

Occupational Work Stress Among Health Care Professionals in Selected Primary Health Care Facilities in Gombe Metropolis, Gombe-Nigeria

Hassana, Y. Bello, *Nasiru Anas and Badiya Mahmud

Department of Sociology, Gombe State University, PMB 127, Gombe, Nigeria

Corresponding Author: nasiruanas27@gmail.com

ABSTRACT

Occupational work stress remains a public health care challenge facing health care professionals in Nigeria. This is due to the fact that, there is less effort made by governments and managements of public health care facilities to address the challenge especially with regards to insufficient staff strength and poor working conditions among other several challenges. This study was undertaken to achieve the following objectives; to examine the causes of occupational work stress among health care professionals, and to identify the consequences of occupational work stress on performance of health care professionals in selected primary health care facilities in Gombe metropolis. The study employed a descriptive research method and data was collected from a sample of 205 health care workers from the population of 236 in the selected primary health care facilities using Krejcie and Morgan Sample Size Calculator with margin of error of 5% and 95% confidence level. The data was analysed using statistical package for the social sciences (version 21). The findings of the study indicated that, the major causes of occupational work stress include overcrowding of patients, family pressure, insufficient staff strength, poor working conditions and lack of health care facilities among others. Furthermore, the major consequences of occupational work stress on performance of health care personnel also include anxiety and frustration on the part of health care personnel, failure to give required medical attention to patients, inability to achieve target result and internal conflict among health care personnel in the study clinics. The study recommended the needs to provide more funding to primary health care facilities especially that, majority of the citizens who are less privileged attend the facilities for medical services, provision of health care facilities and adequate working tools among others. This will help in addressing some of the major problems affecting the development and sustainability of primary health care facilities in providing health care services to the less privileged class of citizens.

Keywords: Occupational work stress, health care professionals, maternity hospitals and job performance

INTRODUCTION

Stress as a concept generally affect health, well-being and job performance of workers in negative dimensions/ways. It is also been regarded as a force that pushes a physical or psychological factor beyond its range of stability, producing a strain within the individual. Furthermore, stress is seen as a process by which environmental factors and challenges threaten individual either physically or psychologically which lower an effect on job stress on health, personal

and work behaviour of health personnel in the hospitals (Mojoyinola, 2008).

There are many factors that influence occupational work stress in the health care clinics. This is related to distraction or sleepiness which is estimated to be around 60% to 80% of accidents on job and near misses. Also, report from the National Institution for Occupational Safety and Health (NIOSH) in 2022, estimated that 60% to 90% of health care providers' poor attitudes to clients are attributed to response. The Nigerian health care system is faced

with chronic under-funding, dilapidated health care facilities, poor staffing and inadequate working tools which has been the factors associated with stress in the hospitals (Etim, Bassey, Ndep, Ekpenyong and Otung, 2015). In this case, most of the health care provided by especially secondary and primary levels of care in Nigeria have to work under very difficult and unconducive conditions which contribute to the increase of work stress in the hospitals (Onasoga, Ogbebor and Ojo, 2013).

Furthermore, stress in workplace generally impairs both quality and quantity of work and has been a strong contributory factor to accidents or near misses in the health care settings thereby affecting service delivery. Similarly, in workplace especially hospitals, stress is associated with a number of health related problems affecting staff. For instance, stress has been linked to low job satisfaction, reduced productivity and increased in occupational accidents (Veena and Catherine, 2010). Therefore, it is often believed that, when a staff is tired, there is bound to be misuse of equipment which may lead to its damage, injury to the staff or to the products (in this case, it is the patients).

Therefore, understanding the real causes and consequences of occupational work stress among health care professionals is vital in dealing with the consequences associated with it. Hence, the need for a research on occupational work stress among health care professionals in selected maternity hospitals in Gombe metropolis. The outcome of the study will help in addressing the problems associated with work stress among health care personnel in the primary health care clinics and other secondary and tertiary hospitals in the state. The objectives which this study intends to achieve are: to examine the causes of occupational work stress among health care professionals, and to identify the consequences of occupational work stress on performance of health care

personnel in selected maternity hospitals in Gombe metropolis.

MATERIALS AND METHODS

The primary health care facilities are established generally for the purpose of providing immediate medical and health care services in the surrounded wards that make up Gombe metropolis. The health care services provided by these primary health care facilities include out and inpatient services, medical services, paediatrics obstetrics and gynaecology among others. The health care facilities has considered number of staff working to provide the necessary medical services and support to the elderly, women and children. This study therefore was a cross-sectional study conducted among health care professionals in some selected facilities in Gombe metropolis.

The Gombe metropolis has a total of nine (9) primary health care facilities across the eleven wards. From these maternity clinics, five (5) were selected through balloting for the study. These include Pantami Primary Health Care Facility, Tudun Wada Primary Health Care facility, Kumbiya-Kumbiya Primary Health Care Facility, Herwagana and Nasarawo Primary Health Care Facilities. These health care facilities offered primary health care services to members of the public including men, women and children. From these selected facilities, there is a total population of 236 health care professionals (Table 1) as at 31st of May, 2023. From this population, using Krejcie and Morgan sample size calculator, a sample of 205 respondents were selected with 95% confidence level and 2.5% margin of error.

The researchers employed a primary data collection instrument which is a questionnaire by using convenient sampling method to collect data from the sampled population of the research. This was done by the researcher's along with assistant visits to the selected health care facilities

and collect data. The questionnaires include open and close ended questions on the causes and consequences of occupational work stress among health care professionals (Table 2). The data generated were further analysed using descriptive statistics which

involved the use of tables, frequencies and percentages. The data presentation and analyses were done using IBM SPSS (21). The population and sample size of the respondents across the health care facilities is shown in the table below.

Table 1: Population and Sample Size

Maternity hospitals	Population	Sample size
Herwagana maternity clinic	55	48
Tudun Wada maternity clinic	48	42
Kumbiya Kumbiya maternity clinic	45	39
Pantami maternity clinic	43	37
Nasarawo maternity clinic	45	39
Total	236	205

Source: Primary Health Care Development Agency, 2023

RESULTS

Table 2 indicates that there are more health care professionals within the age bracket of 21-25 years and 36-40 years. These two groups are the majority with 51.2% of the total responses. This forms the workforce of the clinics. The least group is 46 years and above with a total percentage of 6.9%. At this stage the workforce has matured and gazing at retirement. The distribution on gender indicates there are more female 60.05% health care professionals working in the clinics than males. This further

demonstrates women as care givers. On marital status, there are more married health care professionals in the study 63.4% than other statuses. The least marital status is “separated” with only 1.5% in the study hospitals. This is an indication of the strength of the marriage institution in the study area. Majority of health care professionals that responded to the study were holders of Diploma certificate with 52.7%, holders of B.Sc certificates account for 42.4%. Additional certificate in health care is the least with only 4.9%.

Table 2: Socio-Demographic Characteristics of Respondents

Age	Frequency	Percentage
21-25 years	52	25.3%
26-30 years	35	17.1%
31-35 years	26	12.7%
36-40 years	53	25.9%
41-45 years	25	12.1%
46 years and above	14	6.9%
Total	205	100.0%
Sex	Frequency	Percentage
Male	81	39.5%
Female	124	60.5%
Total	205	100.0%
Marital status	Frequency	Percentage
Single	59	28.8%
Married	130	63.4%
Divorced	13	6.3%
Separated	3	1.5%
Total	205	100.0%
Educational qualification	Frequency	Percentage
Diploma	108	52.7%
B.Sc	87	42.4%
Additional certificate in health	10	4.9%
Total	205	100.0%

Table 3, accounted for causes of occupational work stress among health care professionals in some selected maternity clinics in Gombe Metropolis. The major factors associated with occupational work stress among the health care professionals include, family pressure, working overtime, insufficient staff strength, lack of adequate health care facilities and over-crowding of patients in the clinics. Other factors include overcrowding of patients, doing more than required work at a time and poor working condition. Family pressure was found to be

one of the major causes of occupational work stress among the health care professionals in the study with 75.1% of the responses. This is an indication of poor socio-economic status among families in Gombe Metropolis. Here, the health worker is seen as a breadwinner in most families and due to higher income associated with health care jobs; their family members have a high expectation on the healthcare professionals in the family in terms of meeting their needs.

Table 3: Causes of occupational work stress

Family pressure	Frequency	Percentage
Agree	154	75.1%
Disagree	34	16.6%
Undecided	17	8.3%
Total	205	100.0%
Working overtime	Frequency	Percentage
Agree	141	68.8%
Disagree	31	15.1%
Undecided	33	16.1%
Total	205	100.0%
Insufficient staff strength	Frequency	Percentage
Agree	132	64.4%
Disagree	62	30.2%
Undecided	11	5.4%
Total	205	100.0%
Lack of health care facilities	Frequency	Percentage
Agree	150	73.2%
Disagree	40	19.5%
Undecided	15	7.3%
Total	205	100.0%
Overcrowding of patients	Frequency	Percentage
Agree	155	75.6%
Disagree	40	19.5%
Undecided	10	4.9%
Total	205	100.0%
Doing more than required work	Frequency	Percentage
Agree	142	69.3%
Disagree	43	20.9%
Undecided	20	9.8%
Total	205	100.0%
Poor working condition	Frequency	Percentage
Agree	131	63.9%
Disagree	49	23.9%
Undecided	25	12.2%
Total	205	100.0%

Overcrowding of patients also accounted for 75.6% of the responses. With too many patients to attend to, work becomes too

stressful, enthusiasm is lost in the process and job satisfaction is at its lowest. Other factors associated with work stress recorded

between 64%-73% as shown in the table. This is a clear indication that health care professionals in Gombe Metropolis are working under stressful condition compared to their counterparts in developed nations.

The consequence of the above stressful working conditions is recorded in table IV. Majority of response 66.8% indicated

anxiety and frustration as the major consequences. Other consequences include, in ability to achieve target results 62.4%, failure to give required medical attention 64.9% and internal conflict among the staff in the clinic with 60.5% of the responses. These consequences have contributed to the decline in working conditions of health care workers in Gombe metropolis.

Table 4: The consequences of occupational work stress on performance of health care professionals

Inability to achieve target result	Frequency	Percentage
Agree	128	62.4%
Disagree	44	21.5%
Undecided	33	16.1%
Total	205	100.0%
Failure to give required medical attention to patients	Frequency	Percentage
Agree	133	64.9%
Disagree	52	25.4%
Undecided	20	9.7%
Total	205	100.0%
Anxiety and frustration	Frequency	Percentage
Agree	137	66.8%
Disagree	57	27.8%
Undecided	11	5.4%
Total	205	100.0%
Internal conflict among staff in the hospital	Frequency	Percentage
Agree	124	60.5%
Disagree	50	24.4%
Undecided	31	15.1%
Total	205	100.0%

DISCUSSION

The focus of the study is on occupational work stress among health care professionals in some selected maternity clinics in Gombe Metropolis. The maternity clinics are primary health care centres that offer primary health care services to members of the public in addition to maternal care. The data obtained from the study explicitly demonstrated the nature of working conditions of health care professionals in the selected health care centres in Gombe Metropolis. The findings of the study has supported the earlier findings made by different research studies conducted in Nigeria on occupational work stress among health care workers in the health care centres. A research conducted by Owolabi,

et al on work related stress perception and hypertension amongst health workers of mission hospital in Oyo State, South-West Nigeria (2012). The study hypertension which is the major implication of stress especially associated with pressure at workplace among health workers. Similarly, in another study conducted by Musa, B (2020) on effects of occupational stress among health care workers towards effective health care delivery in General Hospital, Katsina, Katsina State have revealed the effects of occupational stress to include headache, poor concentration, loss of work interest and less productivity among others. In the same vein, a study conducted by Hassana, Nasiru and Ibrahim (2022) on Healthcare Provision in Gombe State:

Challenges and Way Forward examines some of the challenges affecting the delivery of quality health care services by medical professionals which brought stress among them to include shortage of staff strength, inadequate basic infrastructure and equipments, poor remuneration and other push factors. There are many other research studies conducted on occupational work stress among health care professional in Nigeria and other countries of the world.

From the findings of the study, it has revealed that, there are more female health care workers than male in the study health care centres as they represent the 60.5% of the total responses. This findings point to the increased access to western education among women and especially as they study health related courses. Majority of the workers fall between the ages of 21 years old – 40 years old. The data also demonstrated the strength and value placed on the marriage institution. Furthermore, the findings of the study shows that, majority of the health care workers suffer from family pressure which affected their performance at work which causes stress which 75.1%. Similarly, majority of the respondents indicated that, working overtime also influences work stress among them. This majority factor also relates to insufficient staff strength at the health care centres in the metropolis. This is indicated with 68.8% and 64.4% respectively. At the same time, the inadequate of health care facilities at the study clinics also contributed to work stress among staff. This has made staff to resort to finding alternative means of attending patients thereby putting pressure (stress) to themselves. This is because; they can't leave the patients unattended most of the time. This has shown in table II with 73.2% responses.

The table III also shows other factors influencing occupational work stress including overcrowding, doing more than required work at a time and poor working

condition. The finding shows that, the inability of the state government to provide more health care centres in the metropolis been the state capital put more pressure on the existing ones, thereby having much overcrowding of patients seeking medical attention. The 75.6% of the responses indicated that, overcrowding of patients is one of the causes of work stress among health care workers in the metropolis. Other factor relates to work stress is having staff doing more than work. This is equally relates to insufficient of staff in the clinics with 69.3% of the major views. Finally, poor working condition also contributes to work stress among health care workers in the study health care centres. Majority of the staff in the clinics doesn't pay much attention to the work largely because of poor working conditions of the health care personnel working especially at Primary Health Care Centres.

The major consequences of occupational work stress found from the study include inability to achieve target result. This is because the work has become more stressful than before, this lead to failure to give required medical attention to patients as shown in the table IV with 62.4% and 64.9% respectively. Other consequences also include anxiety and frustration among the health care workers and internal conflict among staff in the health care centres as also shown with 66.8% and 60.5% as well.

CONCLUSION

Occupational work stress has continued to be a serious problem affecting health care personnel especially working in public health clinics in Nigeria. This study has identified several causes and consequences associated with occupational work stress in the study health care hospitals. The study has recommended the need to provide more funding to primary health care clinics, health facilities, adequate working tools and additional health care personnel to reduce the wide margin between health care

workers and patients seeking medical services in Gombe metropolis. When these are adequately provided, will help in addressing work stress among health care personnel in the study hospitals.

REFERENCES

- Etim, J.J, Bassey, P.E, Ndep, A.O, Ekpenyong, B.N, and Otung, N.S (2015). Work-related stress among health care workers in Ugep and Yakurr Local Government Area, Cross River State, Nigeria: A study of sources, effects and coping strategies; *European Journal of Public Health, Pharmacy and Pharmacology*, vol 1 (1), Pp 23-34.
- Gombe State Primary Health Care Development Agency, 2023.
- Hassana, Y.B, Nasiru, A and Ibrahim, A (2022). Health care provision in Gombe State: Challenges and Way Forward; in the Economy of Gombe State: A multi-disciplinary perspective edited by Dahiru Hassan Balami, Adamu Jibir and Abdulkadir Adamu; Gombe State University Printing Press, Vol 1, Pp 349-363.
- Mojoyinola, J.K (2008). Effects of Job Stress on Health, Personal and Work Behaviour of Nurses in Public Hospitals in Ibadan Metropolis, Nigeria; *European Journal of Scientific Research*, vol 1 (1), Pp 346-352.
- Musa, B (2020). Effects of occupational stress among health care workers towards effective health care delivery in General Hospital Katsina, Katsina State-Nigeria; *international journal of innovative health care research* Vol 8 (1), Pp 7-11.
- National Institution for Occupational Safety and Health Report (2022).
- Onasoga, O.A, Ogbebor, S.O and Ojo, A.A (2013). Occupational stress management among nurses in selected hospitals in Benin City, Edo State; *European Journal of Experimental Biology*, vol 3 (1), Pp 473-481.
- Owolabi, A.O, Owolabi, M.O, OlaOlorun, A.D and Olofin, A (2012). Work related stress perception and hypertension amongst health workers of mission hospital in Oyo State, South-West Nigeria; *Afr J Prm Health care Fam Med* 4(1), Pp 1-7.
- Veena, S.R and Catherine, F (2010). Getting the Measure of Quality: Opportunities and challenges. The King's Fund, London, UK.