

# Evaluation of Workplace Stress Among Occupational Therapists in Chengalpattu District

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## Abstract:

### ➤ *Background:*

Occupational Therapists play a critical role in the healthcare system, providing essential rehabilitation services to individuals with physical, mental, and developmental conditions. Due to the demanding nature of their profession, they are often exposed to varying levels of workplace stress. While workplace stress has been widely studied in other healthcare professions, limited attention has been given to occupational therapists, particularly in the Indian context. This study aims to evaluate the levels of workplace stress experienced by occupational therapists in Chengalpattu district, providing insight into the overall stress patterns within this professional group.

### ➤ *Method:*

A cross-sectional study design was adopted to evaluate the workplace stress among occupational therapists. A convenient sampling was adopted for the study. The 61 individuals who were working as occupational therapists (Hospital, clinic, private sector and other) in Chengalpattu district were included in the study. The Workplace Stress Scale was used to evaluate the workplace stress.

### ➤ *Results:*

Analysis of data from 61 occupational therapists in Chengalpattu district showed that most participants experienced moderate levels of workplace stress. The likelihood ratio test revealed statistically significant associations between workplace stress and work setting ( $p = 0.001$ ), while educational qualification ( $p = 0.064$ ) and specialty ( $p = 0.287$ ) showed no significant associations.

### ➤ *Conclusion:*

The study found that of 61 occupational therapists who participated in the study, the majority experienced moderate levels of workplace stress. A statistically significant association was found between work setting and stress levels, while no significant association was observed with educational qualification or area of specialization. Demographic imbalances may affect the generalizability of the results. Overall, the findings highlight the presence of workplace stress among occupational therapists.

**Keywords:** Workplace Stress, Occupational Therapist, the Workplace Stress Scale, Stress, Working Environment.

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## I. INTRODUCTION

### ➤ *Stress*

Stress can be defined as a state of worry or mental tension caused by a difficult situation. Stress is a natural human response that prompts us to address challenges and threats in our lives. Everyone experiences stress to some

degree. The way we respond to stress, however, makes a big difference to our overall well-being". [18]

Stress can also be defined as the nonspecific reaction to demands placed upon the body but it is more complex than that. Any situation where a person is subjected to change, and especially big changes in life is deemed stressful. Stress also arises from the feeling that one has little control over life or

daily activities. It can result in the breakdown of a person's mental and physical health, and if left unmanaged, to cardiovascular disease and cancer. Stress could reduce the enjoyment we earn from our labours.[22] Under different types of conditions and point of views, the definition of stress keeps changing. There are two aspects of human beings such as physical and mental. These aspects are influencing each other and are interrelated. Body health is not only an area to measure the physical aspects but also the amount of productivity it generates. Likewise, emotions, feelings and thoughts are not the only form of mental aspects but also the interest to live a comfortable life and enjoy it to the maximum.[21]

#### ➤ *Workplace Stress*

Workplace stress refers to the physical, emotional, and mental strain faced by employees due to different factors related to their job or work environment. The allied healthcare sector is filled with widespread workplace stress, driven by intense demands, overwhelming workloads, and repeated exposure to distressing situations, ultimately taking a severe toll on the physical and mental health of allied healthcare professionals. Workplace stress among allied healthcare professionals is a complex and multifaceted issue, arising from a variety of contributing factors. There are various impacts of Workplace stress including physical impairments such as musculoskeletal disorders and cardiovascular disease as well as mental and behavioural disorders like exhaustion, burnout, anxiety and sometimes depression. As well as there are many drawbacks of stress such as low productivity, work absences, lower quality of services, higher turnover and sometimes early retirement. [12]

#### ➤ *Workplace Stress and Occupational Therapist*

Occupational therapists (OTs) play a vital role in delivering therapeutic services and interventions to a wide range of clients. Their work spans across the entire human lifespan—from premature infants in neonatal intensive care units to elderly individuals living with dementia. OTs serve in various environments, including hospitals, schools, non-profit organizations, and community programs, often working with children in protective care or assisting with health promotion and injury prevention efforts. The nature of their work is both physically and emotionally challenging. A unique aspect of the OT profession is the strong, ongoing relationships formed with clients, often involving deeply emotional and personal experiences. These connections, combined with witnessing patient suffering and loss, contribute to the emotionally taxing nature of the job. While occupational health and safety (OHS) is part of OT education, the emotional and psychological strains of the job are frequently under-acknowledged in practice. This lack of attention can impact therapists' overall well-being and job satisfaction.[4]

Despite the recognized risk of physical injury, particularly in physically intensive roles, limited focus has been placed on emotional fatigue and mental health challenges in the workplace for OTs. Emotional strain, such as burnout and compassion fatigue, is increasingly becoming

an area of concern, especially as the field expands to include more demanding and complex client care scenarios. Although there is a small but growing body of literature exploring occupational fatigue among therapists, particularly in relation to mental and emotional wellness, more comprehensive understanding is needed. Increased awareness and research are essential for identifying contributing factors, developing preventive strategies, and implementing effective support systems. Addressing these concerns is crucial not only for the personal health of therapists but also for sustaining quality care and service delivery in their professional practice.[14]

#### ➤ *Factors Developing Workplace Stress as Occupational Therapist*

- Heavy caseloads and workload: dealing with numerous clients with different needs can be really tough.
- Time limitations: multitasking assessments, treatments, and documentation within tight deadlines can be difficult.
- Emotional strain: Assisting clients with traumatic experiences or severe disabilities can be emotionally taxing.
- Physical demands: The physical effort involved in lifting, transferring, or operating equipment can lead to strain.
- Documentation and paperwork: Excessive paperwork can reduce the time available for direct patient care.
- Coordination and communication: Collaborating with other healthcare professionals, families, and caregivers can be stressful.
- Resource limitations: Budget constraints, outdated equipment, or inadequate facilities can restrict effective care.
- Continuing education: Keeping up with the latest best practices, technologies, and regulatory changes can be stressful.
- Client progress and outcomes: Concerns about clients' progress, setbacks, or lack of engagement can be troubling.
- Burnout and compassion fatigue: The emotional burden of supporting clients with difficult conditions can lead to burnout.
- Work-life balance: long hours, including evenings or weekends, can blur the line between work and personal life.
- Professional growth: Challenges in career advancement or obtaining specialized training can add to stress. [2]

#### ➤ *Aim and Objectives*

##### • *Aim:*

- ✓ To evaluate the workplace stress among occupational therapists working in Chengalpattu district.

##### • *Objectives:*

- ✓ Selection of Occupational therapists based on inclusion criteria
- ✓ Evaluate workplace stress among occupational therapist using The Workplace Stress Scale

### ➤ *Need of the Study*

Workplace stress is a growing concern in the healthcare sector, where professionals often face demanding workloads, emotional strain, and time pressures. Occupational therapists, in particular, are responsible for helping individuals regain independence and function, which requires high levels of empathy, patience, and resilience. These demands, along with administrative responsibilities and sometimes limited institutional support, can contribute significantly to stress.

In India, and specifically in a metropolitan city like Chennai, occupational therapists may be exposed to unique stressors such as long working hours, high patient loads, and inadequate staffing. Despite the importance of their role in rehabilitation and recovery, there is limited research on the extent of workplace stress experienced by occupational therapists in this region.[23]

Understanding workplace stress among occupational therapists is essential to ensure their well-being, job satisfaction, and the overall quality of care provided to patients. This study aims to evaluate the level of workplace stress among occupational therapists in Chengalpattu district.[4]

## II. REVIEW OF LITERATURE

- Ananya Roy (2022) conducted a study on “Workplace Stress as a Predictor for Burnout in Mental Health Professionals: A Covid-19 Study”. This study aims to examine the causal link between workplace stress and burnout syndrome—specifically emotional exhaustion, depersonalization, and reduced personal accomplishment—among mental health professionals. The sample included 30 professionals, such as clinical psychologists, psychotherapists, and counsellors, aged between 25 and 35 years, based in Delhi. Data was collected using the Workplace Stress Scale and the Maslach Burnout Inventory. The result showed that workplace stress is significantly and positively correlated to occupational exhaustion and depersonalization. It was also found that workplace stress is a significant predictor of occupational exhaustion.[10]
- K.Asokan, G.Brindha, S.Valarmathi, (2019) conducted a study on “A Preliminary Study On Health Care Professionals (Paramedical) Stress Due To Competition, Advancement Of Technology & Environment At Chennai”. The purpose of this study was to examine whether paramedical professionals experience stress as a result of technological advancements and increasing competition in the healthcare sector in the metropolitan city of Chennai. Healthcare professionals, including nurses and lab technicians, need to continuously update their knowledge, just like doctors, to provide effective patient care—especially in advanced urban areas like Chennai. This need arises from rapid technological advancements and increasing competition in the healthcare field. Data was collected from 62 paramedical staff using a structured questionnaire to analyze their responses. The results revealed that many of them

experience both physical and mental stress due to the pressures of staying current with new technologies and facing growing competition.[23]

- Selam Gebeyeh et.al., 2017 conducted a study on “Workplace stress and associated factors among healthcare professionals working in public health care facilities”, This study aimed to evaluate workplace stress and its related factors among healthcare professionals employed in public health facilities in Bahir Dar city, located in Northwest Ethiopia. An institution-based cross-sectional study was carried out using Rosanna Cousin's Workplace Stress Questionnaire along with a Likert scale. A total of 253 healthcare professionals took part in the study. The findings revealed that 48.6% of participants experienced workplace stress. The study concluded that the level of workplace stress among the respondents was significantly high.[21]

## III. METHODOLOGY

- *Research Design:*  
A cross-sectional study design.
- *Study Setting:*  
The study was conducted in Chengalpattu district.
- *Sampling Technique:*  
Convenient sampling.
- *Sample Size:*  
Sample size (n) = 61
- *Variables:*
  - Independent variables – workload, work environment, work pattern, relationship with colleagues
  - Dependent variables – Workplace stress
- *Screening Criteria*
  - *Inclusion Criteria*
    - ✓ Currently employed as an occupational therapist.
    - ✓ Minimum 6 months of work experience in occupational therapy
    - ✓ Employed in various settings (hospitals, clinics, other, private practice).
    - ✓ Should be working in Chengalpattu district
  - *Exclusion Criteria*
    - ✓ Students or interns in occupational therapy programs.
    - ✓ Unemployed or on leave.
- *Instrument Used*  
The Workplace Stress Scale, created by The Marlin Company and The American Institute of Stress, is one such instrument. This tool was created by The Marlin Company, a North Haven, Connecticut-based digital signage and workplace communication firm, in partnership with the

American Institute of Stress, a non-profit organisation that offers tools and education on stress management. The Workplace Stress Scale was created to make it easier for people to gauge how stressed they are at work. It is made up of a number of questions covering many areas of work-related stress, including workload, interactions with coworkers and management, and work-life balance. The scale is founded on the knowledge that stress at work is a prevalent problem that may negatively impact people's physical and mental health, as well as their ability to do their jobs and general well-being. People may take action to manage their stress, enhance their general health, and increase their productivity at work by recognising the origins of their stress and the degree of stress they are experiencing.[2]

The Workplace Stress Scale is a useful tool for people and organisations trying to encourage workplace wellness. People may increase their overall work satisfaction and quality of life by utilising the scale to pinpoint stress-inducing situations and then putting stress-management plans into action. The Marlin Company and the American Institute of Stress are helpful allies in the battle against workplace stress because they offer extra tools and assistance to people and organisations trying to control stress at work and foster wellbeing. There are 8 items on the work environment stress scale. The frequency and severity of each stressor are indicated by a rating on a five-point scale, from 1 (never) to 5 (always).[2]

- Total score of 15 or lower: Chilled out and relatively calm. Stress isn't much of an issue.
- Total score 16 to 20: Fairly low. Coping should be a breeze, but you probably have a tough day now and then. Still, count your blessings.
- Total score 21 - 25: Moderate stress. Some things about your job are likely to be pretty stressful, but probably not much more than most people experience and are able to cope with. Concentrate on what can be done to reduce items with the worst scores.
- Total score 26 - 30: Severe. You may still be able to cope, but life at work can sometimes be miserable. Several of your scores are probably extreme. You could be in the wrong job, or even in the right job but at the wrong time, and might benefit from counselling.
- Total score 31 - 40: Stress level is potentially dangerous. The more so the higher your score. You should seek professional assistance, especially if you feel your health is affected, or you might need to consider a job change to a different position within the company or to a different company [22]

➤ *Reliability and Validity*

The Workplace Stress Scale has been approved by several researchers and has demonstrated strong validity and reliability in a range of worker populations. In studies and actual practice, it has been used to measure and control workplace stress in sectors including healthcare, education, finance, and manufacturing. Workplace stress scale (WSS). This scale from North Haven and the American Institute of

Stress, Marlin Company NY (2001) had been used and adapted by the present study requirements. It comprised eight items with a five-point response pattern, i.e., 1-5 (never to very often). For The total scale WSS in the proposed investigation, an alpha reliability coefficient of 0.85 was reported.[8]

➤ *Data Collection Procedure*

- The purpose of the study was explained to the participants and consent was obtained from them.
- 61 participants who are working in Chengalpattu district as occupational therapy professionals.
- The participants were sent The Workplace Stress Scale by the Google form.
- Level of workplace stress was determined by the answers from the questionnaire.
- The collected data were analysed and estimated using SPSS software.

➤ *Procedural Flowchart*

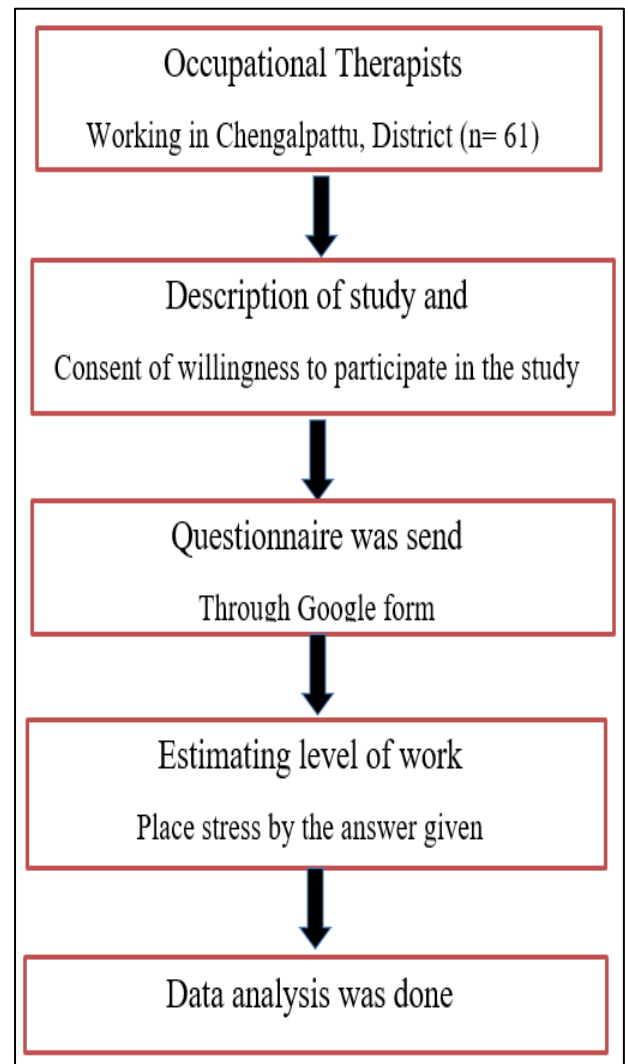


Fig 1 Procedural Flowchart

**IV. RESULTS**

**Table 1 Descriptive Statistics for Age, Years of Experience as an Occupational Therapist, and Average Hours Worked Per Week**

(n=61)	Range	Mean	S.D
Age(years)	22 to 32	27.26	2.23
Years of experience as an occupational therapist	6 months to 6 years	2.04	0.96
Average hours worked per week	15-70	42.20	11.9 5

The above table represents, the age of the participants ranged from 22 to 32 years, years of experience as an occupational therapist ranged from 6 months to 6 years and the average hours worked per week ranged from 15 to 70 hours.

**Table 2 Distribution Gender, Qualifications, Working Setting, and Speciality**

		Frequency	%
Gender	Male	43	70.5
	Female	18	29.5
Qualification	Bachelor in occupational Therapy	57	93.4
	Masters in occupational therapy	4	6.6
Working setting	Clinic	50	82
	Hospital	8	13.1
	Private practice	2	3.3
	Other	1	1.6
Speciality	Neurology	3	4.9
	Orthopaedics	1	1.6
	Paediatrics	43	70.5
	Psychiatry	11	18
	Rehabilitation	3	4.9

The above table indicates, among the 61 participants; the majority were males (n=43); and the rest (n=18) were females. 57 had a Bachelor in Occupational Therapy, and 4 had Masters in Occupational Therapy. The majority of participants work in clinics (n=50); followed by hospitals

(n=8), private practice (n=2), and others (n=1). The specialties of the participants were Paediatrics (n=43), Psychiatry (n=11), Neurology (n=3), Rehabilitation (n=3), and Orthopaedics (n=1).

**Table 3 Level of Stress**

Workplace stress	Frequency y	%
Chilled out and relatively calm (≤15)	3	4.9
Fairly low (16-20)	20	32. 8
Moderate stress (21-25)	28	45. 9
Severe (26-30)	4	6.6
Stress level is potentially dangerous (31-40)	6	9.8

The mentioned table describes the level of stress reveals; Chilled out and relatively calm (n=3), Fairly low (n=20), Moderate stress (n=28), Severe (n=4), and Stress level is potentially dangerous (n=6)

**Table 4 Association of Gender, Qualifications, Working Setting, and Specialty with Workplace Stress**

		Workplace stress										Likelihood ratio	P value
		Chilled out and relatively calm ≤		Fairly low (16-20)		Moderate stress (21-25)		Severe (26-30)		Stress level is potentially dangerous (31-40)			
		n	%	n	%	n	%	n	%	n	%		
G Gender	Male	2	66.7	15	75	22	78. 6	4	100	0	0	18.60	0.001*
	Female	1	33.3	5	25	6	21. 4	0	0	6	100		
Qualifi cation	BOT	3	100	18	90	28	100	4	100	4	66.7	8.89	0.064
	MOT	0	0	2	10	0	0	0	0	2	33.3		
Working setting	Clinic	2	66.7	15	75	28	100	4	100	1	16.7		

	Hospital	0	0	4	20	0	0	0	0	4	66.7	32.55	0.001*
	Other	1	33.3	0	0	0	0	0	0	0	0		
	Private practice	0	0	1	5	0	0	0	0	1	16.7		
Speciality	Neurology	0	0	0	0	1	3.6	0	0	2	33.3	18.66	0.287
	Ortho paedics	0	0	1	5	0	0	0	0	0	0		
	Paediatrics	3	100	12	60	21	75	4	100	3	50		
	Psychiatry	0	0	6	30	5	17.9	0	0	0	0		
	Rehab ilitation	0	0	1	5	1	3.6	0	0	1	16.7		

The Likelihood ratio test was used to find the association of gender, qualifications, working setting, and specialty with workplace stress. The gender as well as working setting were associated ( $p < 0.05$ ) with workplace stress.

**V. DISCUSSION**

The survey highlights the results of the study interpreted from the statistical analysis. The present study was conducted to evaluate workplace stress among the working occupational therapy professionals in Chengalpattu district. Based on the inclusion criteria, 61 participants were selected by a convenient sampling method and workplace stress was assessed using The Workplace Stress Scale.

Table 1 shows a total of 61 occupational therapists participated in this study. This describes age, years of experience and average hours worked per week. The participants' age ranged from 22 to 32 years. Regarding professional experience, the duration of practice as occupational therapists ranged from six months to six years. The average no. of hours worked per week ranged from 15 to 70 hours .This variability highlights a significant difference in workload among participants, potentially due to differences in work setting and caseloads.

As shown in table 2, the gender distribution of participants was inclined towards male, who made up the majority of the sample (n=43), while females constituted (n=18). In terms of academic qualifications, the significant majority of participants i.e., (n=57) held a Bachelor's degree in Occupational therapy, while only a small portion (n=4) had obtained a Master's degree. The distribution of work settings among participants revealed that a significant majority of (n=50) worked in clinics. This was followed by those employed in hospitals (n=8), private practice (n=2) and other settings (school) (n=1). The dominance of clinic-based work suggests that outpatient care forms the primary practice environment. In terms of area of specialization paediatrics was the most common speciality with (n= 43) of participants working in this field. Other specialities included psychiatry (n=11), neurology (n=3), rehabilitation (n=3) and orthopaedics (n=1).

The results presented in Table 3 show that workplace stress among the participants was assessed and categorized into five levels. The most commonly reported stress level was moderate stress, experienced by 28 participants, indicating that nearly half of the participants are operating under conditions of sustained pressure. This was followed by 20

participants who reported experiencing a fairly low level of stress. Notably, 6 participants fell into the category of potentially dangerous stress levels, and 4 participants were found to have severe stress. Only 3 participants reported being chilled out and relatively calm, indicating very low levels of work-related stress. These findings are consistent with those of Kushal (2018), reported that most healthcare professionals experienced moderate stress. Similarly, Ananya Roy (2022) reported that workplace stress is a significant predictor of burnout among mental health professionals, especially contributing to emotional exhaustion and depersonalization.

Table 4 examines the association between gender, educational qualifications, work setting, and specialty with levels of workplace stress among occupational therapists. The study included 43 male participants and 18 female participants, though there was an imbalance in gender distribution. Gender showed a significant association with workplace stress ( $p=0.001$ ), with females appearing to experience higher stress levels. Educational qualification was not statistically significant ( $p=0.064$ ). The work setting demonstrated a strong association with stress ( $p=0.001$ ); all cases of moderate stress (n=28) were reported by participants working in clinical roles, indicating that these jobs are the most stressful. Specialty was not significantly related to stress ( $p=0.287$ ).

**VI. CONCLUSION**

The present study aimed to evaluate workplace stress among occupational therapists practicing in Chengalpattu district. The findings indicated that the majority who have participated in the study, experience moderate levels of workplace stress. A statistically significant association was found between work setting and stress levels, while no significant association was observed with educational qualification or area of specialization. The results also revealed demographic imbalances within the sample, including uneven gender and qualification distributions, which may limit the generalizability of the findings. Overall, the study highlights that Occupational therapists are having workplace stress.

**VII. LIMITATION**

- The sample population had uneven gender distribution
- Educational qualifications were not evenly represented

## RECOMMENDATION

- Study can be conducted on larger population
- Participants can be chosen from various place
- Study can be conducted on exploring the impact of organizational culture and leadership styles on workplace stress among occupational therapy professionals
- Study can be conducted on comparing the workplace stress of occupational therapists working between metropolitan cities and Rural areas

### ➤ Declaration by Authors

- Ethical approval: Approved
- Acknowledgement: I am deeply indebted to our lord almighty for his abundant grace.

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