

## **PRIORITIZING STRATEGIC RESOURCES: MENTAL HEALTH AND WELLBEING OF HEALTHCARE PROFESSIONALS**

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### **INTRODUCTION**

Pakistan's healthcare sector has historically struggled with workplace well-being, particularly concerning mental health due to persistent resource shortages in the hospitals. These resources include both infrastructural and personnel-based capabilities and skills and are critical to the sustainability of a resource-rich healthcare ecosystem.

The current situation in Pakistan in general and Sindh in particular raises a critical concern: can the strategic utilization of resource bundles enhance the well-being and mental health of healthcare workers and improve Pakistan's healthcare system? Addressing these challenges requires designing and implementing initiatives that effectively mobilize critical resources and assets that can be sustained over time enhance healthcare workers' mental well-being and improve the overall healthcare delivery system in Pakistan, particularly in Sindh.

In this context, there is a scarcity of evidence-based research within healthcare to guide decision-making in creating resource-rich environments that are sustainable over time to provide a mentally healthy workplace.

Therefore, this study aims to explore this issue through the lens of the conservation of resource theory (CRT) and capability theory. The study seeks to determine the nature of critical resources required ways to improve the effective utilization of available financial and human resources and necessary equipment, and how their use may or may not promote positive well-being outcomes in the healthcare setting.

### ***Objectives of the Study***

1. To identify the sources of stress prevalent in healthcare centers, clustered around the lack of resource bundles necessary to ensure the well-being of medical staff in prolonged patient contact.
2. To explore organizational investments required in tangible and intangible assets that promote resource gain and enhance healthcare professionals' well-being.
3. To assess the impact of resource availability on the mental health and burnout of healthcare workers and review the trends, causes, implications, and interventions required to address mental health issues among medical professionals.

### ***Research Questions***

1. To what degree do organizational factors within healthcare centers contribute to a resource-poor environment?
2. To what extent does a resource-poor environment contribute to the mental health of healthcare workers?

3. How efficient are healthcare centers in provisioning proper human resources, infrastructure, and critical equipment, and what are the implications for healthcare delivery and patient outcomes?

## RESEARCH METHODOLOGY

This study utilized a qualitative research approach to examine the stress experienced by healthcare workers based on their lived experiences in Pakistani hospitals, focusing on both public and private sector health organizations.

### Study Population and Selection Criteria

Healthcare workers from hospitals in Sukkur and Karachi were targeted. Hospitals were selected if they had at least 150 beds, 2 operating theaters, and 1 intensive care unit (ICU) to ensure a diverse and relevant sample.

Stratified sampling was employed to select participants, dividing the population into strata based on job roles: doctors (including MS doctors, surgeons, consultants, postgraduate residents, house officers, and medical officers), nursing staff, operation ward technicians, lower staff, and administrative staff. This ensured a comprehensive representation of the healthcare workforce.

In-depth interviews were conducted using open-ended questionnaires to elicit detailed responses about the challenges faced by healthcare workers and their impact on well-being and burnout. Two pilot interviews were initially conducted to refine the questionnaire based on feedback.

A total of 26 interviews were recorded after obtaining permission from the interviewees. Interviews were concluded when saturation was reached. Thematic analysis was applied to identify and interpret key themes related to the experiences and challenges of healthcare workers.

Through a reiterative procedure using expert opinion the initially formulated themes were reduced to the following 6 main themes that in our opinion are critical for the development of targeted solutions and recommendations:

1. Managing Patient Inflow Overload
2. Resource Availability and Management
3. Training and Development
4. Patient Interaction and Management
5. Stress Coping Strategies
6. Working Environmental Factors

## DISCUSSION

### *Critical Issue: Overwhelming Patient Load*

The overwhelming patient load in tertiary hospitals, particularly in Karachi, severely impacts the mental health of healthcare workers. Hospitals receive patients from both urban and rural areas, leading to unmanageable workloads. This excessive demand often results in high stress and burnout among doctors and nurses, who sometimes face situations where two patients with different diseases share a single bed.

### ***Non-Refusal Policy:***

Public sector hospitals in Sindh operate under a non-refusal policy, accepting all patients regardless of capacity. This policy adds to the patient load caused by a high demand for free or minimal-cost services. This relentless demand underscores the need for increased funding, workforce expansion, and policy revisions to improve healthcare environments and worker well-being.

### ***Capacity Limitations and Overcrowding:***

Hospitals are staffed based on bed numbers, not actual patient volumes, leading to overcrowded outpatient departments. Doctors often see over 150 patients in a six-hour shift, causing extreme stress and burnout.

### ***Inadequate Primary and Secondary Healthcare Facilities:***

The lack of adequate healthcare facilities in rural and semi-urban areas forces patients to seek care in city-based tertiary hospitals, worsening patient overload. Improving primary and secondary healthcare infrastructure is crucial to reducing pressure on tertiary hospitals.

### ***Insufficient Training and Mentoring:***

A significant lack of mentoring and training for young doctors, nurses, and paramedics contributes to their inability to handle workload stress and patient interactions. Historically, senior doctors played a crucial role in mentoring, but increasing workloads and personal clinical focuses have led to disengagement from these roles. Enhancing skills through ongoing training and mentoring is essential for improving healthcare workers' performance and well-being.

### ***Patient Behavior and Education:***

Healthcare workers face considerable stress dealing with uneducated patients and their attendants, who often lack basic hospital etiquette, leading to chaotic environments. Systematic public health education campaigns to improve patient behavior and hospital etiquette could significantly reduce this stress.

### ***Lack of Communication and Coping Training:***

The absence of professional training in communication, stress-coping strategies, and resilience exacerbates mental health issues among healthcare providers. Implementing training programs to develop these skills is crucial.

## **RECOMMENDATIONS**

The mental health challenges faced by healthcare workers in Sindh and Pakistan generally, particularly those in government tertiary hospitals, pose a significant risk to the already stressed healthcare system. These issues have been briefly presented in the early discussion section while addressing these challenges requires comprehensive policy formulation and strategic resource allocation, which are encapsulated in the following policy recommendations to alleviate the stress and improve the efficiency and effectiveness of the healthcare system in Sindh Pakistan.

### ***Implementation of a General Practitioner (GP) System***

*Recommendation:* Develop and implement a system similar to the GP system in the UK.

*Rationale:* The unmanageable patient load in tertiary hospitals can be significantly reduced by establishing a primary healthcare network that serves as the first point of contact for patients. This system will ensure that only cases requiring specialized care are referred to tertiary hospitals.

*Action Steps:*

**Pilot Program:** Initiate a pilot program in a major urban center to establish GP clinics in various neighborhoods.

**Integration with IT:** Develop an IT application to facilitate seamless referral processes and patient record management.

**Training:** Provide training for GPs to handle a wide range of medical issues, thereby reducing the burden on tertiary hospitals.

### ***Strengthening Secondary Healthcare Facilities***

*Recommendation:* Allocate resources to enhance secondary healthcare facilities in catchment areas of urban tertiary hospitals.

*Rationale:* Divert resources from developing more tertiary hospitals in urban centers to develop and strengthen secondary healthcare facilities to stem patient flow from these catchment areas particularly those patients who have no serious medical issues and ensure timely medical intervention at an earlier stage at points which are easy to reach for patients.

*Action Steps:*

**Resource Allocation:** Redirect funds to build and equip secondary healthcare units in strategic locations identified based on patient data from existing tertiary hospitals.

**Capacity Building:** Increase the capacity of existing secondary healthcare facilities to handle more patients and provide a broader range of services.

**Accessibility:** Ensure these facilities are easily accessible to the populations they serve, particularly in semi-urban and rural areas. This will also reduce funds spent by patients when traveling with their attendants to distant city centers.

### ***Public Education on Hospital Etiquette***

*Recommendation:* Launch public health education campaigns focusing on hospital etiquette and patient behavior.

*Rationale:* Educating patients and their attendants about proper hospital behavior will reduce the stress on healthcare workers and improve the overall hospital environment.

*Action Steps:*

**Social Media Campaigns:** Utilize social media platforms and influencers to disseminate short, engaging videos on hospital etiquette.

**Information Dissemination:** Create educational content to be displayed in hospitals and clinics, funded by the health ministry.

**Community Outreach:** Conduct community outreach programs to raise awareness about the importance of following hospital protocols.

Improve signage: Develop and position hospital guiding and instructional signages' including voice messages in local languages in public places located in hospital compounds that are easily understood by everyone.

### ***Professional Training for Healthcare Providers***

*Recommendation:* Incorporate comprehensive training programs for doctors, nurses, and paramedical staff focusing on communication, stress management, and conflict resolution.

*Rationale:* Proper training in these areas will equip healthcare providers with the necessary skills to handle the emotional and psychological demands of their roles, reducing stress and improving patient care.

#### *Action Steps:*

**Curriculum Development:** Develop and integrate courses on communication, human behavior psychology, and stress and conflict management into medical education.

**Continuous Education:** Establish ongoing training and development programs to ensure that healthcare providers remain updated with best practices not only in their professional subjects but refresher training programs addressed on the lines used by SMEDA where they subsidize the fee to encourage participation.

### ***Enhancing Mentorship and Support Systems***

*Recommendation:* Strengthen the mentorship and support systems for young healthcare professionals.

*Rationale:* Revitalizing the role of senior doctors as mentors will provide young healthcare workers with the guidance and support they need to navigate their professional responsibilities effectively.

#### *Action Steps:*

**Mentorship Framework:** Develop a structured mentorship framework that pairs young healthcare providers with experienced professionals.

**Incentives for Mentors:** Provide incentives for senior doctors to actively participate in mentorship programs especially as beyond their hospital duties they are engaged in their private clinics to enhance their incomes.

**Feedback Mechanisms:** Implement feedback mechanisms to continually improve the mentorship process based on the experiences of both mentors and mentees.

### ***Conclusion***

Addressing the mental health challenges faced by healthcare workers in Sindh Government hospitals requires a multifaceted approach. By implementing a GP system, strengthening secondary healthcare facilities, educating the public, providing professional training, and enhancing mentorship programs, it is possible to alleviate the burden on healthcare providers. These measures will not only improve the well-being of healthcare workers but also enhance the overall quality of healthcare services in Sindh, Pakistan.