

Exploration of Factors Affecting Quality of Life among Frontline Health Workers in a Federal Government Hospital in Nepal

Sunar Chandra B.¹, Bhattarai Srijana², Khatiwada Kabita³,
Paneru Damaru P.⁴, Elengoe Asita⁵

¹Ph.D. Scholar, Department of Health Science, Lincoln University College, Malaysia, ^{2,3}Master of Public Health, Department of Public Health, Modern Technical College, Nepal, ⁴Doctor of Philosophy in Public Health, Department of Public Health, School of Health and Allied Science, Pokhara University, Pokhara, Nepal, ⁵Doctor of Philosophy in Bioscience, Department at the Faculty of Applied Science, Lincoln University College, Malaysia.

How to cite this article: Sunar Chandra B., Bhattarai Srijana, Khatiwada Kabita et al. Exploration of Factors Affecting Quality of Life among Frontline Health Workers in a Federal Government Hospital in Nepal. Indian Journal of Public Health Research and Development / Vol. 16 No. 4, October-December 2025.

Abstract

Background: Quality of life is a vital component of human well-being, especially for frontline health workers who serve as the primary point of contact for healthcare delivery. Understanding their job satisfaction and its influence on their quality of life is crucial for effective health system functioning.

Methods: This exploratory qualitative study assessed the quality of life of frontline health workers in a federal-level government hospital in Nepal. Twenty participants were purposively selected, with the sample size determined by information saturation. Face-to-face key informant interviews were conducted, audio-recorded with informed consent, and analyzed using thematic analysis with the RQDA package in R. Ethical approval was obtained from the Nepal Health Research Council, and administrative approval from the Ministry of Health and Population.

Results: The study identified poor quality of life among frontline health workers across four domains. In the physical domain, issues such as chronic back pain, varicose veins, and gastritis were linked to long-standing duties and demanding schedules. Psychological challenges included poor mental health and stress. Social and environmental issues highlighted group conflicts, workplace political influence, lack of motivation, and a growing trend of brain drain among health workers.

Conclusion: The findings advocate for strengthened workplace policies, including reasonable working hours, adequate staffing, attractive pay scales, and supportive work environments, to improve the quality of life of frontline health workers. Addressing these issues is critical for fostering job satisfaction and ensuring a resilient healthcare workforce.

Keywords: Frontline health workers, Quality of life, Factors

Corresponding Author: Chandra Bahadur Sunar, Ph.D. Scholar, Department of Health Science, Lincoln University College, Malaysia.

E-mail: chandra.sunar123@gmail.com

Submission date: January 17, 2025

Revision date: March 21, 2025

Published date: September 24, 2025

This is an Open Access journal, and articles are distributed under a Creative Commons license- CC BY-NC 4.0 DEED. This license permits the use, distribution, and reproduction of the work in any medium, provided that proper citation is given to the original work and its source. It allows for attribution, non-commercial use, and the creation of derivative work.

Introduction

Quality of life is an individual's perception of their position in life in the context of the culture and value systems in which they live.^[1] Quality of life consists of different dimensions including work environment, organizational culture and climate, relationships and cooperation, training, compensation rewards, facilities, job satisfaction, job security, the autonomy of work, and resources which can affect the effectiveness and performance of the organization. Well-satisfied employees with high quality of life can make their organization successful.^[1] Frontline health workers are the point of contact, the main components of WHO building block of health system and deliver a range of life saving interventions to prevent illness, death and disability.^[2,3] One of the study done in Nepal revealed 48% of nurses reporting low quality of life.^[4] Addressing the challenges faced by frontline health worker is essential for improving health outcomes. A high quality of work life (QWL) is crucial for an organization's ability to attract and retain employees. Numerous studies have shown that quality of life has a positive effect on various organizational and personal components, such as employee commitment and organizational effectiveness. On the other hand, quality of work life has a negative correlation with turnover, absenteeism, resignation, and work-life conflict. These insights emphasize the critical role of QWL in shaping organizational dynamics and individual experiences within the workplace.^[5]

Thus, the current study aimed to explore the factors affecting physical, psychological, social and environmental) domain of quality of life among the frontline health workers working in the selected government hospital of federal level.

Material and Methods

Study Design and Settings

This is a qualitative study performed among the frontline health workers working in the selected government hospital of federal level in Nepal using inductive approach.^[6] This study is a part of mixed method study conducted in federal level hospital in Nepal. Twenty respondents based on the theory of data saturation were chosen purposively from the 440 sample size of quantitative study.^[7]

Repeated information was received after the fifteen interviews and no new information was generated when reaching twenty interviews and this point of information saturation was decided as total sample size for the study. The study covered the frontline health workers of selected federal-level hospitals under the Ministry of Health and Population of Nepal. The duration of data collection was 4 months commenced from 2024/5/1st -2024/8/30th

Ethics

Approval of the study was taken from the Institutional Review Committee of Nepal i.e., Nepal health research council ref no: 13X9. Approval for conducting the study was taken from MoHP in accessing federal level hospitals. Written Informed consent was obtained from all participants before proceeding to data collection. Principal investigator conducted all interviews and one co-investigator took a field notes of the interviews.

Inclusion and Exclusion Criteria

Front line health workers of federal level hospital under MOHP, were included in the study. Front line health workers in the given study are those who are directly involved in patient care. Those are Doctors, Nurses and Health Assistant, pharmacist and lab technician. Those participants who were in long term leave were excluded from the study. Those residents' students and other medical student working as frontline workers were also excluded from the study.

Data Collection and Analysis

Data was collected through face-to-face interview techniques using semi structured interview guide. Member checking was done with two respondents after the interview. The audio recording was transcribed in Nepali language and then translated to English in a text file. Thematic analysis was done using the RQDA package of R-software, enabling a detailed exploration of key codes and themes.^[8] Coding was done by two independent coders and intercoder percentage agreement was computed which was 79%. The detail explanation of codes and themes along with verbatim were presented in word file after coding was done in RQDA software.

Results

The findings were summarized in four themes as per the objectives of the study. The four themes include the domains of Quality of life according to WHO.^[4]

- A. Physical domain
- B. Psychological domain
- C. Social relationships, and
- D. Environmental domain

A. Factors affecting physical domain of quality of life

The findings showed different factors affected the physical domain of quality of life. The following codes highlights the findings:

Workplace Hazards

The study revealed that workplace hazards, such as poor ergonomics, biosafety risks, and waste management issues, significantly impact the physical health of frontline health workers, leading to strain, increased risk of infection, and hesitancy in performing high-risk procedures.

Respondents revealed that KII 5-*"Many patients, including those infected with various diseases and geriatric patients in the final stages of life, come to us, bringing a range of illnesses, and in such situations, we also feel fearful of visitors."*

Respondents were concerned about the risk of bio hazards causing different physical disease. KII 20 - *"Positive samples do possess some occupational hazards."*

Physical Problems in Health

Respondents working in the frontline highlighted about the increase in threats of physical challenges, including back pain, varicose veins, fatigue, leg pain and gastric issues are common due to long shifts, standing for extended periods, and high patient volumes. KII 22 - *"standing for long periods often lead to back pain. Headaches caused by the chaos are also common"*

KII 11 -*"We often don't have time to eat, and we experience pain in our legs, back, and particularly gastric issues. Leg pain has become a major physical health*

problem, causing significant challenges"

Nature of Job

Long standing duty hours in both day and night shift contribute to physical exhaustion and irritability, which negatively affect the physical health leading to different somatic symptoms in frontline health workers and ultimately affecting physical quality of life.

One of the respondents revealed that KII 14 -"We can't differentiate between night and day and must be on call at all times. We neither get to sleep nor eat as humans are meant to, and this affects not only our physical health but also our mental well-being"

B. Factors affecting psychological domain of quality of life

Psychological domain is very crucial and an important aspect of mental health. To improve the quality of life for frontline health workers, it is essential to address factors such as insufficient salaries, lack of allowances, and inadequate motivational support. This study shed a light on different factors affecting the psychological health of frontline health workers.

Insufficient Salary

One of the respondents stated that; KII 6 - *"Although the salary is provided by the Nepal government, it seems insufficient considering the rising cost of living. It feels like it's not enough to keep up with inflation"*.

Supportive work environment, fair compensation, recognition, and adequate facilities play a significant role in enhancing mental well-being and job satisfaction. But the study revealed dissatisfaction on the wages, allowances provided to them

Lack of Rewards and Appreciation

Good incentives, recognition for the work, and praise for staff can serve as motivating factors which is lacking in the health care services as revealed by the study.

Work Pressure

One of the respondents revealed that *"Heavy workloads, such as one staff member managing an entire ward, create immense pressure. Long duty hours and the inability to take holidays due to staff shortages leave no time for refreshment"*

Stress

Stress in the workplace is driven by insufficient staffing, long hours, and high-pressure conditions which directly affects the psychological domain of quality of life.

Intimidating Situation

The finding revealed that frontline health workers face intimidating situations such as workplace violence, high-stakes decision-making, resource constraints, and ethical dilemmas, which can severely impact their mental health.

KII 8 - "We often feel unsafe in our workplace, approximately 50% of the time. At times, patients misbehave with us, threaten us, or even cause physical harm. The uncertainty of what might happen during a shift is genuinely frightening"

C. Factors affecting social relationship domain of quality of life

Frontline health workers focused the importance of a healthy work environment related to social relationship to maintain their well-being and uphold their job responsibilities.

Administrative Issues

Respondents pointed out that administrative issues often lead to mental stress, underlining the need for fair treatment from hospital management. When the administration treats its workers equitably, it has a positive effect on social relationship, directly enhancing their quality of life.

KII 19 - "Issues with administration can also cause mental stress. For instance, if there's a technical error in the attendance system and an employee is marked absent, the administration often refuses to understand the issue. Sometimes, even the smallest matters are blown out of proportion by the administration"

Senior Superiority Complex

The study highlighted about the behavior of senior staff, showing that excessive pressure or negative behavior from senior staff can lead to poor mental and social health outcomes for juniors, a problem that worsens when supervisors fail to collaborate with subordinates in creating duty schedules, further contributing to workplace stress.

The interplay between administrative fairness, supportive leadership, and cooperation among staff members is essential to maintain social relationship thus safeguarding the mental health and overall quality of life of frontline healthcare workers. One of the respondents revealed that; *KII 9 - "Another factor is the behavior of the in-charge or supervisor. When we are not treated appropriately, we feel stressed. When we need leave and it is denied, it severely impacts mental health. Therefore, supervisor plays a very important role in this situation as well"*.

D. Factors affecting environmental domain of quality of life

Environmental health plays a crucial role in maintaining and promoting quality of life of frontline health worker by addressing various factors that directly impact their well-being.

Limited Resources

The study revealed that limited resources often hinders efforts to improve healthcare infrastructure and access, leading to disparities in quality care. A lack of training among healthcare workers has exacerbated this issue, leading to inadequate knowledge and skills and compromising workplace safety and the effectiveness of care as revealed by the study.

KII 5 - "This is concerning because we are dealing directly with patients' lives, and such gaps in training should not exist. The lack of training is one issue"

Lack of Job Security

The findings revealed inconsistency in tenure among healthcare staff resulting in a lack of continuity, affecting patient outcomes. Due to the lack of job security, there is high turnover among health workers ultimately increasing work load and diminishing the environmental quality of life.

One of the respondents revealed that; *KII 11 - "Taking leave is difficult, and when we face problems, it's hard to get time off when needed due to the staff shortage. Additionally, we are required to work 6 to 7 hours straight, handling over 500 patients a day"*

Political Influence

Political influence and instability add another layer of complexity, as decisions driven by political

agendas can create delays in implementing essential policies are main contributing factors for quality of life as revealed by the study. Respondent revealed that; *KII 13 - "The hospital environment is highly politicized, with people often claiming connections to higher-ups and demanding priority. Having to focus solely on such individuals affects us significantly"* The participants highlighted the importance of workplace safety, recognizing its impact on job stability, professional satisfaction, and overall quality of life.

KII 3 - "The challenges we face are primarily related to training opportunities and promotions. These issues, like many others, are heavily influenced by the political scenario. Achieving improvements across all sectors requires political stability".

Unsafe Work Environment

The respondents in the study raised concerns about the unsafe work environment, struggling to adapt to a negative atmosphere, and fearing the potential effects of physical assault occurring in work place with fear and distress.

KII 14 - "Some individuals seem to take pleasure in others' misery, and incidents of physical assault or threats by visitors occur frequently".

Respondents also identified several issues in their workplace, such as unequal opportunities, gender-based violence, long working hours, and job insecurity, all of which negatively affected their mental well-being. *KII 22 - "Poorly managed duty hours, the lack of adequate resting stations, high patient loads, and the stress of handling large numbers of patients further exacerbate these challenges"*.

Discussion

The current findings regarding factors affecting physical domain of quality of life revealed that workplace hazards, long shifts, and the demanding nature of frontline healthcare jobs contribute to physical health issues such as back pain, varicose veins, fatigue, and gastric problems, significantly impacting the quality of life of health workers. This finding aligned with other study stated that Healthcare personnel experienced seven times the national rate of musculoskeletal disorders compared

with all other sector workers. It can directly affect the Quality Work Life of health professionals at and outside their workplace. The major influencing factors of Quality Work Life were unsuitable working hours, a lack of facilities for nurses and poor staffing.^[9]

The study provided insight that insufficient salaries, lack of rewards, heavy workloads, workplace violence, and high-pressure conditions severely impact the psychological well-being of frontline health workers, highlighting the need for better compensation, recognition, and a supportive work environment to enhance their quality of life. The findings from another study align with this study, highlighting the workplace violence in healthcare systems. Healthcare personnel are 16 times more likely to experience violence than employees in other sectors. With nearly 25% of violent incidents, including physical violence, verbal abuse, and sexual harassment, occurring within healthcare settings.^[10] This study further emphasized the multifaceted consequences that nurses face when subjected to workplace violence. The impact on their physical, mental, social, and professional well-being is profound, affecting not only their personal lives but also their work performance. These serious consequences affect both the safety of healthcare workers and the quality of care provided to patients, underlining the critical need for effective measures to address and prevent violence in healthcare environments. Similar study stated that, the health workers are exposed with various risky environment such as dealing with pandemic situation, contact with communicable disease, crisis of human resources, unsafe working environment while being encountered in conflict situation in day-to-day life while performing at the utmost role in workplace affecting quality life especially with psychological health.^[11] The another study also revealed that poor psychological health in work place can lead the health workers working in the frontline to low self-esteem and depressive symptoms.^[12]

The current finding explored that administrative issues, senior staff superiority, and lack of supportive leadership negatively impact the social relationships of frontline health workers, emphasizing the importance of fair treatment, collaborative management, and equitable workplace practices to safeguard their

mental health and quality of life. Similar finding with other study revealed that perceived workplace culture and supports contributed to symptom severity.^[13] The above findings also aligned with the finding of Ethiopia which revealed the poor management and supervision practice among health workers. Management problems like inappropriate working conditions, job insecurity, and inadequate professional development are highlighted similar to the current study.⁹

The current study revealed that environmental factors such as limited resources, lack of job security, political influence, and unsafe work conditions significantly affect the quality of life of frontline health workers by creating barriers to training, increasing workloads, and fostering dissatisfaction with workplace policies, highlighting the urgent need for stable, supportive, and well-resourced healthcare environments. These findings aligned with other study stating that healthcare personnel experienced lack of professional development opportunities, and an inappropriate working environment in terms of the level of security, patient care supplies and equipment. It can directly affect the Quality Work Life (QWL) of health professionals (HPs).^[9] By addressing key determinants such as access to adequate resources, workplace safety measures, including exposure to infectious diseases, physical hazards, and violence, and professional development opportunities, healthcare institutions can foster a supportive environment conducive to employee satisfaction and well-being.¹⁴

There are some limitations in the study. The sampling was done purposively from the list of health workers of federal hospitals, so the findings cannot be generalized to all health workers. The study do not provide a casual inference as it was intended to explore the descriptive phenomena regarding quality of life of health workers in the current situation.

Conclusion

Frontline health workers face significant challenges to their quality of life, including high stress, long hours, inadequate budgets, poor leadership, excessive workloads, and lack of recognition. Key issues such as unsuitable working hours, insufficient facilities, poor staffing, limited

professional development, and unsafe work environments highlight the need for targeted interventions to address mental health concerns, enhance their quality of life, and curb migration for better opportunities.

Recommendation:

The study urged to provide insightful recommendation to implement targeted policies to improve working conditions, provide adequate resources, and support professional development to enhance the quality of life and retention of frontline health workers.

Acknowledgement:

The author acknowledges the support and coordination provided by the government authorities of federal-level hospitals, which was instrumental in the successful completion of this study.

Source of funding: Nil

Conflict of interest: Nil

Reference

1. Kumar A, Bhat P, Ryali S. Study of quality of life among health workers and psychosocial factors influencing it. *Ind Psychiatry J* [Internet]. 2018 [cited 2024 Jan 30];27(1):96. Available from: https://pubmed.ncbi.nlm.nih.gov/30416299/DOI:10.4103/ipj.ipj_41_18
2. Coalition FHW. Frontline Health Workers. In 2011. p. 1-8. Available from: <papers2://publication/uuid/C50AE25B-4E54-4A91-AFFE-FDC91AD03756>
3. Vaidya A, Karki S, Dhimal M, Gyanwali P, Baral D, Pandey A, et al. Professional quality of life among medical doctors working in kathmandu: A descriptive cross-sectional study. *J Nepal Med Assoc.* 2020;58(231):900-4. DOI: 10.31729/jnma.5330
4. Koju GK, Pandey A. Quality of Life of Nurses Working in a Tertiary Level Hospital. *J Nepal Health Res Counc.* 2023;20(3):630-5. DOI: 10.33314/jnhrc.v20i3.4043
5. Sibuea ZM, Sulastiana M, Fitriana E. Factor Affecting the Quality of Work Life Among Nurses: A Systematic Review. *J Multidiscip Healthc.* 2024;17(February):491-503. DOI: 10.2147/JMDH.S446459
6. Kroll T, Neri M. Designs for Mixed Methods Research. *Mix Methods Res Nurs Heal Sci.* 2009;31-49. DOI: 10.1002/9781444316490.ch3

7. Boddy CR. Sample size for qualitative research. *Qual Mark Res.* 2016;19(4):426–32. DOI: 10.1108/QMR-06-2016-0053
8. Braun V, Clarke V, Braun V, Clarke V. *Applied Qualitative Research in Psychology.* *Appl Qual Res Psychol.* 2017;0887(2006). DOI: DOI: 10.1057/978-1-137-35913-1
9. Ayalew AF, Ma W, Tamir W, Mitiku K. Quality of work life and associated factors among health professionals working at private and government health institutions in Awi zone, Amhara regional state, Ethiopia, 2022: a comparative cross-sectional study. *Front Public Heal.* 2024;12(July):1–10. DOI: 10.3389/fpubh.2024.1377145
10. Hassankhani H, Parizad N, Gacki-Smith J, Rahmani A, Mohammadi E. The consequences of violence against nurses working in the emergency department: A qualitative study. *Int Emerg Nurs.* 2018;39(July):20–5. DOI: 10.1016/j.ienj.2017.07.007
11. Ibrahim T, Gebril A, Nasr MK, Samad A, Zaki HA. Exploring the Mental Health Challenges of Emergency Medicine and Critical Care Professionals: A Comprehensive Review and Meta-Analysis. *Cureus.* 2023;15(7):1–12. DOI: 10.7759/cureus.41447
12. Choi HJ, Yang CM, Lee SY, Lee HJ, Jang SH. Mental Health and Quality of Life for Healthcare Workers in a University Hospital Under COVID-19. *Psychiatry Investig.* 2022;19(2):85–91. DOI: 10.30773/pi.2021.0307
13. Young KP, Kolcz DL, O’Sullivan DM, Ferrand J, Fried J, Robinson K. Health care workers’ mental health and quality of life during COVID-19: Results from a mid-pandemic, national survey. *Psychiatr Serv.* 2021;72(2):122–8. DOI: 10.1176/APPI.PS.202000424
14. Woon LSC, Mansor NS, Mohamad MA, Teoh SH, Leong Bin Abdullah MFI. Quality of Life and Its Predictive Factors Among Healthcare Workers After the End of a Movement Lockdown: The Salient Roles of COVID-19 Stressors, Psychological Experience, and Social Support. *Front Psychol.* 2021;12(April):1–15. DOI: 10.3389/fpsyg.2021.652326.