MATERIALS

It was a cross sectional descriptive study conducted at Khyber Teaching Hospital Peshawar. Duration of the study was six months. Total 130 female doctors were included in the study using WHO calculator for sample size calculation. Simple random sampling technique was used for selection of subjects using sampling frame from the administration of Khyber teaching hospital. Variables studied were age, monthly income level, marital status and number of dependents in the family. MBBS qualified female doctors registered with PMDC from KTH that have been practicing medicine minimum for the past two years, Postgraduate trainees and medical officers, doctors working for more than 5 hours /day and age between 27 – 55 years were included in the study. Subjects were divided into 3 age groups I < 30 years, group II 31-40 years, group III > 41 years. Female doctors who had recently left the job or at least within last two years and those who retired

Correspondence:

Dr. Ambreen Afridi

Demonstrator

Community Medicine, Khyber Medical College Peshawar

Cell: 0344-9107047

Email address: amberafridi786@gmail.com

from duties were excluded from the study.

RESULTS

Out of 130 subjects majority were in age group II. Detail is given in Table-1. Out of total subjects 103 were married while 27 were unmarried. Socio-ecomic status was such that 32 (25 %) doctors had monthly saving of < 20000, 85 (65 %) had 20000 – 40000 and 13 (10 %) had > 40000. Out of the total, 21 (16 %) had duty hours per day were < 10 hours and 109 (84 %) had duty hours > 10 hours/ day. Another variable which was studied with respect to stress was the number of dependents in their families. Of the total 130, 42 (32 %) had < 3 and 88 (68 %) had > 3 dependents in their families. Stress level calculation shows that 13 (10 %) were normal, 90 (69 %) had moderate and 27 (21 %) had severe stress. Details of relationship of stress with different factors is given in Table 2 – 5.

DISCUSSION

Stress is a common mental disorder that affects all people of all age group. According to a report of The American Institute, between 75% to 90% of visits to doctors are related to stress. The suicide rate for

Table-1: Group age

Group	n	%
I	26	20
II	85	65
II	19	15

Table No-2. Status of stress with respect to age groups (n=130)

Status of Stress	n & %	< 30	31 - 40	41 - 50	Total
Normal	13 (10 %)	13	0	0	13
Moderate	90 (69 %)	13	77	0	90
Severe	27 (21 %)	0	08	19	27
Total	130 (100 %)				130

Chi square test was applied in which P value was 0.004

Table No-3. Status of stress with respect to number of dependents (n=130)

Status of Stress	n & %	< 03	> 03	Total
Normal	13 (10 %)	13	0	13
Moderate	90 (69 %)	29	61	90
Severe	27 (21 %)	0	27	27
Total	130 (100 %)			130

Chi square test was applied in which P value was 0.002

Table No-4. Status of stress with respect to marital status (n=130)

Status of Stress	n & %	unmar-ried	married 40	Total
Normal	13 (10 %)	10	03	13
Moderate	90 (69 %)	17	73	90
Severe	27 (21 %)	0	27	27
Total	130 (100 %)			130

Chi square test was applied in which P value was 0.003

Table No-5. Status of stress with respect to monthly in-come (n=130)

Status of Stress	n & %	< 20000	20000 - 40000	>40000	Total
Normal	13 (10 %)	0	0	13	13
Moderate	90 (69 %)	12	78	0	90
Severe	27 (21 %)	20	07	0	27
Total	130 (100 %)				130

Chi square test was applied in which P value was 0.004

female physicians is 2.5 to 4 times higher than that of general population¹¹. In Pakistan several factors are involved in stress disorder; common risk factors are high work load, technological problems at work, long working duration and inadequate income level. Same factors are faced by lady doctors working in public sector hospitals. In our study stress prevalence was high in married doctors, those having duty hours more than 10 hours/day, having dependents more than three in their families and income level less than 30000/month. In spite of the overall impression of perception of doctors being unhappy to be true, our respondents when asked directly about their own level of unhappiness gave almost equivocal reply (43% dissatisfied vs. 42% satisfied) This may be because of the fact argued in many studies reporting similar results that although no doubt, many doctors are discontented by present scenario in the country and healthcare but picture is far from simple with most doctors still feeling satisfied at an individual level¹¹. In addition issues linked to poor work place atmosphere i.e. no positive feedback for good performance, poor team work, culture of blame also are linked with increase stress levels in our respondents in accordance with previous study¹². Work atmosphere is not convenient for the females as highlighted by in a study¹³. Furthermore medical profession is poor in giving mutual support and teamwork skills are not encouraged much thus poor support leads to inability to cope with stress¹⁴. Relationship between doctors, patients and community is also changing,

traditional roles of authoritative doctors are changing with patients now being considered partners in care, which is unsettling for some professionals¹⁵. Increased stress leads to increased risk of medical errors and high costs to healthcare delivery system by increase in absenteeism and poor quality of care provided to patients¹⁶. High proportion of doctors (55%) intending to leave Pakistan is likely to be a cause of concern for the health services but reflects similar wider societal trends. Stress at workplace, economic instability, greater financial demands, and security issues being some of the factors responsible for this trend of brain drain from Pakistan^{17,18}. Resident job satisfaction is a significant factor in a residency programme's ability to recruit effectively and produce competent physicians. Given that residency is so time-consuming, a resident's satisfaction with the training programme will influence the resident's quality of relationships (within and outside of the residency programme), quality of patient care, the learning atmosphere, and residency enrolment^{19,20}. Residents under stress reported more working hours on average compared to the residents who were not under stress. This finding was consistent with studies previously done in Pakistan²¹. Although both hospitals in our study defined 80 hours as the upper limit of the working hours, many residents mainly in Surgery and allied specialties were working more hours than the defined limits.

CONCLUSIONS

Like rest of the world, prevalence of stress among lady Doctors working in Khyber Teaching Hospital Peshawar is very high. Low monthly income, high work load, high number of dependents in family, unmarried marital status and increased age are the main factors responsible for stress.

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