

Level Of Occupational Stress Between Male And Female: A Comparative Study Among Medical Professionals Javed

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Javed and Dr. Mahreen Siddiqui (2022). Level Of Occupational Stress Between Male And Female: A Comparative Study Among Medical Professionals , JQSS Journal of Quranic and Social Studies, 2(1), 87-94. **Abstract:** Objective: Present study aims is to investigate the level of occupational stress among male and female doctors in medical settings. Place and duration: The study was conducted from August 2021 to October 2021 in Balochistan. Sample and Method: Total sample comprised of 80 medical professionals including male (n=40) and female (n=40) of ages between 30 to 50 years (M=32.2, SD =2.04) recruited from different hospitals and clinics from Quetta (Balochistan).

Measures: Following measures (i.e., Personal Information Form and Occupational Stress Scale (G. Weiman, 1978) were administered. Descriptive statistic was used to elucidate the characteristics of sample and analysis of variance (ANOVE) and t-test applied to investigate significant mean difference on gender and non-significant on age level of occupational stress.

Results: Results reveled that significant different in score of medical professionals on occupational stress. This means that of the gender group showed influenced of occupational stress. Findings could help the medical and healthcare professionals to cope up or management of their occupational stress in future.

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Introduction

Moorhead and Griffin (2001) discussed that stress is response to stimulus; it can be physical or psychological. Occupation stress cab be physical, psychological and emotion negative and harmful impact on the individual life and work environment (Richardson & Rothstein, 2008). Occupational stress is physical, psychological and emotional negative influence on the individual work and situation (Butts et al, 2009).

Research identify that occupational stress play an important role in social life, normal and appropriate stress can help out to solve different aspects of daily life and promote our energies to get success or achievements, while chronic stress to developed challenges and problem, like psychological problem (Depression, Anxiety and Stress) fatigue, hypertension, cardiovascular diseases and insulin resistance ((Philbert, 2011; Herbison et al., 2017; Kivimäki & Kawachi, 2015). A research conducted by Abushaikha, Hazboun, (2009.) described that medical professionals (Nurse and Doctors) are specifically vulnerable jobs where unrests easily determine psychological and subjective wellbeing.

Past studies describe that male physician psychological capital not moderate with occupational stress and depressive symptoms but female physician over duty mediate with psychological capital and psychological capital moderate with depressive symptoms (Liu, Chang & Fu, 2012). Another finding of the research showed that to male and female general practitioners to assess the level of occupational stress and job satisfaction, results indicated that male were higher occupational stress and less job satisfaction, female were low occupational stress and higher job satisfaction (Swanson & Simpson, 1996). Research has been proved that impact of occupational stress can be physical, psychological and spiritual and it directly affect nurses and doctor's mental health (Shinde, M., & Anjum, S. 2014). Research showed that male doctor were more stress as compare to female General practitioners (GPs) doctor, male doctor given full-time basis duty and experience more stress then who were past-time basis (Dua, 1997). According to McKevitt et al. (1995) female doctor were higher influences of stress as compare to general population and higher risk of suicide rate 72%. Some studies reported that women were higher experience of occupation stress due to load work, discrimination, sexual harassment, such as token status, stereotyping, demand of marriage and social isolation (Nelson and Quick 1985; Burke 1987).

Xiang et al., 2020; Zhang et al., (2020) conducted a research on DOVID-19 pandemic which is also challenge for medical professional those who are facing more stress as compare to general public, because they are working as a front line workers, whereas anger, loneliness, depression, anxiety, fear of death and stress are common problems.

According to Gulavani & Shinde (2014) occupational stress negative relationship with job satisfaction, nurses health and care of patients. Another study describe that those medical professionals who feel higher stress they are more negative and less satisfied with their jobs, which directly affect patients health (Richardson and Burke, 1991). According to Rashid, Talib, (2015) Indian public hospitals identified that male doctors were more experience of job stress then female doctors, and also job stress also dependent often geographical area, score of dissatisfaction was higher disturb in doctors due to environment. Research indicated that burnout and job satisfaction significantly associated with one and other, Hypothetical concept that when burnout increases then decrease the level of job satisfaction (Alarcon, 2011; Brewer, 2002). Studies describe that level of the occupational stress higher in medical professional then general public due to weak coping strategies (Zhang, Shao & Lin, et al, 2014). Furthermore research findings indicate that one cause of female nurses stress is prejudice against women due to conflict and lack of support colleagues (Cartwright 1987; Bowman and Allen 1990). According to Croix and Haynes (1987) male gender mechanisms is strong then female gender especially to manage their stresses.

Method

The present research purpose was to assess the level of occupational stress male and female in medical professionals.

Participants

Data were collected form eighty participants from various hospitals of Quetta (Balochistan) . Including male (n=40) and female (n=40) medical professionals.

Instrument

- a) Self- designed Personal information form
- b) Occupational Stress Scale was developed by Clinton G. Weiman (1978) while this scale consists with 32 item and 5-points Likert scale 1 (Never) to 5 (never always).

Procedure

Before the data collection research participants were inform about the purpose of research and there data will be confidentially. Data collected from different medical professional MBBS. After data collection to explore the level of occupation stress in male and female, t-test was analysis to assess the gender difference in medical professionals, through SPSS (Statistical Package for Social Science) version-21.

Table 1

Differences in Mean of Medical professionals from two Gender groups on their score

of Occupational stress (N=80).

Scale	no of	Men(<i>n</i> =40)		Women(n=40)		Т	р	CI 95%		Cohen's
	Items	М	SD	М	SD	(78)		LL	UL	D
Occupatio	32	111.58	17.852	122.90	13.780	-3.162	.001			0.709
nal stress										

Note. = significant

Results reveled in Table 1 indicate significant different in score of medical professionals on occupational stress. This means that of the gender group showed influenced of occupational stress.

Table 2

Analysis of variance (ANOVA) showing Mean Difference of Medical Professionals

Group	п	Mean	SD	F	р	
20-30	6	126.50	18.141	072	.975	
31-40	23	123.61	13.443		(N.S)	
41-50	34	124.15	12.766			
51-60	17	124.35	13.856			

from Age groups on their scores of occupational stress (N=80).

Note. N. S= non-significant

The table 2 indicates the mean differences among the medical professionals from various levels of age on Occupational stress. Results revealed significant (p .05) difference in score of Medical professionals

from four levels of age on occupational stress. This means that levels of age may show influence on display of occupational stress.

Discussion

Stress is a general condition while occupational stress is specific, stress is primary physical, psychological and social but occupational stress as related to job or work which is faced by employees or works (Ganster & Schaubroeck, 1991). Research indicated that when conflict start between workplace load and ability of person then occupational stress imitate (Cooper, 2001). Result of the present research was draw by applying to ttest and ANOVA for assessing the mean difference of mean between male and female medical professional on occupational stress.

The current study Analysis of variance (ANOVA) was executed to analyze the age group on occupational stress. First age group consists 20-30(n=6, M=126.50), the reason was behind that they are newly started their jobs might be they were suffer in stress. They were much busy and their clinical practices were on high level and have responsibility of families. Second age group consists 31-40 (n=23, M=123.61), they are young and energetic. Third age group consists 41-50 (n= 34, M=124.15), Forth age group consists 51-60(n=17, M=124.35). Result of Analysis of variance (ANOVA) is non-significant on occupational stress.

Previous studies indicated that female doctors are more and significant involve in occupational stress compare to male doctors, female doctor lead to highly job severity (emotional exhaustion and depersonalization), because low salary, lack of support and promotion related issues (Peltzer, Mashego & Mabeba, 2003). Studies showed that female doctors were more responsible and punctual to performing their duties. Mostly female medical professional deal with their families as well workplaces therefore they are overburdened. Research indicates that higher level of occupational stress finds youngest age group (20-30) in medical professionals (Colff & Rothmann, 2014). The aims of the present study and others research to assess in consistency of occupational stress in cross-culture age and genders. The present study results are consistent, so the reason of the population, sample size and research design.

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