How COVID-19 Affected Burnout and Job Satisfaction Levels Among the HealthcareProvider in Jordanian Hospitals

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Abstract

Objective: This study aims to establish how Covid-19 affected the burnout and job satisfaction levels among the health care Provider in Jordan hospitals.

Methods The online survey questionnaire was distributed to 160 nurses, doctors, medics, and specialists, and only 152 responses were filed in the Google form from healthcare workers from Jordan hospitals. The survey questions wanted answers related toestablishing job satisfaction and burnout levels during the COVID-19 pandemic. The questionnaire also contained questions investigating the nurses' and doctors' demographic, work-related variables, and personal experiences. Additionally, the basic needs at the workplace were investigated, and the world Health Organization-5 well-being index was established through the questionnaires. Different statistics measurements were used. Descriptive statistics were used to summarize both the background information about the healthcare providers and burnout levels.

Results from the 152 healthcare professionals filed their responses, 32.6% were males, and the rest were females. Approximately48%.13% and 16% were nurses, doctors, and pharmacists. Burnout was caused by exhaustion, depression, anxiety, and overtime working time. 7% of the nurses were satisfied with the work, while 72.5% were not satisfied. Approximately 24% of the male healthcare providers demonstrated resilience in employment, while 5% of the female healthcare professionals demonstrated burnout and total withdrawal due to the scourging effects of covid-19 (Abujilban et al., 2021). The healthcare providers that received psychological support from their families seemed strong and suffered lower burnout levels. The fear of infection created anxiety that led to stress, and finally, the burnout levels shot high.

Conclusions Covid -19 led to increased levels of burnout and lack of job satisfaction. The hospitals in Jordan were not prepared, and the fear of nurses and doctors getting infected created more anxiety. The healthcare motivation and energy to work reduced to a bare minimum.

Keywords: covid-19, healthcare providers, burnout, satisfaction, hospital, and Jordan

Introduction

Covid -19 has created the worst healthcare crisis in the whole world. The pandemic has infected people in their millions and killed people in their hundreds. According to the world health organization (WHO), the covid-19 has affected many nurses and doctors on the frontline in fighting this deadly virus (Hamdan et al., 2020). Like any other country in the world, Jordan was hard hit by the pandemic. Not only the healthcare sector was affected, but also the economy went down. Most countries implemented the total lockdown to slow the infection rate, while others went for the partial lockdown (Alrawashdeh et al., 2020). In Africa, by July 2020, over 11 000 healthcare workers had been infected by covid-19. The supply of PPE's was inadequate, and most hospitals could not take in the covid-19 patient that surged daily. The number of covid-19 patients surpassed the number of available nurses, and therefore the available nurses and doctors were overwhelmed.

Burnout was caused by the rapid spread and, coupled with lack of proper preparation, contributed significantly to the increase in stress levels among the health care providers. The healthcare workers were fatigued due to too much work. Work-related stress tends to manifest primarily in the emotional, psychological and cognitive well of the healthcare provider (Bolatov et al., 2020). Healthcare workers get worked up, and feelings of depersonalization come to play. It is important to note that health care providers suffered exhaustion, and most of them were victims of mental health issues.

Burnout leads to low productivity levels, and the quality of services rendered is compromised. There is a general decrease in job satisfaction and reduced commitment levels. Most patients suffer at the hands of stressed nurses, with most of them committing severe medical errors (Soto-Rubio et al., 2020). Stress and burnout have a close

relationship with poor health. Most nurses lost their lives during the pandemic due to burnout that became toxic and transformed into other illnesses. Since the covid-19 was declared a global pandemic, the healthcare frontline liners have greatly suffered. A study conducted in China showed that prolonged use of Personal protective equipment leads to other infections. Some defensives are not well ventilated to allow the free flow of oxygen to the body system (Naser et al., 2020). The qualitative study in India demonstrated that nurses with social support performed better and exhibited positive psychological well-being.

In Jordan, the healthcare system was overwhelmed, and most healthcare providers could not cope with the ballooning number of the covid-19 patients. Additionally, together with other government agencies, the health ministry put up a spirited effort to ensure the infection levels are reduced. On the economy, the Jordan government closed the country. By December 2020, the total number of infections in Jordan was 265,024 (Algunmeeyn et al., 2020). Due to good collaboration between the ministry of health and the private sector. Although the healthcare system in Jordan is well advanced, the covid-19 affected it because the capacity of the Covid 19 patients was overwhelming. The experts have predicted a severe decline in many Jordan young people jobs that might affect the country's economic crisis (Amanullah & Ramesh., 2020). The fear of the various infection spreading to the large population of the refugees in Jordan. This would have caused another disaster. Although the economy is slowly picking up, the infections from covid-19 are continuing to spread. The national GDP is estimated to have dropped by about 21% during the lockdown period. The output in food production is estimated to have fallen, and the cost of essential commodities has gone high. The cost of living is high for everybody.

The government of Jordan launched serious public awareness mobilizations and sensitization seminars to educate the public on how to treat and test covid-19. Jordan's healthcare was significantly affected. The nursesgot infected, and some were taken to quarantine. The number that was available work had to serve for long hours and got overwhelmed. The Jordan ministry of health indicated that about 1% of the healthcare providers no longer report for work due to fear of contracting the disease (Restauri & Sheridan., 2020). The delay of the protective gear created more worry among the healthcare providers that used to handle covid-19 patients. Healthcare providers are not able to find job satisfaction in the work environment because the pressure is too.

Methodology

To come up with meaningful data on burnout and satisfaction levels among the Jordanian healthcare workers, the research used both quantitative and qualitative methods to achieve data that would communicate the actual situation. An online questionnaire was developed with both qualitative strand and quantitative strand. The questions in the quantitative strand were structured online surveys, while the questions on the qualitative strand were semi-structured interviews through telephone. The quantitative data were analyzed by use of SPSS software. The online survey questionnaires were sent to four private and three government hospitals through Google forms between June 20th and 4th July 2021. The link was shared with hospital administrators, who shared the same connection with the nurses, physicians, and consultants in their respective healthcare facilities. The online questionnaire was organized into three sections. The first section had ten questions which were distributed as follows. Eight questions on socio-demographic highlights that included: gender, age, marital status, number of households, average monthly salary. On the professional aspect, the questions had job status (as either full-time or part-time), the professional classification (resident nurse, specialist, general practitioner). The number of hours working per week and the duration of stay in the facility. Other questions were covid-19 related, including whether vaccinated or not, have tested for covid-19 or have access to personal protection equipment (PPE) and any other Covid-19 corresponding token or reward apart from salary for motivation.

The second section of the questionnaire targeted the job satisfaction and burnout levels among healthcare workers. 10- Maslach's item from Burnout Measures (BMS) was established because it is simple to use. The participants were to report the extent to which they feel their job and working environment make them: depressed, tired, trapped, difficulties in sleeping, disappointed, hopeless, exhausted, worthless, and not willing to do the work. The responses were on a Likert scale (from 1=never to 7=always). The third section of the qualitative data collection targeted job satisfaction aspects. It was conducted through a semi-structured interview with a guide to follow to ensure consistency. Due to complexities that existed coupled with difficulty in conducting face-to-face interviews due to the COVID-19 pandemic, all the interviews were conducted through telephone. The conceptual framework was established based on the Job Demand Theory and Motivation-Hygiene Theory to confirm the satisfaction level among the healthcare professionals. Hygiene factors are significant in the establishment of motivation at the workplace. When the work environment is not clean, the rate of job dissatisfaction is very high. Motivation factors propel an individual to maximize their potential and improve the overall work output.

Data Analysis

The completed online questionnaires were obtained from the Google forms and entered into SPSS software for data analysis. Both descriptive and summary statistics were performed on the numerical data. Frequencies, percentages,

means, standard deviations, median, and other descriptive statistics were analyzed to predict the association between burnout and COVID-19. The assumptions for linear regression were looked into and confirmed. The responses were 48 from as recorded in the Google form. However, responses from 8 individuals were not used because they lacked some immediate socio-demographic answers.

Regarding the socio-demographic profile of various healthcare professionals, the mean age was 48.45, and the standard deviation was 2.074. Most of the physicians were male within the age range of 34-41years. The number of married healthcare workers was 28, and the average income category of all the physician's 730-1300 Jordan Dinars. Most of the doctors were full time 58%.

Table1 *socio-Demographic profile of all the healthcare workers that took part in filing the online Google form questionnaire. The total number of participants is 40*

	Gender	Marital Status	Age	Job Status	Household	Salary in Jordan Dinars	Hours worked per week	COVID-19 Status	Specialist
Valid	152	152	152	152	152	152	152	152	152
Missing	1	1	1	1	1	1	1	1	1
Mean	1.50	1.35	48.45	1.50	4.90	730.32	32.80	1.42	1.54
Std. Error of Mean	.080	.076	2.079	.080	.267	57.902	1.834	.079	.079
Median	1.50	1.00	45.00	1.50	4.50	664.50	32.00	1.00	2.00
Mode	1[a]	1	45[a]	1[a]	4	500	30	1	2
Std. Deviation	.506	.483	13.152	.506	1.692	366.204	11.601	.501	.505
Range	1	1	55	1	7	2100	46	1	1

Full-time nurses experienced a higher level of burnout compared to part-time nurses. The overall prevalence among the healthcare workers concerning this study is 54.6%. The correlation coefficient was also analyzed according to table 2 below. The results show that burnout has a strong positive correlation to age and job status.

Table2 :Correlations

		Gender	Salary in Jordan Dinars	COVID-19 Status
Gender	Pearson Correlation	1	-.058	.253
	Sig. (2-tailed)		.723	.115
	N	152	152	152
Salary in Jordan Dinars	Pearson Correlation	-.058	1	.109
	Sig. (2-tailed)	.723		.503
	N	152	152	152
COVID-19 Status	Pearson Correlation	.253	.109	1
	Sig. (2-tailed)	.115	.503	
	N	152	152	152

There is a perfect correlation between gender and salary in Jordan Dinars. The physicians that are above 45 years have a higher salary package. Most of the male physicians have been tested for covid-19 while their female counter has gone for Covid-tests. The Pearson correlation between covid-19 and salary is 0.5. Other descriptive statistics from the research include frequencies and percentages.

Data Interpretation and Discussion

Covid-19 has orchestrated the prevalent burnout among healthcare workers. Burnout is a global concern among healthcare workers. In Jordan alone, burnout is 40% among healthcare professionals, including nurses, physicians, and other hospital staff. Regrettably, the government of Jordan has not given burnout the needed attention it deserves to stem it out despite the conspicuous stressors identified. This study shows that burnout prevalence is above 53.4%. Several factors among healthcare professionals cause it. The elements in the study included gender, the number of hours worked per week, the amount of salary earned, ease of access to PPE's, whether married and the COVID-19 status. The study revealed that most nurses experienced burnout symptoms whenever they lacked the PPE. This is because they are exposed, and the risk of getting infected is high. The fight against covid-19 requires a concerted effort of the healthcare professionals and the hospital management (Barello et al.,2020). The government took a long time to respond to the pandemic. The supply of PPEs delayed, and most frontline workers were distressed.

The female gender coupled with long hours of work per week was a recipe for burnout. Most of the female nurses working over 30 hours per week demonstrated a high level of burnout during the pandemic. Most of the healthcare workers interviewed argued that there is a need for the government of Jordan to offer emotional and financial incentives during the pandemic (Naser et al., 2020). The female HCPs that worked in high risks department experienced a high rate of occupational burnout.

The study further shows that most HCPs directly involved in handling covid-19 patients suffer psychological distress. This is because they work for long hours, and the infection also sets in. The nurses that work in the emergency department and covid-19 patient wards were the most affected.

Job satisfaction among healthcare professionals has also been discovered because it is caused by low salaries (Hamdan et al., 2020). During the lockdown, the price of every commodity increased, the number of working hours increased, and the number of patients handled by one nurse also rose. Covid-19 has caused a high level of job dissatisfaction to be witnessed among physicians and nurses. This is because the battle of eradicating the covid-19 is complex. It requires physical and emotional support to continue working without too much pressure. The government should prioritize motivating the HCP with good financial gain, social support and avail the PPEs in time. The hospitals should establish departments concerned with the mental wellness of the healthcare professionals during this pandemic period. The policymakers should work in tandem with the nurses, physicians, and other medics working to combat the covid-19 pandemic to develop workable policies (Bolatov et al., 2020). The policies should help motivate the healthcare professionals and stemming out stressor factors in the hospitals that lower the productivity level of nurses. Burnout lowers the productivity level, and as a result, quality is compromised. Covid -19 impacted negatively in the hospitals because the number of patients exceeded the available hospital capacity. The nurses were recalled, and they had to work for long hours without any monetary gain. This made most of the healthcare professionals abscond duties, and others got depressed.

Conclusion

Covid-19 has impacted the healthcare department negatively in Jordan. It caused severe psychological and physical distress to HCPs and other healthcare workers. The level of burnout among healthcare workers is high due to long working hours, low salary and lack of PPEs. Most nurses and doctors fear infection due to occupational burnout among the nurses is the order of the day. Job satisfaction, on the other hand, is evident. The HCPs opines that the government is doing very little to take care of their needs (Amanullah & Ramesh., 2020). They felt the government's slow pace of availing the requirements to fight the pandemic is assigned to a lack of commitment, particularly in government hospitals. There is a direct impact of covid-19 on burnout and job satisfaction among healthcare workers.

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