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Knowledge Landscape and Trend Analysis of Project-Based Impact of Occupational Stress and Job Burnout on Turnover Intentions in Context of Paramedical Workers in Gujarat India

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Abstract

Stress is a significant factor affecting individual efficacy and satisfaction in modern organizations. Social stressors and occupational stressors are environmental events and social conditions that can induce stress. This study investigates work stress, socio-demographic factors predicting depression and turnover among paramedical workers in Gujarat. Study employs cross-sectional survey, quantitative data collection, standard questionnaire instruments. Study selects 150 participants using convenient sampling techniques. Data collected through three standardized instruments namely; Depression scale (CES-D), Workplace Stress Scale (WSS) and Turnover Intention Scale (TIS). Job burnout negatively impacts work stress and plans to leave, partially explaining the association. Human life revolves around work, expressing our innate need for task completion, art, and significance. Occupational stress poses health risks, including low productivity and absenteeism. The Study concludes that the work stress reduction in frontline paramedical workers prevents depression and potential turnover intention. Health professionals experience more stress due to their jobs' demands, personal vulnerability, and inadequate organization.

Keywords: *Depression, Turnover intention, Occupational stress, Paramedical professionals, etc*

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1. Introduction

Stress has been considered as a psychological problem that seriously affects human beings in modern society. The requirements of the modern working environment make stress at the workplace is unavoidable. Occupational stress can negatively impact physical and psychological health, leading to depression, a common behavioral disorder. Paramedical workers often experience occupational stress due to high demands and

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resource shortages, resulting in anxiety, burnout, and physical sickness. Job stress causes burnout, fatigue, absenteeism, staff turnover, decreased patient satisfaction. Job burnout from occupational stress is crucial for industrial policy.

2. Literature Review

Paramedical professionals in private clinics and hospitals experience occupational stress due to job demands. The study aimed to investigate depression and turnover intentions among paramedical professionals in Gujarat, aiming to improve management and intervention in occupational stress.

Work-related stress arises from poor organization, design, management, unsatisfactory conditions, and lack of support, while depression is a psychological state resulting from conflict and conflict (Ogba *et al.*, 2020). Depression is an emotional imbalance caused by conflict, characterized by a depressed mood, loss of interest, guilt, restlessness, appetite, energy, concentration, self-harm, social withdrawal, and deficits in social roles and occupational functioning (Hewitt *et al.*, 2009).

Work-related stress arises from uncomfortably high pressures and demands, often exacerbated by lack of support from managers and coworkers. This confusion can lead to poor management techniques and depression, the most common mental health issue, ranking second among general health issues by 2020. Depression is a common result of workplace stress, which arises from a mismatch between an individual's abilities and job requirements. This psychological and physical condition affects productivity, efficiency, effectiveness, personal health, and work quality (Comish and Swindle, 1994).

Occupational stress involves individuals facing uncertain and crucial outcomes due to opportunities, constraints, or demands (Stephen *et al.*, 2002). Depression is a common psychological mood illness causing anxiety and poor mood (Wells *et al.*, 1995). Study finds inverse relationship between employee sadness and job satisfaction. Suicidality, emotional tiredness, a lack of energy, anxiety, restlessness, guilt and humiliation, hopelessness, and alcohol consumption are some of the symptoms that people experience (Haar and Roche, 2011). Uncontrollable sobbing, lack of facial expressions, verbal undertone, Physical symptoms that are not specified continual exhaustion and there is a lack of pleasure and enthusiasm in formerly enjoyed pastimes due to a willingness to tolerate postponement mentality. A lack of decisive traits manifests itself in indecisiveness, resistance to making decisions, forgetfulness, and difficulty focusing. Self-confidence and self-esteem are diminishing. Another negative effect of depression is that it may cause workers to leave their occupations (Hotopf and Wessley, 1997; Stein, 2003; Garland, 2003; Grieco and Edwards, 2010; Dobson and Dozois, 2008).

Depression causes various factors and situations. Employees aware of situation and committed to leaving. (Hewitt *et al.*, 2009). Workplace stress arises from pressure to balance work and social responsibilities (Adesoji, 2004). Employees experience stress due to adverse emotional states at work, causing tension, frustration, worry, and depression (Hotopf and Wessely, 1997). Workplace stress involves despair and lack of enthusiasm for social responsibilities (Ogba *et al.*, 2020). Stress is defined by various psychological theories (Beehr and Newman, 1978) in particular, made significant contributions to occupational stress research (Corper, 1998). An introvert employee in a marketing position may struggle with efficiency due to their personality, causing occupational stress. Factors like inadequate management, poor work designs, leadership, poor environments, and competitive work cultures contribute to stress in today's business world (Koc, 2002). Workload is the primary occupational stress source (Mead, 2001).

High production rate and workload negatively impact employee performance, leading to increased stress. Workload increases workers' blood pressure and cholesterol, leading to increased stress (Gruber *et al.*, 2009). Workforce stress increased due to resource scarcity, communication issues, and supervisor discomfort.

Technology in the workplace should simplify work hours and provide more free time, but many organizations, especially clinics and hospitals, experience anxiety, decreased relaxation, and poor mental health. New technology increases employee effort and stress through software monitoring (Galleapie *et al.*, 2001). Technical training and technology introduction increase stress for paramedical professionals, potentially causing workplace changes (Subha and Shakil, 2010). Personal sales increasingly utilize social media, affecting paramedical workers' adoption and affordability due to job nature.

Paramedical professionals often perceive themselves as tools by employers, leading to isolation, stress, and depression. Technological advancements in large and small organizations create a talent gap, as sales agents lack adequate training and time allocation for competency enhancement. Performance stress arises from various factors like rotating shifts, deadlines, work distance, and monotonous work (Ahmed, 2013). Modern congested motorways increase employee stress levels. The distance to work place has an impact on occupational health since modern congested roadways enhance employee stress levels (Rubina et al., 2008). Working for such an income only leads to a loss of personal worth and a feeling of uselessness (Ongari and Angolla, 2008). Many employees are unaware of the stressor's long-term impact on their well-being (Deshpande and Chopra, 2007). Workplace stress is challenging to identify and manage due to unclear employment opportunities (Ogba et al., 2020). Employees working with disliked and difficult colleagues can cause significant professional stress, potentially harming long-term well-being (Bashir and Ramay, 2010).

Four nations found negative relationship between employee discontent and career satisfaction; focus on strengthening bonds and reducing stress (Haar and Roche, 2011). Work is a crucial life component, causing stress and difficulty for workers to maintain their jobs (Lambert, 2004). Modern vocations are increasingly bureaucratic, causing stress and shortages in cash, manpower, and support systems (Munali, 2005). Dwindling resources hinder effective job performance and strain (Kode-Ruyter, 2001; Kessler et al., 2001; Worksafe, 2013). Insufficient resources cause staff shortages, increasing occupational stress and putting pressure on workers. Technical training also impacts employee effectiveness (Gillespie et al., 2001). Individuals can bring skills to work, but some require education (Lambert, 2004). Employees require training for new software applications to improve performance and productivity (Rubina et al., 2008). Employees with proper technical training can improve their performance and efficiency in their jobs. However, inadequate training can lead to increased costs and stress. Employees may feel obligated to serve the company without receiving incentives, causing psychological stress in the workplace.

3. Depression and Turnover Intention

Effectiveness of a spatial model of cognitive behavioral coaching in the treatment of occupational stress in a sample of health professionals (Ogba et al., 2020). With pre-test, post-test, and follow-up assessments, the study used a group randomized wait-list control trial design. The study sample consisted of 150 people in total taken from various cities in Gujarat. The Immediate Intervention Group (IIG) and the waitlist control group were assigned to participants at random (WLCG). For a period of 12 weeks, the IIG engaged in a weekly 90-minute group SPACE model training session. At the baseline, post-test, and follow-up evaluations, data was obtained utilizing three approaches. The study used *t*-test statistics, repeated measures ANOVA, and post hoc analysis to examine data. Results showed that IIG participants reported lower levels of felt stress and stress symptoms compared to WLCG. No significant changes were observed between baseline, post-test, and follow-up.

Given that group SPACE model training intervention was effective in reducing perceived occupational stress and stress symptoms, even when occupational indices could not be reduced among secondary school administrators, it was concluded that group SPACE model training intervention can be used to help secondary school administrators overcome negative perceptions of occupational stress and stress symptoms. Early detection of depression in employees is crucial for reducing turnover intentions and protecting their health. ISSP's research in 32 countries revealed that employees in 32 nations intend to leave at an average rate of 9.5% (Shani and Pizam, 2009).

Employee turnover intention rates vary across countries, with France, Mexico, America, New Zealand, Australia, and Switzerland having the highest rates. One-fifth of employees express interest in leaving jobs, often due to better opportunities or dissatisfaction. The recruitment cost can range from \$276 to \$36,743 (Waldman et al., 2004). A six-month study on 105 US hotels revealed turnover significantly impacts profitability (Simons and Hinkin's, 2001).

Employee quits, resulting in 1.5 times higher expenses than hotel income if employee had stayed (Chikwe, 2009). Tourism and hospitality industries experience annual turnover ranging from 26% to 300% (Chalkiti and Sigala, 2009). Study on depression and employee turnover intention impacts hospitality establishment efficiency and customer satisfaction (The Canadian Tourism Human Resource Council, 2011; Wood, 1997: 141; Tanke, 1990; Boella, 1988).

4. Workplace Stress and Turnover Intention

Workplace stress can hinder employees' performance and lead to counterproductive behavioral and attitude effects. Severe work pressure, leads to a sensation of excessive energy use, which negatively impacts wellbeing. It arises when work demands consistently surpass job-relevant personal resources.

The association between work stress and turnover intention. Workplace stress was cited as a significant reason in the decision to leave Turkey. The study examined the relationship between ethical leadership, leader effectiveness, and employee turnover intentions, finding that workplace stress positively impacts turnover intentions. However, the association between job stress and turnover intention is not a cause-and-effect connection. Study finds job stress and work environment impact turnover intentions in Pakistani employees; work overload is not a major predictor; future research should include larger sample size and gender equality (Siddiqui and Jamil, 2015).

A study of 248 Pakistani marketing executives found a strong link between work stress and turnover intentions, with job overload significantly impacting work weariness (Giffith et al., 2000) (Figure 1).

The study examined the factors influencing turnover intention among Technical staff, involving 103 participants. It found that job stress had a significant positive and significant link with intention to leave. The study utilized SPSS version 16 for data analysis (Hassan and Mara, 2014).

A study in Iran found a strong link between job stress and turnover intention and occupation presentation among 286 employees. The study used Pearson correlation and SPSS 19 software to evaluate the data (Arshadi and Damiri, 2013).

Study examines stress, depression, and intention to leave among clinical nurses in Taiwan's NHI System based on demographic characteristics (Folkman and Lazerus, 1980).

Study examines stress, depression, and turnover intentions among Taiwanese clinical nurses based on demographic characteristics under the NHI System (Chiang and Chang, 2012).

A study in Northern Taiwan found that nurses in both internal and exterior medical wards, especially those inexperienced or married, experience higher levels of sadness and stress, leading to a greater desire to leave.

A survey of 110 bankers in Makurdi Metropli in Nigeria found work stress positively influencing turnover intention, with stress having a positive impact (Ucho, 2014).

5. Hypotheses

1. Occupational stress negatively predicts depression in paramedical workers in Gujarat's private hospitals.
2. Work stress significantly predicts intention to leave among paramedical workers in Gujarat's private hospitals.

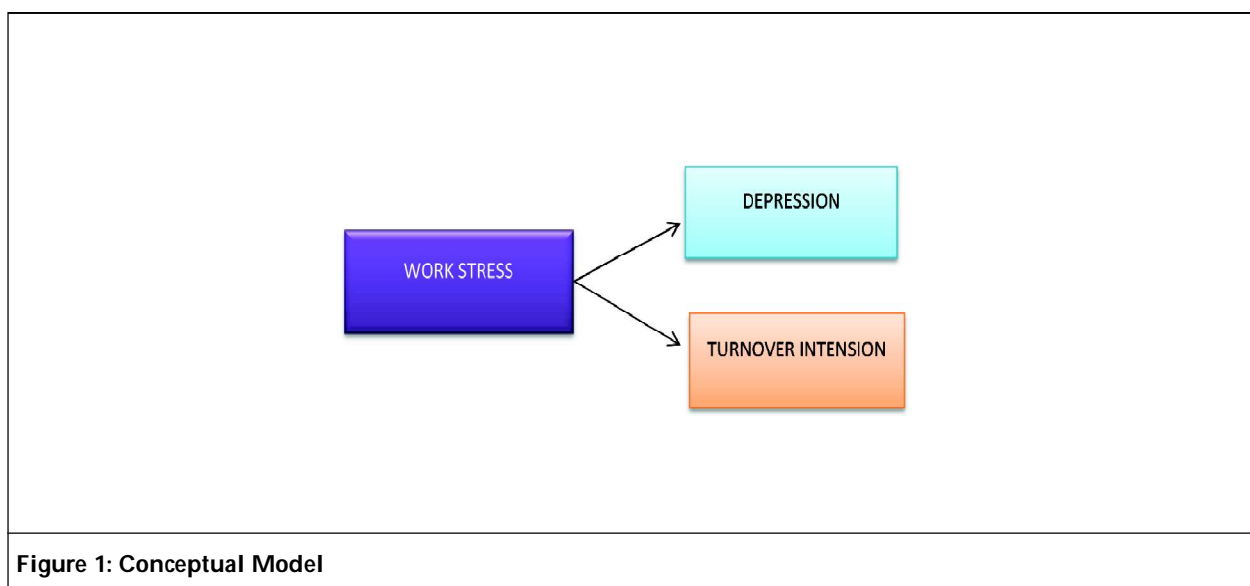


Figure 1: Conceptual Model

6. Method

The CES-D scale measures depressive symptoms in the general population, while the Workplace Stress Scale (WSS) is a 13-item questionnaire measuring job stress. The WSS measures anxiety and time stress, with anxiety being the second dimension and time stress being the first. WS affects job satisfaction, performance, and turnover intentions in developed countries, but limited evidence in metropolis areas.

7. Design

The study uses a cross-sectional survey design to collect quantitative data from paramedical workers from various cities in the Gujarat India, collected from July 2022 to September 2022, Standard questionnaire instruments were used.

8. Participants

A study of 150 paramedical workers from various cities in the Gujarat, was conducted using convenience sampling techniques, with 75 men and 75 women as the majority. The participants were aged between 20 and 50, with Hindu, Islam, and other religions being the major religions represented. The majority of the participants had higher secondary school, diploma, graduation, postgraduate diploma, and master's degree. The majority reported higher secondary and diploma as the highest qualification, followed by graduation, postgraduate diploma, and master's degree. Confidentiality and freedom to opt out were ensured.

9. Instruments

9.1. Turnover Intention

Turnover intention was measured with a Cronbach's alpha value of 0.867. Two items that described a negative attitude were reversal items and were calculated after being reversed as Plan to leave current employer soon, expressing desire to do so. The other positive items were following: "I plan to stay with my present employer as long as possible", and "Under no circumstances will I voluntarily leave my present employer". The scale was piloted on a sample of 33 sales representatives in wukari local government area of Taraba state (Okpamen, 2020). The results of component factor analysis indicate that item 2 with total correlation coefficient of 0.225 was too weak for further study and was therefore removed. Cronbach's alpha coefficient of 0.84 were reported by the current study.

9.2. Work Stress Scale

Workplace stress scale, developed by Marlin Company and American Institute of Stress, measures stress levels. It consists of eight items describing a respondent's feelings towards their job, such as unpleasant or unsafe conditions and negative effects on their physical or emotional well-being. The scale is in five-point Likert response format, ranging from never (scored 1) to very often (scored 5). A Cronbach's alpha reliability coefficient of 0.78 were reported for this scale.

9.3. Depression Scale

The CES-D is a self-reported depression scale with 20 items, including six subscales. It measures symptoms of depression, including mood, guilt, helplessness, psychomotor retardation, appetite loss, and sleep disturbance. The scale has high internal consistency with a Cronbach alpha of 0.85 to 0.90. The present study found 0.81 Cronbach alpha reliability (Radloff, 1977; Roberts et al., 1989).

10. Procedures/Analysis

Data organized and coded using SPSS 23; preliminary testing fulfilled basic conditions; hypotheses tested using regression analysis.

11. Results

Table 1 shows significant relationships between work stress, depression, and turnover intention, with negative and positive effects.

Table 1: Correlation Matrix Showing the Inter-correlation of Study Variables

Variables	Mean	SD	1	2	3	4	5	6	7
Age	2.171	0.89	1						
Gender	1.471	0.50	177**	1					
Religion	1.545	0.63	0.476**	0.64	1				
Education Qualification	1.613	0.78	0.199**	0.361**	0.552**	1			
Work Stress	3.002	0.51	0.096	-130*	0.997	-092	1		
Depression	2.633	0.35	-0.018	137*	0.232**	0.207**	-0.296**	1	
Turnover Intention	2.744	1.1	0.366**	-018	0.028	0.881	0.576**	-458**	1

Note: NB: ** significant at 2-tail, *significant at one-tail.

Table 2 shows work stress negatively predicts depression among paramedical workers in small and medium-sized private hospitals and clinics in Gujarat. Frontline officers, like sales representatives, may face daily stress, potentially leading to employee depression, confirming first hypothesis.

Table 2: Summary of Regression Analysis Showing the Influence of Work Stress on Depression

DV	IV	B	t	p
DEPRESSION	WORK STRESS	-296	-5.435	< 0.01

Note: DV=Dependent Variable, IV=Independent Variable.

Table 3 shows work stress is a positive predictor of turnover intention among paramedical workers in small and medium-sized private hospitals and clinics in Gujarat. This suggests that despite stress, frontline professionals like Lab Tech tend to keep their jobs, confirming the second hypothesis.

Table 3: Summary of Regression Analysis showing the Influence of Work Stress on Turnover Intention

DV	IV	B	t	p
TURNOVER INTENTION	WORK STRESS	0.576	12.37	<0.01

Note: DV=Dependent Variable, IV=Independent Variable.

12. Discussion

Work stress has been confirmed as a predicting factor of depression from several studies. Paramedical workers face significant work demands, including health aid promotion and service promotion, impacting their organizational image. Prioritizing their jobs can lead to work stress, depression, and frustration, affecting their psychological wellbeing and potentially causing them to consider quitting.

Many organizations reduce work stress by increasing employee welfare packages, but this can be costly. Healthcare professionals face challenges due to socioeconomic inequities, health services, and cultural differences. It is crucial to differentiate between health and healthcare to avoid misinterpreting the former.

In addition, the result of this study also reveal work stress as a positive significant predictor of turnover intention, work stress lead to frustration and depression at work which can also make an employee consider the option of quitting. However for this study population, sales representative most at time may lack the option of alternative jobs especially in their current location or cities and therefore decided to stay on their job why hoping for a better job, some sales rep. track long distances every day in the course of doing their job because their organization lack the capacity to provide mobility. This finding is in agreement with Gilboa *et al.* (2008) and Ahmed (2013). Effective coping depends on personality and situational factors. Further research is needed to explore the mediating role of personality in coping with job stress among paramedical workers.

13. Conclusion

Occupational stress and job burnout significantly impact quality of life, with high levels reducing overall well-being. Job burnout mediates the relationship between stress and quality of life, highlighting the need for effective interventions and prevention strategies. Minimizing occupational stress can reduce depression and turnover intentions among frontline paramedical professionals in Gujarat.

14. Recommendations

Based on the finding of this study, the following recommendations are made:

Organizational interventions include adjusting working conditions, providing support, and improving communication skills. Cognitive behavioral therapy, physical relaxation, and mental calmness can moderate workplace stress. Training and instruction on stress management can help employees cope with stress. Organizational reform can enhance productivity while lowering employee stress levels. Reducing turnover rates in paramedical professionals involves focusing on work load, role conflict, family considerations, and working environment. Local governments should implement stress-reduction strategies, such as clear job descriptions, cooperative culture policies, and stress management programs, at various levels.

Contribution of the Author

The authors had full access to all of the information in this research study, which has been studied and approved the final manuscript. The author is sole responsible for the conceptualization, design of the study, review of related literature and discussion.

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Conflicts of Interest

The authors declared that there is no competing interests.

Ethics Approval

Applicable and Permitted.

Consent to Participants

Applicable and Permitted.

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