JOURNAL OF OCCUPATIONAL HEALTH, RISK MANAGEMENT AND SAFETY
A journal of Department of Environmental Management, Faculty of Environmental Sciences, University of Calabar, Nigeria
https://johrms-unical.com.ng/

https://doi.org/10.60787/johrms.vol1no2.40 ONLINE ISSN: 3121-8806

Impact of Occupational Stressors on Healthcare Workers in Federal Psychiatric Hospital, Calabar, Cross River State

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Abstract
The study examined the impact of occupational stressors on healthcare workers at the Federal Psychiatric Hospital, Calabar, Cross River State, Nigeria. Occupational stress among healthcare workers in the hospital is widespread, often severe, and remains largely inadequately addressed despite the demanding nature of psychiatric healthcare. Staff are routinely exposed to numerous occupational hazards that reflect the realities of mental health service delivery. A survey research design with a quantitative approach was adopted, while stratified random sampling was used for data collection. Regarding the nature and types of workplace stressors, 21.2% of respondents reported "No experience", whereas 80% indicated notable "Experience" of workplace stressors. A high-stress work environment constituted the leading stress-inducing factor, accounting for 12.6%. Concerning the impact of staff shortages on service delivery, 29.1% identified staff shortages as a major challenge, while 31.1% reported experiencing high levels of psychological stress. Burnout was identified as the primary consequence by 28.5% of respondents. The findings further revealed that excessive workload, administrative responsibilities, and frequent exposure to aggressive patients contribute substantially to occupational stress. Inadequate staffing, shortages of medical supplies, and limited access to essential equipment further compromise healthcare delivery and leave many professionals overwhelmed by increasing patient demands, creating critical service gaps. The study recommends that hospital management implement comprehensive stress management programs, reduce excessive workloads to minimize burnout, recruit additional staff to address workforce shortages, and improve funding to ensure the adequate provision of medical supplies and essential equipment needed for effective healthcare delivery

Keywords: Healthcare, Stressors, Psychiatry, Occupational Stress, Hospitals

Uquetan, U, I., Umodiong, R, Uquetan, S, Elechi, D, O., Ekpo, O., Ekpo, E, Eburu, P. I, ,and Ugi, E.A, (2026) Impact of Occupational Stressors on Healthcare Workers in Federal Psychiatric Hospital, Calabar, Cross River State, JOHRMS, Volume 1, Issue 2, 88-102, https://doi.org/10.60787/johrms.vol1no2.40

Introduction

The occupational stress faced by healthcare workers in Federal Psychiatric Hospital Calabar, Cross River State, Nigeria, are severe and deeply troubling, yet remain largely unresolved. In real time, staff are repeatedly subjected to workplace stressors, with physical attacks, verbal abuse, and threats from patients occurring far too frequently (Atinga *et al*. 2021). These incidents not only jeopardize the physical safety of healthcare workers but also foster an atmosphere of constant fear and insecurity (Søvold *et al*. 2021). The absence of proper safety protocols and inadequate training on how to manage violent patients only worsens the situation, leaving workers helpless and vulnerable in the face of aggression (Schulte *et al*. 2022).

Beyond the physical threats, the psychological toll on staff is overwhelming. The combination of chronic understaffing, unmanageable patient loads, and the inherently demanding nature of psychiatric care has created an environment that fuels extreme stress, anxiety, and burnout AKoskei, 2024). Healthcare workers are forced to operate under immense pressure with little to no access to mental health support systems such as counseling or stress management services (Hsieh *et al*. 2021). This persistent neglect exposes them to long-term psychological harm, further eroding their ability to function effectively in an already high-risk workplace.

Security lapses compound the dangers. The hospital lacks adequate security personnel to protect staff from aggressive patients, angry relatives, or intruders. This deficiency exposes healthcare workers to unpredictable and often violent situations, while management's failure to assess, categorize, and mitigate risks leaves staff to navigate threats without guidance or institutional protection (Che *et al*. 2020). In practice, this means workers must shoulder impossible workloads without safety nets, leading to exhaustion, reduced productivity, and in some cases, a withdrawal from their duties altogether.

At the Federal Psychiatric Hospital Calabar, cases of occupational risks faced by staff are both frequent and troubling, reflecting the harsh realities of psychiatric healthcare delivery. Nurses and attendants often report being physically assaulted by aggressive patients during episodes of violent outbursts, ranging from slaps and punches to being hit with objects within reach (Tuominen *et al*. 2023). Verbal abuse, including threats of harm and insults from both patients and their relatives, has become a routine part of their work environment, leaving staff constantly on edge. There have been instances where patients, due to the lack of adequate monitoring and security personnel, have escaped from wards unnoticed, exposing staff to blame and further psychological distress (Albutt *et al*. 2021).

Methods

Research design

In this study, survey research design was adopted. Additionally, the quantitative approach enabled the study to reach a larger sample size, enhancing the generalizability of the findings and allowed for conclusions regarding the occupational health and safety of healthcare workers in the Federal Psychiatric Hospital, Calabar.

Sources of data

Primary Sources of data

Primary data was collected using a combination of structured questionnaires, surveys, and semi-structured interviews with healthcare workers at the hospital

Secondary Sources of data

Secondary data for this study were obtained from hospital-specific records such as staff duty rosters, incident reports, risk assessment logs, and occupational health and safety reports from the Federal Psychiatric Hospital Calabar were examined to provide real-time insights into staff experiences.

Population of study

The population of this study consisted of the hospital's healthcare professionals, including psychiatrists, nurses, mental health counselors, social workers, and support staff. This group was critical to the study as they were directly exposed to occupational hazards such as workplace stressors, psychological stress, and inadequate safety measures. The hospital attended to a large patient population with diverse mental health conditions, requiring a multidisciplinary team to provide care. Based on the hospital's personnel records, the total healthcare workforce was 221 professionals. This figure was determined by reviewing official staff (clinical and support staff) rosters, human resource listings, and departmental records.

Sampling technique/ sample size

The sample size for this study was 151, determined using a stratified random sampling approach to ensure representation across all categories of healthcare workers. Psychiatrists (18), while Nurses, (47), mental health counselors (26), and social workers (3). Pharmacists and Laboratory Scientists, (7 and 6) respectively. Security Staffs (8), while Cleaners (26) and administrative Staffs (10). This proportional allocation enhancing the reliability and validity of the findings.

Method of Data Collection

The method of data collection involved the use of structured questionnaires. Questionnaires were developed to gather quantitative data on various aspects. These questionnaires were distributed to a stratified random sample of healthcare workers, ensuring representative responses from different professional roles within the hospital. Additionally, interviews were conducted to collect qualitative insights from a smaller subset of participants. These interviews provided healthcare workers with an opportunity to share their personal experiences and perspectives on occupational risks in a more in-depth manner.

Techniques of Data Analysis

One-Sample t-Test was employed. This statistical test is useful for determining whether the mean frequency of reported workplace stressors among healthcare workers significantly differs from a known or hypothesized population mean.

The formula for the One-Sample T-test is:

$$t = \frac{\bar{X} - \mu}{s\sqrt{n}}$$

Where:

$\bar{X}$ = sample mean (the average frequency of workplace stressors incidents reported by healthcare workers)

μ = population mean (the hypothesized average frequency of workplace stressors, based on literature or previous studies)

s = sample standard deviation (a measure of variability in the reported incidents)

n = sample size (the number of healthcare workers surveyed).

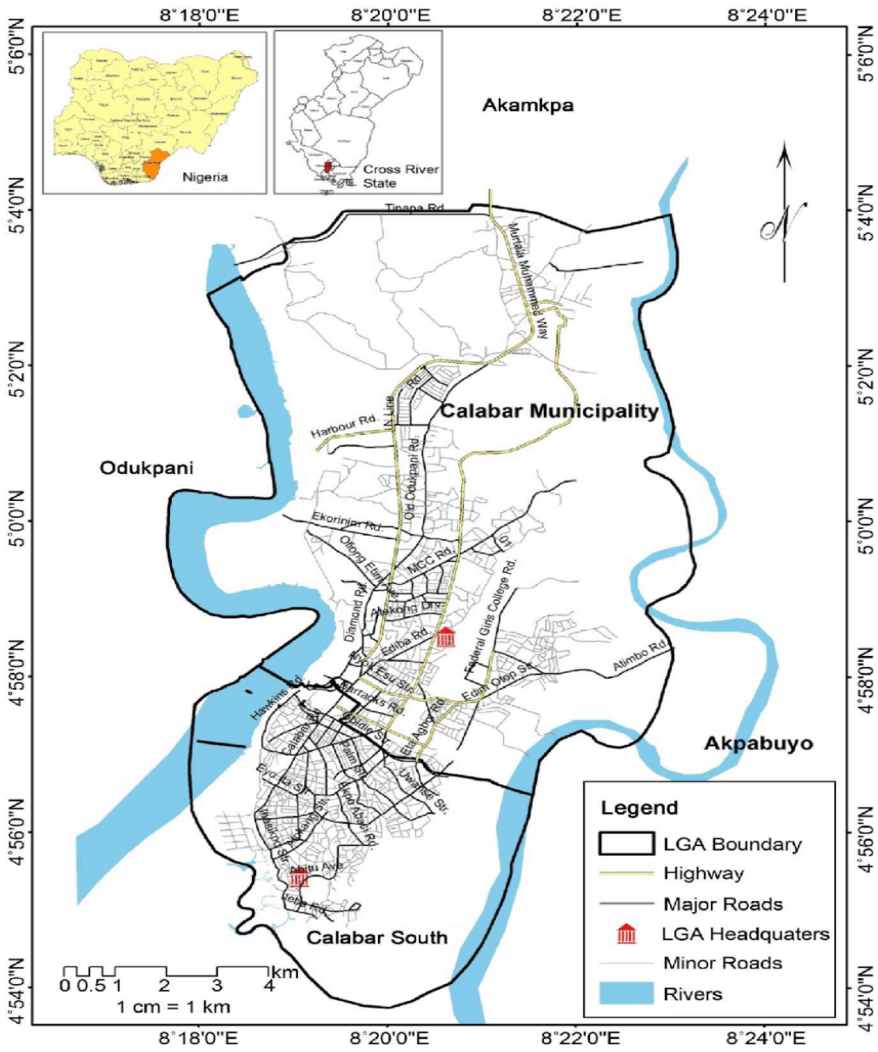

FIG. 1: Map showing Federal Psychiatric Hospital Calabar (FPHC)

Source: Department of Geography, University of Calabar, 2024.

Discussion of findings

Demography of respondents

The demographic characteristics of respondents in Table 1 reveal an uneven but fairly balanced distribution across gender, age, education, and work experience. Out of the 151 healthcare workers surveyed, females represented a slightly higher proportion at 57.0 per cent compared to males at 43.0 per cent, suggesting that women constitute the majority of the workforce in the hospital. In terms of age distribution, the largest group of respondents fell within the 25–34 years range at 40.4 per cent, followed by 35–44 years at 32.5 per cent, while those aged 45 years and above made up 18.5 per cent. The youngest group, aged 18–24 years (only 8.6 per cent), indicating that most of the hospital staff are relatively young but already in the middle stages of their careers. This pattern highlights a predominantly active and productive workforce with fewer younger entrants.

The results show that most respondents had tertiary education, with 48.3 per cent holding a Bachelor's degree, 24.5 per cent a Master's, and 9.9 per cent a Doctorate, indicating a highly educated workforce. Only 12.6 per cent had secondary education and 4.6 per cent primary school certificates. In terms of service years, 39.1 per cent had worked between 1–5 years, 31.1 per cent for 6–10 years, and 22.5 per cent for more than 10 years, while only 7.3 per cent had less than one year, reflecting low turnover and strong staff retention.

Table 1: Demography of respondents

Demographic Variable	Category	Frequency	Percentage (%)
Gender	Male	65	43.0
	Female	86	57.0
Total		151	100.0
Age Group	18–24 years	13	8.6
	25–34 years	61	40.4
	35–44 years	49	32.5
	45 years and above	28	18.5
Total		151	100.0
Highest Level of Education	Primary School Certificate	7	4.6
	Secondary School	19	12.6
	Bachelor's Degree	73	48.3
	Master's Degree	37	24.5
	Doctorate (PhD)	15	9.9
Total		151	100.0
Years Worked at the Hospital	Less than 1 year	11	7.3
	1–5 years	59	39.1
	6–10 years	47	31.1
	More than 10 years	34	22.5
Total		151	100.0

Source: Researcher's fieldwork, 2025.

Nature and type of workplace stressors

The data in figure 2 on workplace stressors experiences reveal that verbal abuse is the most frequently encountered form, with 43 respondents (28.5 percent), indicating they have been subjected to it. This suggests that communication within the workplace is often hostile, potentially creating a toxic environment that affects employee morale and productivity. Psychological threats are also prevalent, reported by 39 respondents (25.8 percent), indicating that many employees' experience intimidation or coercion, which can contribute to stress and anxiety. Additionally, physical stressors is a significant concern, affecting 37 respondents (24.5 percent). This finding highlights the need for strict workplace policies and intervention measures to prevent such occurrences.

Furthermore, 32 respondents, making up 21.2 percent, reported that they had not experienced any form of workplace stressors. While this indicates that a portion of the workforce does not face such challenges, the fact that nearly 80 percent of respondents have encountered some form of stressors suggests a systemic issue that requires urgent attention.

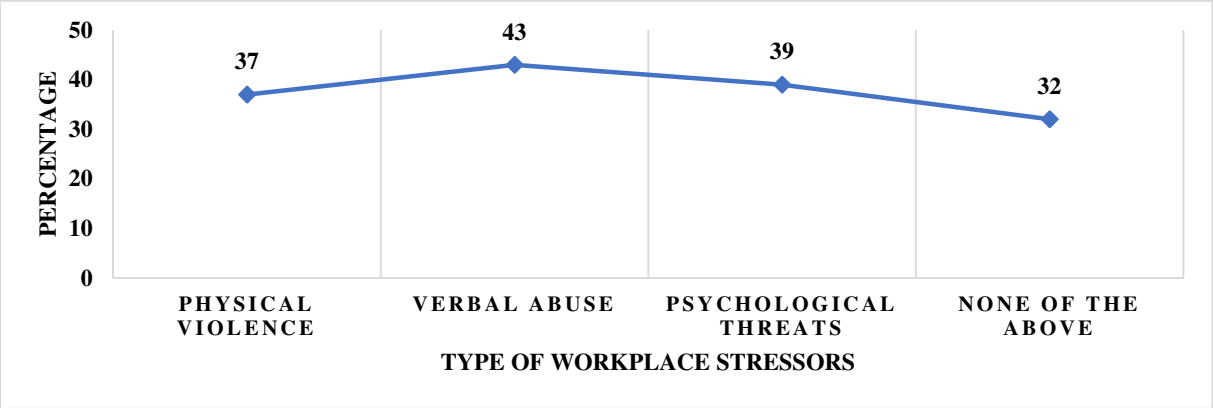

Figure 2: Type of workplace stress experienced most frequently

Source: Researcher's fieldwork, 2025.

Figure 3 shows that workplace stress arises from several interacting human, organizational, and environmental factors. The most reported factor was poor staff relationship, accounting for 16.6 percent of the responses. This indicates that a lack of teamwork, interpersonal trust, and effective communication among employees contributes significantly to conflicts that can escalate into stressors. Lack of training followed closely with 15.2 percent, suggesting that many workers may not have the necessary skills to manage aggressive behavior, resolve disputes, or de-escalate tense situations. Inadequate staffing also contributed 13.9 percent, reflecting how overworked and fatigued staff in understaffed workplaces are more likely to experience stress, frustration, and burnout that increase the risk of aggression.

Other notable contributors include high-stress environment (12.6 percent) and temperament of psychiatric patients (11.3 percent), which emphasize the influence of work pressure and the nature of clients, especially in health and social care settings, where staff often interact with emotionally unstable individuals. Substance abuse and mental health issues (11.9 percent) also play a role in heightening aggression and unpredictable behavior. Meanwhile, inadequate security measures (9.9 percent) and feeding habit (8.6 percent) were among the least reported, yet they remain relevant. Poor nutrition can affect mood and concentration, while weak security systems make it easier for violent acts to occur or go unchecked. Overall, these findings reveal that workplace stressors is a multidimensional issue requiring comprehensive interventions such as improved staff training, effective communication, adequate staffing, and supportive workplace policies.

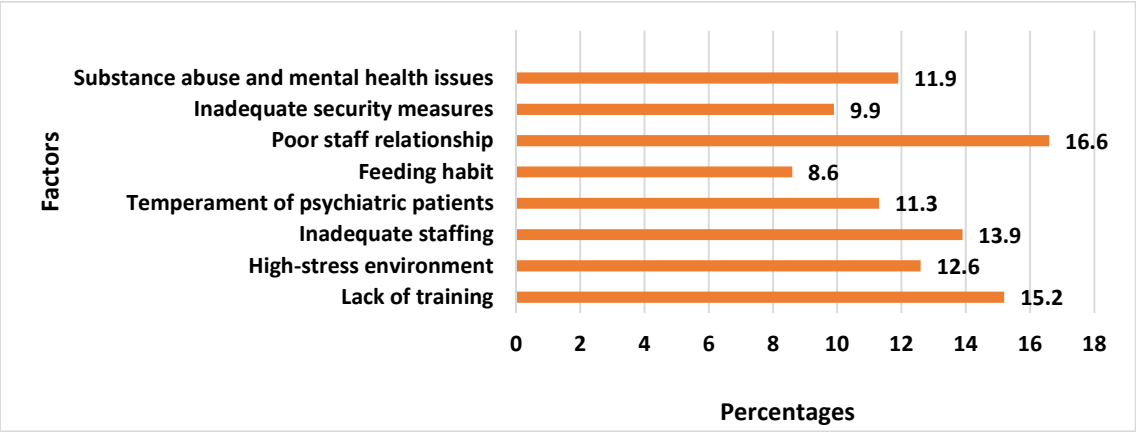

Figure 3: Factors contributing to stress in workplace

Source: Researcher's fieldwork, 2025.

Impact of staff shortage on service delivery

Table 2 presents the respondents' description of staff distribution in their department. The majority, 44 respondents (29.1 percent), indicated that staffing levels were inadequate. Similarly, 39 respondents (25.8 percent), described staffing as somewhat adequate. On the other hand, 34 respondents, (22.5 percent), considered staff distribution to be adequate, indicating that some departments may have the required personnel to handle patient care effectively. However, an equal number of respondents (22.5 percent) rated staffing as very inadequate, reinforcing concerns about workforce shortages in the hospital.

Table 2: Description of staff distribution across departments

Response Options	Frequency	Percentage (%)
Adequate	34	22.5
Somewhat adequate	39	25.8
Inadequate	44	29.1
Very inadequate	34	22.5
Total	151	100.0

Source: Researcher's fieldwork, 2025.

Psychological stress and burnout among healthcare workers

Table 3 presents the distribution of psychological stress levels among employees in the psychiatric hospital. The data reveals that 47 respondents (31.1 percent), reported experiencing a high level of psychological stress at work. This indicates that a significant proportion of healthcare workers frequently encounter mentally and emotionally demanding situations, which could be attributed to the challenging nature of psychiatric care. Additionally, 43 respondents (28.5 percent), indicated that their psychological stress level was very high. This suggests that nearly one-third of the workforce experiences extreme stress, potentially affecting their mental well-being, job performance, and overall job satisfaction.

Furthermore, 35 respondents (23.2 percent), reported a moderate level of psychological stress. While this category suggests that stress is present, it may not be overwhelming for these employees.

However, moderate stress levels can still contribute to burnout if not properly managed. On the other hand, only 26 respondents (17.2 percent), indicated experiencing low psychological stress. This minority suggests that only a small fraction of the workforce operates in an environment where stress is minimal, which may be due to their roles, coping mechanisms, or level of experience in handling workplace challenges.

Table 3: Level of psychological stress at work

Response Options	Frequency	Percentage (%)
Very high	43	28.5
High	47	31.1
Moderate	35	23.2
Low	26	17.2
Total	151	100.0

Source: Researcher's fieldwork, 2025.

Table 4 presents the factors contributing to the prevalence of burnout among healthcare workers in the psychiatric hospital. The data indicates that high job demands are the most significant contributor, with 43 respondents (28.5 percent), identifying it as a primary cause. The nature of psychiatric care often involves emotionally taxing interactions, long shifts, and intense decision-making, all of which can contribute to excessive workloads and fatigue. When employees are consistently overburdened with responsibilities, they may struggle to maintain efficiency, leading to heightened stress levels and eventual burnout. Additionally, 41 respondents (27.2 percent), attributed burnout to insufficient support. A lack of emotional, managerial, or peer support can leave employees feeling isolated and undervalued, further exacerbating workplace stress. Proper mentorship, counseling services, and supportive work environments can help mitigate these challenges and improve staff well-being.

Furthermore, 37 respondents (24.5 percent), identified a lack of resources as a significant factor leading to burnout. Resource shortages, including inadequate staffing, limited medical supplies, and insufficient training opportunities, can hinder employees' ability to perform their duties effectively, increasing frustration and stress. When workers are forced to operate under these constraints, their job satisfaction declines, contributing to emotional exhaustion and reduced personal accomplishment. Also, 30 respondents (19.9 percent), indicated that all of the above factors collectively contribute to burnout. This finding underscores the multifaceted nature of burnout in healthcare settings, suggesting that a holistic approach addressing job demands, workplace support, and resource availability is necessary to reduce burnout and promote employee well-being.

Safety measures and personal protective equipment (PPE)

Figure 4 highlights the safety measures currently implemented in the psychiatric hospital to protect healthcare workers. The data reveals that emergency response plans are the most frequently implemented safety measure, with 43 respondents (28.5 percent), acknowledging their presence. This suggests that the hospital prioritizes protocols for handling emergencies, ensuring that employees are equipped to respond effectively to workplace incidents, including violent situations and medical crises.

However, while emergency plans are essential, they are most effective when supported by other proactive measures such as adequate training and protective equipment. Additionally, 42 respondents (27.8 percent), indicated that personal protective equipment (PPE) is available. PPE is a crucial element in workplace safety, particularly in psychiatric settings where healthcare workers may be exposed to physical harm or infectious diseases. The provision of PPE enhances employee confidence in their safety and reduces the risk of workplace-related injuries or illnesses.

Table 4: Burnout prevalent among healthcare workers in your hospital

Response Options	Frequency	Percentage (%)
Insufficient support	41	27.2
High job demands	43	28.5
Lack of resources	37	24.5
All of the above	30	19.9
Total	151	100.0

Source: Researcher's fieldwork, 2025.

Regular training on safety protocols was reported by 37 respondents (24.5 percent). Training plays a fundamental role in preparing employees to handle workplace hazards, respond to violent incidents, and implement de-escalation techniques. Continuous education ensures that workers remain informed about best practices in workplace safety, ultimately fostering a safer work environment. However, 29 respondents (19.2 percent), stated that none of the listed safety measures were implemented in their workplace. This finding is concerning, as it suggests that a significant portion of employees perceive gaps in their workplace safety framework.

Figure 5 presents the sufficiency of personal protective equipment (PPE) provided to healthcare workers in the psychiatric hospital. The data indicates that 43 respondents (28.5 percent), consider the PPE provided to be sufficient, while 38 respondents (25.2 percent), rated it as very sufficient. This suggests that a considerable proportion of employees believe they have adequate access to protective gear, which is essential for ensuring their safety in a high-risk work environment. Proper provision of PPE plays a crucial role in minimizing occupational hazards, reducing exposure to infectious diseases, and protecting workers from physical harm. The relatively high percentage of employees reporting sufficient or very sufficient PPE availability may indicate that the hospital has made efforts to equip staff with the necessary safety gear.

However, a notable portion of the respondents expressed concerns about PPE sufficiency. Specifically, 41 respondents (27.2 percent), stated that the PPE provided is insufficient, while 29 respondents (19.2 percent), considered it very insufficient. This highlights a significant gap in workplace safety provisions, as nearly half of the workforce perceives their protective equipment as inadequate. Insufficient PPE can leave healthcare workers vulnerable to workplace-related injuries, infections, and psychological stress, particularly in a psychiatric setting where the risk of patient aggression is high. The presence of such concerns underscores the need for hospital management to reassess and improve the distribution and availability of PPE to ensure that all employees feel adequately protected. Addressing this issue would not only enhance worker safety but also contribute to overall job satisfaction and productivity.

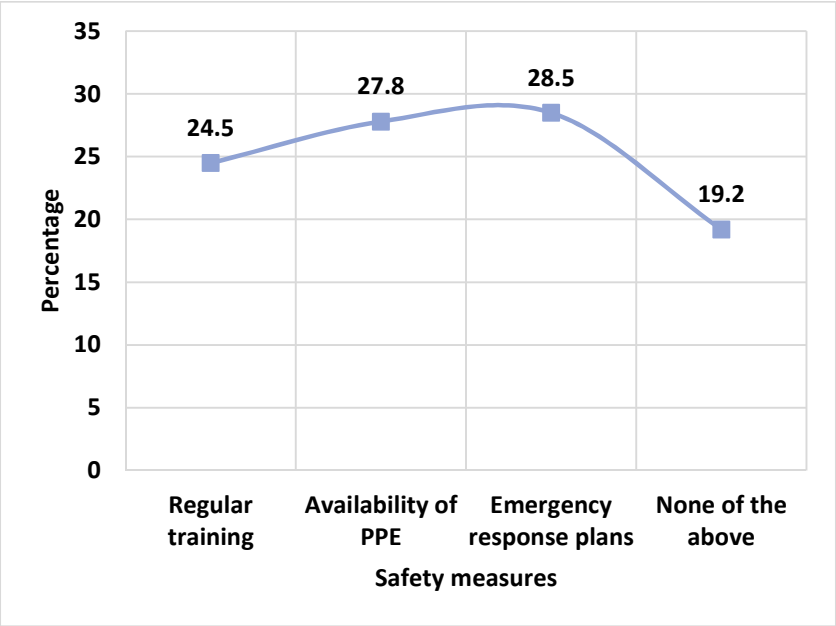

Figure 4: Safety measures currently implemented in your workplace

Source: Researcher's fieldwork, 2025.

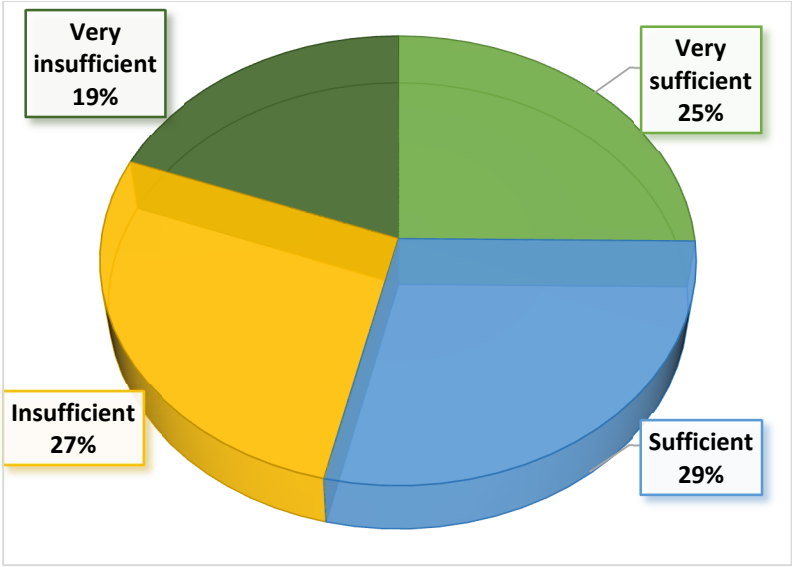

Figure 5: Sufficiency of PPE provided

Source: Researcher's fieldwork, 2025.

Table 5 highlights the safety protocols that need improvement in the psychiatric hospital. The highest concern among respondents is the availability of equipment, with 44 individuals (29.1 percent), identifying it as the most critical area requiring enhancement. This indicates that a significant number of employees believe that the current safety equipment is either insufficient or outdated, which could compromise their ability to respond effectively to workplace hazards. Similarly, 40 respondents (26.5

percent), pointed to emergency procedures as an area needing improvement. This suggests that there may be gaps in the hospital's preparedness for handling emergencies such as violent incidents, medical crises, or fire outbreaks. Ensuring well-structured and regularly updated emergency response plans can significantly enhance workplace safety and reduce risks for both staff and patients.

Additionally, 39 respondents (25.8 percent), emphasized the need for improved training programs. This finding suggests that many employees feel inadequately trained to handle workplace risks, particularly in a high-stress environment like a psychiatric hospital. Proper training in conflict resolution, de-escalation techniques, and emergency response is crucial for mitigating workplace stressors and enhancing overall safety. Furthermore, 28 respondents (18.5 percent), believe that all these safety protocols training programs, equipment availability, and emergency procedures require improvement. This reinforces the idea that a holistic approach to workplace safety is necessary, where all aspects of safety measures are systematically enhanced. Addressing these concerns would not only protect healthcare workers but also create a safer and more efficient working environment.

Table 5: Safety protocols that need improvement

Response Options	Frequency	Percentage (%)
Training programs	39	25.8
Availability of equipment	44	29.1
Emergency procedures	40	26.5
All of the above	28	18.5
Total	151	100.0

Source: Researcher's fieldwork, 2025.

Table 6, illustrates the impact of resource constraints on healthcare workers' ability to provide care. A significant proportion of respondents, 47 in total (31.1 percent), reported that resource limitations have a significant impact on their capacity to deliver quality healthcare. This suggests that shortages in essential medical supplies, staffing, and equipment hinder the efficiency and effectiveness of healthcare services. When hospitals face resource constraints, healthcare professionals may struggle to meet patient needs, leading to delays in treatment, increased workloads, and potential declines in the standard of care. Furthermore, such constraints can contribute to stress and burnout among workers, as they are forced to manage high patient volumes with limited support.

Additionally, 41 respondents (27.2 percent), indicated that resource constraints have a moderate impact, implying that while they can still provide care, it is often challenging due to the limitations they encounter. Another 35 respondents (23.2 percent), noted that the impact was minimal, suggesting that some departments might have better resource allocation than others. However, 28 respondents (18.5 percent), stated that resource constraints had no impact on their ability to provide care, which could indicate that certain areas within the hospital are well-equipped to handle patient demands. Overall, the data highlights the need for improved resource allocation and management to ensure healthcare workers can perform their duties effectively without undue strain. Addressing these issues may require strategic planning, increased funding, and improved procurement processes to enhance the availability of necessary medical resources.

Table 6: Impact of resource constraints on ability to provide care

Response Options	Frequency	Percentage (%)
Significant impact	47	31.1
Moderate impact	41	27.2
Minimal impact	35	23.2
No impact	28	18.5
Total	151	100.0

Source: Researcher's fieldwork, 2025.

Figure 6, presents data on the resources that are inadequate in the workplace, highlighting critical areas that require improvement. The highest number of respondents, 43 in total (28.5 percent), identified medical supplies as the most deficient resource. This suggests that shortages in essential medications, disposables, and other necessary materials may be affecting the quality of patient care. A lack of medical supplies can result in delays in treatment, increased patient dissatisfaction, and additional stress for healthcare workers who must find alternative ways to manage patient needs. Ensuring a steady supply of medical essentials is crucial for maintaining high healthcare standards and reducing the burden on staff.

Furthermore, 39 respondents (25.8 percent), indicated that staffing was the most lacking resource, emphasizing the challenge of inadequate workforce levels in the hospital. Insufficient staffing can lead to overworked employees, longer wait times for patients, and compromised care quality. Another 36 respondents (23.8 percent), cited equipment shortages, highlighting issues such as outdated or insufficient medical tools and technology. Meanwhile, 33 respondents (21.9 percent), stated that all the listed resources medical supplies, staffing, and equipment were lacking, indicating a widespread resource deficit in the hospital. Addressing these shortages through better funding, strategic resource allocation, and workforce planning would enhance service delivery and improve working conditions for healthcare professionals.

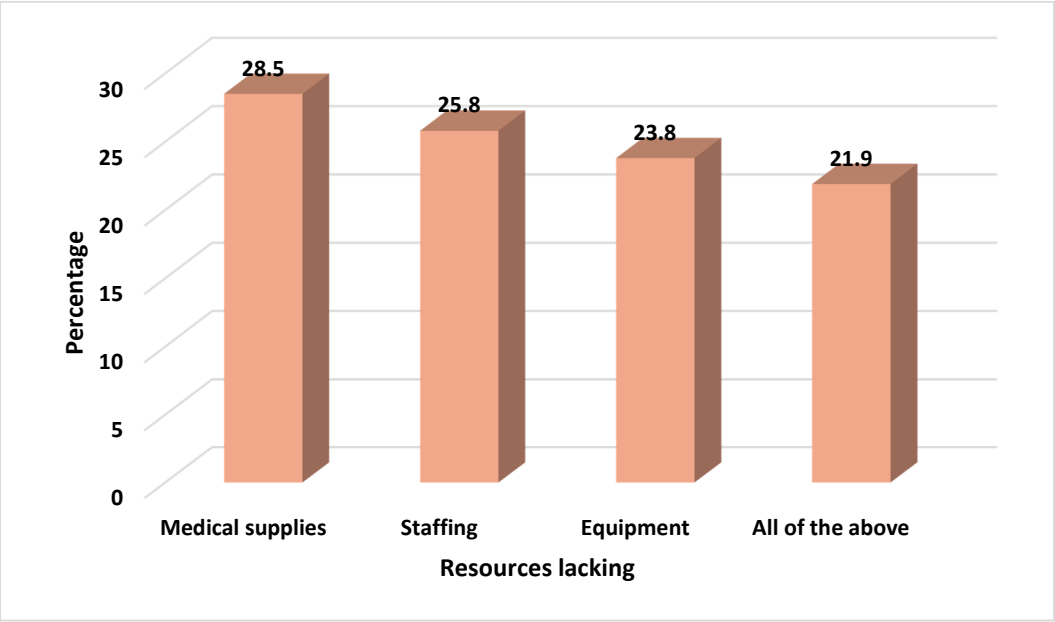

Figure 6: Inadequate resources in workplace

Source: Researcher's fieldwork, 2025.

Table 7 outlines the primary resource constraints affecting the hospital, shedding light on significant challenges that impact healthcare delivery. The most frequently cited constraint was budget cuts, reported by 45 respondents (29.8 percent). This suggests that financial limitations are a major issue, potentially leading to inadequate staffing, shortages of medical supplies, and outdated equipment. Budget reductions can hinder hospital operations affecting patient care and increasing the workload on healthcare workers. Addressing these financial constraints through increased funding, efficient budg*et al*location, and external support could help improve the hospital's ability to provide quality care.

Additionally, 42 respondents (27.8 percent), identified poor management as a key resource constraint. Ineffective leadership and misallocation of resources can contribute to inefficiencies, staff dissatisfaction, and operational challenges. Furthermore, 40 respondents (26.5 percent), pointed to increased patient demand as a pressing issue, indicating that the hospital may be struggling to meet the healthcare needs of a growing population. Lastly, 24 respondents (15.9 percent), selected "Other," which may include factors such as outdated infrastructure, bureaucratic delays, or policy limitations. To enhance hospital efficiency, it is essential to address these constraints through improved financial planning, strategic resource management, and policies that support sustainable healthcare services.

Table 7: Resource constraints existing in the hospital

Response Options	Frequency	Percentage (%)
Budget cuts	45	29.8
Poor management	42	27.8
Increased patient demand	40	26.5
Other (please specify)	24	15.9
Total	151	100.0

Source: Researcher's fieldwork, 2025.

Conclusion

The occupational stress faced by healthcare workers at the Federal Psychiatric Hospital, Calabar, are both significant and multifaceted, affecting their well-being, job performance, and overall patient care. This study has highlighted the prevalence of workplace high-stress levels, burnout, and resource constraints as key challenges that must be urgently addressed.

The study further reveals that many workers experience high levels of stress due to excessive workload, administrative burdens, and frequent exposure to aggressive patients. It also underscores the impact of inadequate resources on healthcare delivery. Insufficient staffing, lack of medical supplies, and limited access to essential equipment have made it increasingly difficult for healthcare professionals to provide quality care. Many workers feel overwhelmed by high patient demand and constrained by poor management and budget cuts, which have left critical gaps in service delivery.

Recommendations

The hospital management should establish stress management programs, and peer-support groups, reduce workloads where possible to minimize burnout. Regular training on safety protocols and PPE use should be mandatory, enforcing safety audits to identify and address gaps in occupational health measures. Staffing levels should be increased to reduce excessive workloads, improve funding to ensure the availability of medical supplies and equipment. Staff should engage in continuous professional development through trainings and workshops on conflict management and patient care. This will enhance their skills, promote empathy, and help maintain a safe, supportive, and productive hospital environment.

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