Employment Status and Challenges of Nurses in Thrissur District during Covid-19 Pandemic

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doi.org/10.64643/IJIRTV12I5-185420-459

Abstract: *The COVID-19 pandemic has brought unprecedented challenges to healthcare systems worldwide, placing immense pressure on healthcare workers (HCWs) who have been at the forefront of the battle against the Coronavirus. Among these workers, nurses have played a pivotal role in providing care, support, and treatment to patients affected by the pandemic. Healthcare workers, particularly nurses, have faced immense difficulties during this crisis. Given the critical role they play, it is essential to investigate the employment status and challenges faced by healthcare workers, especially nurses, during the COVID-19 pandemic. This study aims to shed light on the specific challenges and problems encountered by nurses in Thrissur district of Kerala. The pandemic had a significant impact on their lives, with many experiencing increased working hours, expenditure, and decreased savings. Moreover, a substantial proportion of respondents contracted COVID-19. The study highlights several challenges faced by healthcare workers, including heavy workloads, lack of support, difficulties with PPE kits, mental health issues, financial burdens, and inadequate training to manage COVID-19 patients.*

Key Words: **Healthcare workers, nurses, Covid 19, Job Challenges Index,** *PPE kits*

1. INTRODUCTION

Nursing involves providing comprehensive care to individuals of all ages, families, groups, and communities, whether they are healthy or ill, in various settings. This care encompasses promoting health, preventing illness, and caring for those who are ill, disabled, or dying. As critical members of the healthcare team, nurses often go unrecognized for their vital contributions in healthcare facilities and emergency response situations. They are frequently the first to identify health emergencies and work on the frontlines, delivering essential primary healthcare services, including health promotion, disease prevention, treatment, and rehabilitation.

The COVID-19 pandemic has brought unprecedented challenges to healthcare systems worldwide, placing immense pressure on healthcare workers (HCWs) who have been at the forefront of the battle against the Coronavirus. Among these workers, nurses have played a pivotal role in providing care, support, and treatment to patients affected by the pandemic. Despite their critical contributions, healthcare workers, particularly nurses, have faced significant challenges, including increased workloads, heightened risk of infection, mental health issues, and economic hardships. In a developing country like India, nurses constitute the majority of health care providers, they have a critical function in health care system.

On the frontlines of the COVID-19 battle, nurses continue to deliver essential healthcare services, despite being at high risk of contracting the virus. Globally, nurses from Kerala are respected for their exceptional skills and dedication. In their home state, their efforts have finally received the recognition they deserve. When the pandemic hit, Kerala's healthcare system and nursing community shone, earning praise even as other states struggled. The state's remarkable healthcare outcomes, including a low mortality rate, have garnered international acclaim, particularly during the second wave

2. SIGNIFICANCE OF THE STUDY

The COVID-19 pandemic has underscored the indispensable role of healthcare workers in maintaining public health. However, it has also created an unprecedented work environment that poses significant challenges for these workers. The

pandemic has amplified risk factors, including high demands, lack of control, inadequate institutional support, insufficient rewards, and prolonged overtime and shift work schedules. Healthcare workers, particularly nurses, have faced immense difficulties during this crisis. Given the critical role they play, it is essential to investigate the employment status and challenges faced by healthcare workers, especially nurses, during the COVID-19 pandemic. This study aims to shed light on the specific challenges and problems encountered by nurses in Thrissur district, providing valuable insights into their experiences during this global health crisis.

3. REVIEW OF LITERATURE

The COVID-19 pandemic has significantly impacted healthcare workers, exposing them to unprecedented risks. Brophy et al. (2021) found that healthcare workers faced elevated infection rates, understaffing, and increased workloads, leading to exhaustion and burnout. Many felt abandoned by their governments, which failed to prepare for the pandemic despite recommendations.

Al Thobailty (2020) identified critical shortages of nurses, beds, medical supplies, and personal protective equipment (PPE) as major issues facing nurses during the pandemic. The study also highlighted psychological changes and fear of infection among nursing staff, emphasizing the need for support.

Janie McDermott and Annelies Goger (2020) emphasized the need for better wages, opportunities, and working conditions for healthcare workers. They recommended providing minimum wage, addressing scheduling volatility, and ensuring access to PPE and paid sick leave.

Frogner and Dill (2022) found that healthcare workers in marginalized groups, particularly women with young children, experienced high turnover rates and slow recovery. Llop-Gironés et al. (2021) noted that the pandemic highlighted the precarious employment and working conditions of nurses worldwide, emphasizing the need for improved working conditions to protect their health and well-being.

4. STATEMENT OF THE PROBLEM

Kerala's healthcare landscape stands out in many parameters, thanks in part to the selfless service of healthcare workers. The COVID-19 crisis has placed extreme demands on these workers, who are at the forefront of the battle against the virus. Despite their critical role, healthcare workers face numerous challenges, including shortages of personal protective equipment (PPE), long working hours, and increased risk of infection, heavy workloads, and lack of incentives. Protecting healthcare workers is essential to maintaining a well-functioning health system. In this context, it is crucial to examine the employment status and challenges faced by healthcare workers, particularly nurses, during the COVID-19 pandemic. This study aims to investigate the employment status of nurses in Thrissur district, shedding light on their experiences and challenges during this critical period.

5. OBJECTIVES OF THE STUDY

The study aims to achieve the following objectives:

1. To investigate the impact of COVID-19 on the employment status of nurses in Thrissur district.

2. To examine the challenges faced by nurses during the COVID-19 pandemic period.

6. DATA SOURCE AND METHODS

This study is based on primary data collected from a random sample of 50 nurses in Thrissur district. The data was gathered using online platforms, including Google Meet and Google Forms, with a well-structured and pre-designed schedule. For data analysis, simple techniques such as tables, percentages, and diagrams were employed to describe the data. Additionally, a Job Challenges Index was computed to assess the level of challenges faced by the respondents during the COVID-19 pandemic.

7. DISCUSSION OF THE ANALYSIS

7.1 Socio-Economic Profile of the Respondents
The socio-economic profile of the respondents is depicted in Table 1. The table reveals that the sample comprises a majority of nurses in the 20-30 age group. The majority of respondents (92%) were female, and only 8% were male. Regarding marital status, 52% of

respondents are married, while 48% are unmarried. In terms of qualifications, 68% of respondents hold a BSc

Nursing degree, 28% has a General Nursing qualification, and 4% hold an MSc Nursing degree."

Table 1 Socio-Economic Profile of the Respondents

Attributes		Frequency	Percent
Age Group	20-30	28	56.0
	30-40	19	38.0
	40-50	3	6.0
Educational Qualification	BSC Nursing	34	68.0
	General Nursing	14	28.0
	MSC Nursing	2	4.0
Gender	Male	4	8.0
	Female	46	92.0
Marital status	Married	26	52.0
	Unmarried	24	48.0

Source: Primary Survey

7.2 Employment Status of the Respondents

The majority of respondents (52%) belong to the income category of ₹20,000-30,000. Most respondents (86%) work in the private sector, while 14% work in the government sector. The majority of respondents (58%) are employed as temporary employees, and 42% are employed as permanent employees. The majority of respondents (62%) return home daily, while 38% are accommodated in a hostel during duty hours. The majority of respondents (64%) use bus transportation, 32% use two-wheelers, and 4% use autos to reach their workplaces. In terms of experience, 36% of respondents have less than 2 years of experience, 26% have 2-4 years of experience, 10% have 6-8 years of experience, and 12% have more than 8 years of experience. The majority of respondents (82%) did not have health insurance, while 18% did.

7.3 The Effects of Covid 19 on the Employment Status of the Respondents

Working Hours: The majority of respondents (54%) experienced an increase in working hours, 40% experienced no change, and 6% experienced a decrease. Among government sector employees, 57.15% experienced no change, and 42.85% experienced an increase. Among private sector employees, 55.8% experienced an increase, 40% experienced no change, and 6% experienced a decrease.

Salary Changes: The majority of respondents (56%) experienced no change in salary during the COVID-19 pandemic, 30% experienced an increase, and 14% experienced a decrease. Among private sector employees, 55.9% experienced no change, and 32.5% experienced an increase. Among government sector employees, 57.15% experienced no change, and 28.57% experienced a decrease.

Salary Payment: The majority of respondents (88%) received their salary on time, while 12% did not. All government sector employees received their salary on time, whereas 86.04% of private sector employees received their salary on time, and 13.96% did not.

Work Shifts: The majority of respondents (56%) worked 3 shifts, 34% worked less than 3 shifts, and 10% worked 4 shifts. Among government sector employees, 57.1% worked 3 shifts, 28.6% worked less than 3 shifts, and 14.3% worked 4 shifts. Among private sector employees, 55.81% worked 3 shifts, 34.88% worked less than 3 shifts, and 9.3% worked 4 shifts.

Special Allowance: The majority of respondents (54%) did not receive a special allowance for COVID-19 duty, while 46% did. Among government sector employees, 71.43% did not receive a special allowance, and 28.57% did. Among private sector employees, 51.17% did not receive a special allowance, and 48.83% did.

COVID-19 Infection: The majority of respondents (76%) were infected with COVID-19, while 24% were not.

Frequency of Infection: Among those infected, 63.15% were infected 1-2 times, 34.21% were infected 2-4 times, and 2.64% were infected 4 or more times.

Expenditure: The majority of respondents (62%) experienced an increase in expenditure during the COVID-19 pandemic, 30% experienced no change, and 8% experienced a decrease.

Savings: The majority of respondents (46%) experienced a decrease in savings during the COVID-19 pandemic, 40% experienced no change, and 14% experienced an increase.

7.4 Challenges Faced By the Respondents during Covid 19 Pandemic

Heavy Workload: The majority of respondents (58%) faced heavy workload problems during the COVID-19 pandemic.

Lack of Support: Among the respondents, 30% faced a lack of support from workplaces.

PPE Kit Difficulty: The majority of respondents (52%) faced difficulty wearing PPE kits during duty hours.

Mental Health: The majority of respondents (46%) felt anxiety, depression, and stress while on duty.

Cost of PPE: Among the respondents, 44% had to bear the cost of PPE kits, sanitizers, and other items themselves.

Inadequate Training: Among the respondents, 30% opined that they received inadequate training to deal with COVID-19 patients.

7.4.1 Job Challenges Index among the Respondents

To assess the challenges faced by respondents during the COVID-19 pandemic, a Job Challenges Index was computed. The index was derived from a 5-point Likert scale, with responses to various questions related to challenges such as: heavy workload, lack of support from the workplace, difficulty wearing ppe kits during duty hours, anxiety, depression, and stress, bearing the cost of PPE kits, sanitizers, and other items and inadequate training to deal with COVID-19 patients. The responses were scored as follows: Strongly Disagree: 1, Disagree: 2, Neutral: 3, Agree: 4 and Strongly Agree: 5. The Job Challenges Index was obtained by totaling the scores for all the questions, resulting in a range of 6 (minimum) to 30 (maximum). The level of job challenges was categorized into three levels:

Low Job Challenges Index: Below 10 scores

Moderate Job Challenges Index: 10-20 scores

High Job Challenges Index: More than 20 scores

Table 2 depicts level of job challenges index among the respondents. Table reveals that nearly half of the respondents (48%) have a high job challenges index, while another 48% have a moderate job challenges index. Only 4% have a low job challenges index

TABLE 2 LEVEL OF JOB CHALLENGES INDEX AMONG THE RESPONDENTS

Level of Job Challenges Index	Frequency	Percentage
Low	2	4.0
Moderate	24	48.0
High	24	48.0
Total	50	100

Source: Primary Survey

8. CONCLUSION

This study examines the employment status of healthcare workers, specifically nurses, in Thrissur District during the COVID-19 pandemic. The findings reveal that the majority of respondents belong to the ₹20,000-30,000 income bracket, work in the private sector as temporary employees, commute daily, and use public transportation. The respondents have varying levels of experience, with 36 percent having

less than 2 years of experience, and a significant majority lack health insurance coverage. The pandemic had a significant impact on their lives, with many experiencing increased working hours, expenditure, and decreased savings. Moreover, a substantial proportion of respondents contracted COVID-19. The study highlights several challenges faced by healthcare workers, including heavy workloads, lack of support, difficulties with PPE kits, mental health issues, financial burdens, and inadequate training to manage COVID-19 patients.

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