

## Work Life Balance and Burnout Factors during Covid-19 among Healthcare Professionals in Zoram Medical College, Mizoram

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**Abstract:** Work-life balance has gained immense significance. When a person is able to meet most of his demands in regard to family, career, and society, a healthy work-life balance may be established. Work-life balance has recently been a major concern for both employers and employees. The workforce in the global health care sector is under tremendous pressure as a result of the COVID-19 pandemic. Healthcare professionals being frontline workers during covid-19 pandemic experience significant burnout due to the pandemic's negative effects on their psychological well-being. Subsequently, it is important to know the work-life balance and burnout factors of healthcare professionals during COVID-19. Thus, the present study focused on the study of work-life balance and burnout factors during COVID-19 among healthcare professionals working in Zoram Medical College, Mizoram. To achieve the research objective, exploratory research design was adopted in this study. The study covers both doctors and nurses. The sample size of the study is 140; 31 doctors and 108 nurse. For data collection, the researcher used both primary and secondary sources. Primary data was collected through structured questionnaire adopted from an extensive literature survey and questionnaire especially designed for the study. Secondary data was collected from internet, journals, books, institutions directory, website, etc. The study reveals that gender, marital status, age and experience of the respondents have a significant relationship with factors of work life balance. With regards to burnout factors during COVID-19 pandemic, gender, age and experience have a significant relationship with burnout factors during COVID-19. However, regarding marital status of the respondents, there is no significant relationship with burnout factors during COVID-19.

**Keywords:** Work-life Balance, Burnout, COVID-19, Healthcare Professionals, etc.

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### I. INTRODUCTION

The concept of work-life balance has gained immense significance. Clark (2000) defined work-life balance as satisfaction and smooth functioning at work and home without any role conflict. Work-life balance is a term that refers to a person having adequate control over how, when, and where they work. When a person is able to meet all of his demands in regard to family, career, and society, a healthy work-life balance may be established.

In order to achieve the best balance between work and life, several adjustments must be made, and a strong commitment to work, life, and other obligations must be made. Lack of time to manage job obligations as well as family and personal responsibilities is the primary cause of work-life imbalances. Being able to balance the conflicting demands of family and work is not only difficult, but also stressful. This frequently results in illness and absence, which negatively impacts an individual's productivity.

Burnout is becoming more widely acknowledged as a serious issue that has an impact on healthcare workers physical and emotional health. During the present COVID-19 pandemic, strict city and area-wide lockdowns, the sealing of international and state borders, and other measures have an adverse psychological impact on healthcare workers and their families. Freudenberger and Maslach initially identified burnout as a condition of "emotional exhaustion" among professionals around the middle of the 1970s. Burnout is characterised as a condition of physical, emotional, and mental weariness that develops after a prolonged engagement in emotionally challenging work environments. It is a comprehensive syndrome that includes diminished feeling of self-worth, depersonalization, and emotional weariness. As defined by Leiter and Maslach and Maslach, burnout is a cumulative negative reaction to constant occupational stressors relating to the misfit between workers and their designated jobs. In this perspective, burnout is a psychological condition

characterised by persistent tiredness, cynicism, and inefficacy and is a long-lasting reaction to persistent pressures at work.

## **SIGNIFICANCE AND SCOPE OF THE STUDY**

Work-life balance has recently been a major concern for both employers and employees. Both work and personal life are integral components of everyone's lives and are connected. Due to job concerns including shift work, a heavy workload, long hours, occupational health risks, etc., healthcare workers frequently experience work-family conflict. Aside from being administrators and caregivers, they also play important roles as mothers and fathers in their households (Vijayasuganthi, 2018). The demands of the job on the healthcare professional's home life also collide with those of the workplace. They strive really hard to maintain work-life balance as a result of both of these tensions. The workforce in the global health care sector is under tremendous stress as a result of the COVID-19 pandemic. Healthcare professionals being a frontline workers during covid-19 pandemic will experience significant burnout due to the pandemic's negative effects on their psychological well-being.

The study try to identifies the work-life balance among healthcare professionals working in Zoram Medical College, Mizoram. Healthcare professionals who are doctors and nurses were selected for the study. The scope of the study is confined to Mizoram. The total population of the study is 219. Doctors and nurses having at least one year of experience is taken into consideration for this study. The main aim of the study is to find out factors affecting work-life balance among healthcare professionals and burnout factors during COVID-19.

## **II. REVIEW OF LITERATURE**

An attempt has been made for an extensive literature review on various issues of work life balance and burnout factors during COVID-19 to discover research problem and to develop appropriate research methodology. Some important research works are reviewed and presented hereunder to emphasize some of their findings:

Eleni, et al., (2010) conducted a study on occupational stress among nursing staff between the capital and regional hospital nurses (150 nurses during one month) and found that the two samples' levels of stress are different from one another. Additionally, they discovered that there is a rise in stress among nurses, primarily due to an increasing workload and conflicts between work and family responsibilities.

Shiva (2013) conducted a study on work-life balance and challenges faced by working women in Kerala. 200 samples were taken from women working in the public and private sectors, including institutions like colleges, hospitals, and schools, as well as other businesses, using a non-probabilities sampling technique. The findings indicate a lack of organizational satisfaction among working women and a conflict between work and family. The researcher concluded that prolonged exposure to lengthy work hours and high degrees of work-to-family interference increases workers' risk of mental and physical health issues.

Dagget et al. (2016) conducted a study on job related stress among nurses working in Jimma Zone public hospitals, South West Ethiopia. According to a cross-sectional study, there is no difference in job-related stress based on educational background, length of employment, or nursing experience.

A research was conducted in 2016 by to determine how age affected how well people balanced their job and personal lives. The outcomes showed a statistically significant result. The older group of employees is more likely to indicate maintaining WLB.

Lai et al. (2020) found that Healthcare professionals who cared for COVID-19 patients were more likely to have depressive, anxious, insomniac, and distressed symptoms.

Khasne et al. (2020) studied burnout among healthcare worker during Covid-19 pandemic in India. They came to the conclusion that more than half of the respondents (52.8 percent) experienced pandemic-related burnout, whereas work-related burnout was only at 26.9 percent. Burnout on a personal and professional level was higher among younger responders (aged 21 to 30). Women were much more likely to experience both emotional and professional burnout. Burnout caused by the pandemic was 1.64 times more likely to affect doctors than support personnel, who were 5 times more likely. They come to the conclusion that HCWs, particularly doctors and support workers, experienced a significant prevalence of burnout during the COVID-19 pandemic. The prevalence of female respondents was greater. In order to improve working conditions and reassure healthcare workers, they advise management to be proactive and helpful.

Aljabri D, et al. (2022) revealed that Saudi Arabian female healthcare professionals had greater degrees of burnout than male counterparts, particularly those who worked alternating day-and-night shifts, put in more than 55 hours per week, and had their shift times and hours altered during the pandemic. Patients who were single (divorced or separated), nurses, non-citizens, had less experience, were infected with COVID-19 and were quarantined had greater rates of patient-related burnout. In none of the CBI subscales, age was a significant

predictor of burnout. They draw the conclusion that frontline healthcare personnel experience a high degree of burnout.

Menon GR, et al. (2022) found from their study “Psychological distress and burnout among healthcare worker during COVID-19 pandemic in India—A cross-sectional study” that overall 52.9% of the subjects were at risk for psychological discomfort and required additional assessment. Longer work hours, income, COVID-19 patient screening, contact tracking, high emotional fatigue scores, and high depersonalization scores all significantly increased the risk of psychological distress. A little more than 4.7 percent of the HCWs were overworked, 6.5 percent were disengaged, and 9.7 percent were beginning to exhibit indications of burnout.

### **OBJECTIVES OF THE STUDY**

The following are the objectives of the study:

- 1) To study the socio-economic status of healthcare professionals in Zoram Medical College, Mizoram
- 2) To identify the major factors influencing work-life balance of healthcare professionals in Zoram Medical College
- 3) To examine the COVID-19 pandemic work-related burnout among healthcare professionals in Zoram Medical College

### **DATA METHODOLOGY**

Exploratory research design was adopted in this study. The standard sample size for a population of 219 with a confidence level of 95% and a confidence interval of 5% is calculated as 140. An attempt is made to select 140 respondents, selected randomly on the lottery method. For data collection, the researcher used both primary and secondary sources. Primary data was collected through structured questionnaire adopted from extensive literature survey and questionnaire especially designed for the study. Secondary data was collected from internet, journals, books, institutions directory, website, etc. The questionnaire of the study has been divided into three sections. The first section i.e. section A consists of the socio-economic profile of the respondents. Section B consists of work-life balance factor developed by Hayman J. (2005). This work-life balance factor consists of 15 items. Section C consists of COVID-19 pandemic burnout factors by Copenhagen Burnout Inventory (CBI). This scale has been modified by the researcher in order to match with the objectives of the study. This scale consists of 14 items.

### **HYPOTHESES**

The hypotheses of the study are as under:

- H<sub>01</sub>:** There is no significant relationship between genders of healthcare professionals in Zoram Medical College with regards to factors of work-life balance
- H<sub>02</sub>:** There is no significant relationship between marital statuses of healthcare professionals in Zoram Medical College with regards to work-life balance
- H<sub>03</sub>:** There is no significant relationship between ages of healthcare professionals in Zoram Medical College with regards to work-life balance
- H<sub>04</sub>:** There is no significant relationship between experiences of healthcare professionals in Zoram Medical College with regards to work-life balance
- H<sub>05</sub>:** There is no significant relationship between genders of healthcare professionals in Zoram Medical College with regards to burnout factors during COVID-19 pandemic
- H<sub>06</sub>:** There is no significant relationship between marital statuses of healthcare professionals in Zoram Medical College with regards to burnout factors during COVID-19 pandemic
- H<sub>07</sub>:** There is no significant relationship between ages of healthcare professionals in Zoram Medical College with regards to burnout factors during COVID-19 pandemic
- H<sub>08</sub>:** There is no significant relationship between experiences of healthcare professionals in Zoram Medical College with regards to burnout factors during COVID-19 pandemic

## **III. RESULTS AND ANALYSIS**

### **Socio-economic Profile of the Respondents**

The socio-economic profile of 140 respondents working under Zoram Medical College, Mizoram with regards to their gender, age, marital status, employment status of the spouse, number of children, experience and income are presented in Table 1. Among the respondents 20 percent are male and 80 percent were female.

**Table 1: Socio-economic Profile of the Respondents**

Characteristics	Nature	Frequency	Percentage
<b>Gender</b>	Male	28	20
	Female	112	80
	Total	140	100
<b>Age</b>	Upto 25 years	21	15
	25-35 years	76	54.3
	35-45 years	29	20.7
	45-55 years	14	10
	55 years and above	0	0
	Total	140	100
<b>Marital status</b>	Unmarried	99	70.7
	Married	95	25
	Divorce	6	4.3
	Widow	0	0
	Total	140	100
<b>Number of years of experience</b>	1-5 years	84	60
	6-10 years	28	20
	11-15 years	9	6.4
	16-20 years	11	7.9
	21-25 years	8	5.7
	26 years and above	0	0
	Total	140	100

Source: Field Survey

In terms of the age of the respondents, majority of the respondents i.e. 54.3 percent were from the age group of 25-35 years. It can also be observed from the table that 20.7 percent of the respondents are from the age group of 35-45 years, 15 percent of the respondents are below 25 years of age. Among the respondents, only 10 percent are from the age group of 45-55 years. This signifies that Zoram Medical College have employed a young and middle-aged workforce in the hospitals. Doctors and nurses with young and middle-aged will be more productive in their work which will help the hospitals to achieve their goals more effectively.

Regarding the marital status of the respondents, 70.7 percent were unmarried and this may be due to the reason being the maximum number of them belongs to 25 - 35 years age group. The study also shows that 25 percent are married and 4.3 percent were divorced. This depicts that there are more number of unmarried workers among the respondents.

The respondent's level of experience is depicted in Table 1 and can be observed that 60 percent have 1-5 years of experience, 20 percent have 6-10 years of experience, 6.4 percent of the respondents have 11-15 years of experience, 7.9 percent have 16-20 years of experience, 5.7 percent of the respondents have 21-25 years of experience and none of the respondent have an experience of 26 years and above. The number of years the respondents

have worked varies greatly, and it is evident that many doctors and nurses do not stay at the hospital for very long as the proportion of respondent's declines as experience levels rise. However, it is clear from the respondents that more than 5 percent of the respondents have been in the profession for more than 20 years.

### Work-life Balance among Healthcare Professionals working Under Zoram Medical College, Mizoram Effects of Genders on Work-life Balance

**Table 2: One way ANOVA of Genders on Factors of work-life balance**

Sl.	Statements	F	Sig.
1	My personal life suffers because of work	.372	.543
2	My job makes personal life difficult	.010	.919
3	I neglect personal needs because of work	.288	.593
4	I put personal life on hold for work	1.427	.234
5	I missed personal activities because of work	.614	.435
6	I struggle to juggle work and non-work	3.774	.054
7	I am happy with the amount of time for non-work activities (reversed)	1.470	.227
8	My personal life drains me of energy for work	5.551	.20
9	I am too tired to be effective at work	.404	.526
10	My work suffers because of my personal life	.301	.584
11	Hard to work because of personal matters	.639	.425
12	Personal life gives me energy for my job	11.801	.001
13	Job gives me energy to pursue personal activities	2.441	.120

14	Better mood at work because of personal life	2.179	.142
15	Better mood because of my job	.071	.790

Source: Field survey

**Table 3: Descriptive Mean for Gender**

	Male	Female	Total
Personal life gives me energy for my job	3.8214	2.9375	3.1143

Source: Field survey

As we can see in the analysis in table 2 that gender has significance relationship with work life balance, and thus the first Null hypothesis  $H_{01}$  has been partially rejected as one factor where personal life gives me energy for my job have a significant relationship with work life balance. It is further found from the descriptive mean that female employee's feel personal life gives them energy for their job as compare with male and the mean value is 2.9375.

### ***Effects of Marital Status on Work-life Balance***

**Table 4: One way ANOVA of Marital Status on Factors of work-life balance**

Sl.	Statements	F	Sig.
1	My personal life suffers because of work	2.421	.093
2	My job makes personal life difficult	2.940	.056
3	I neglect personal needs because of work	.151	.860
4	I put personal life on hold for work	.027	.974
5	I missed personal activities because of work	.230	.795
6	I struggle to juggle work and non-work	1.019	.364
7	I am happy with the amount of time for non-work activities (reversed)	.539	.584
8	My personal life drains me of energy for work	1.614	.203
9	I am too tired to be effective at work	2.710	.070
10	My work suffers because of my personal life	4.250	.016
11	Hard to work because of personal matters	1.670	.192
12	Personal life gives me energy for my job	1.328	.268
13	Job gives me energy to pursue personal activities	.778	.462
14	Better mood at work because of personal life	2.231	.111
15	Better mood because of my job	.750	.474

Source: Field survey

**Table 5: Descriptive Mean for Marital Status**

	Unmarried	Married	Divorce	Total
My work suffers because of my personal life	2.0707	1.7429	3.1667	2.0357

Source: Field survey

One way ANOVA results shows that marital status has a significant relationship with work life balance as we find that married respondents find it hard to balance work and life and feel that their work suffers because of their personal lives with a mean value of 1.7429. Thus the null hypothesis  $H_{02}$  is again partially rejected as marital status has a significant relationship with work-life balance.

### ***Effects of Age on Work-life Balance***

**Table 6: One way ANOVA of Age on Factors of work-life balance**

Sl.	Statements	F	Sig.
1	My personal life suffers because of work	2.060	.108
2	My job makes personal life difficult	1.061	.368
3	I neglect personal needs because of work	1.543	.206
4	I put personal life on hold for work	4.571	.004
5	I missed personal activities because of work	.448	.719
6	I struggle to juggle work and non-work	2.074	.107
7	I am happy with the amount of time for non-work activities (reversed)	3.291	.023
8	My personal life drains me of energy for work	3.287	.023
9	I am too tired to be effective at work	2.660	0.51
10	My work suffers because of my personal life	5.152	.002
11	Hard to work because of personal matters	.980	.404
12	Personal life gives me energy for my job	1.555	.203
13	Job gives me energy to pursue personal activities	7.132	.000
14	Better mood at work because of personal life	1.469	.226

15	Better mood because of my job	.745	.527
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Source: Field survey

**Table 7: Descriptive Mean for Age**

	<b>Upto 25 years</b>	<b>25-35 years</b>	<b>35-45 years</b>	<b>45-55 years</b>	<b>Total</b>
I put personal life on hold for work	2.2857	3.2500	2.5517	2.8571	2.9214
I am happy with the amount of time for non-work activities (reversed)	3.6190	2.9605	2.6207	3.5714	3.05000
My personal life drains me of energy for work	2.2381	2.7105	1.8966	2.2857	2.4286
My work suffers because of my personal life	2.4286	2.1447	1.3448	2.2857	2.0357
Job gives me energy to pursue personal activities	4.0000	2.8684	3.1034	3.6429	3.1643

Source: Field survey

It is evident from one way ANOVA test in table 6 that age have significant relationship with work-life balance and thus the Null hypothesis  $H_{03}$  has been partially rejected as many factors have a significant relationship with work life balance. It is further observed from descriptive mean in table 7 that respondent's whose age is below 25 years put their personal life on hold for their work with a mean value of 2.2857. Respondent's age between 35-45 finds that their personal life have drains their energy for their work (mean 1.8966) and that their works suffers because of their personal life (mean 1.3448). They further say that they are not satisfied with the amount of time for non-work activities (mean 2.6207) which results in imbalances in their work-life balance. It is also observed that respondent's age between 25-35 feel that their job gives them energy to pursue their personal activities with a mean score of 2.8684.

#### ***Effects of Experience on Work-life Balance***

**Table 8: One way ANOVA of experience on Factors of work-life balance**

<b>Sl.</b>	<b>Statements</b>	<b>F</b>	<b>Sig.</b>
1	My personal life suffers because of work	2.733	.032
2	My job makes personal life difficult	1.895	.115
3	I neglect personal needs because of work	.621	.649
4	I put personal life on hold for work	1.572	.185
5	I missed personal activities because of work	1.388	.241
6	I struggle to juggle work and non-work	2.911	.024
7	I am happy with the amount of time for non-work activities (reversed)	.490	.743
8	My personal life drains me of energy for work	1.464	.216
9	I am too tired to be effective at work	0.199	.939
10	My work suffers because of my personal life	1.413	.233
11	Hard to work because of personal matters	2.069	.088
12	Personal life gives me energy for my job	.296	.880
13	Job gives me energy to pursue personal activities	.740	.566
14	Better mood at work because of personal life	.144	.965
15	Better mood because of my job	.602	.662

Source: Field survey

**Table 9: Descriptive Mean for Experience**

	<b>1-5 years</b>	<b>5-10 years</b>	<b>10-15 years</b>	<b>15-20 years</b>	<b>21-25 years</b>	<b>Total</b>
My personal life suffers because of work	2.5000	2.2857	3.1111	3.6364	2.7500	2.6000
I struggle to juggle work and non-work	3.5238	2.7500	2.3333	3.4545	3.0000	3.2571

Source: Field survey

As it can be seen from the analysis in table 8 that experience has significant relationship with work-life balance and thus the Null hypothesis  $H_{04}$  has been partially rejected as two factors where personal life suffers because of work and struggle to juggle work and non-work has a significant relationship with work-life balance. It is further found from the descriptive mean that respondents with 5-10 years of experience feel that because of their work their life have suffers and that they find it hard to manage work and non-work life with a mean value of 2.2857 and 2.3333.

**Effects of Gender on burnout factors during COVID-19**

**Table 10: One way ANOVA of Gender on burnout factors during COVID-19**

Sl.	Statements	F	Sig.
1	Do you feel it is hard to work in the current scenario?	2.751	.099
2	Does it drain more of your energy to work during the current scenario?	.001	.975
3	Do you find it fruitful while performing your work during the current scenario?	5.354	.022
4	Do you hesitate to work during this current scenario?	.521	.471
5	Do you feel depressed because of the current scenario?	.313	.577
6	Do you feel that your patience (endurance) is tested while working in the current scenario?	.081	.776
7	Do you feel lockdown due to the current scenario has added stress on you?	2.039	.156
8	Do you have fear to catch COVID-19 infection while working in the current scenario?	.067	.796
9	Do you have a fear of family members catching infection because of your work exposure?	2.179	.142
10	Do you feel welcomed by the community because you are the frontline worker working in the current scenario?	3.821	.053
11	Do you have a fear of death while working in the current scenario?	.134	.715
12	Do you feel you are being properly protected by the hospital while working in the current scenario?	8.894	.003
13	Do you feel you are being supported by colleagues during the current scenario?	16.951	.000

Source: Field survey

**Table 11: Descriptive Mean for Gender**

	Male	Female	Total
Do you find it fruitful while performing your work during the current scenario?	3.9286	3.3304	3.4500
Do you feel you are being properly protected by the hospital while working in the current scenario?	3.7857	3.0089	3.1643
Do you feel you are being supported by colleagues during the current scenario?	4.3571	3.2768	3.4929

Source: Field survey

The analysis in table 10 shows that gender has significance relationship with burnout factors during COVID-19, and thus the Null hypothesis  $H_{05}$  has been partially rejected as three factors have a significant relationship with burnout factors during COVID-19. It is further found from the descriptive mean that female employee's find it more fruitful to perform work during pandemic as compare to men (mean 3.3304) and feels that they are properly protected by the hospitals (mean 3.0089) and also receives a good supports from their colleagues during the pandemic (mean 3.3768).

**Effects of Marital Status on burnout factors during COVID-19**

**Table 12: One way ANOVA of Marital Status on burnout factors during COVID-19**

Sl.	Statements	F	Sig.
1	Do you feel it is hard to work in the current scenario?	2.749	.068
2	Does it drain more of your energy to work during the current scenario?	2.148	.121
3	Do you find it fruitful while performing your work during the current scenario?	.119	.888
4	Do you hesitate to work during this current scenario?	.471	.626
5	Do you feel depressed because of the current scenario?	.111	.895
6	Do you feel that your patience (endurance) is tested while working in the current scenario?	.194	.824
7	Do you feel lockdown due to the current scenario has added stress on you?	1.338	.266
8	Do you have fear to catch COVID-19 infection while working in the current scenario?	1.050	.353
9	Do you have a fear of family members catching infection because of your work exposure?	.541	.583
10	Do you feel welcomed by the community because you are the frontline worker working in the current scenario?	.114	.893
11	Do you have a fear of death while working in the current scenario?	1.391	.252
12	Do you feel you are being properly protected by the hospital while working in the current scenario?	.987	.375
13	Do you feel you are being supported by colleagues during the current scenario?	1.386	.253

Source: Field survey

The above table 12 shows that the test of variance is not significant as the significance value for all the factors is more than p-value of .05. Hence the null hypothesis  $H_{06}$  is accepted and it can be concluded that there is no significant relationship between marital status of the respondents with regard to burnout factors during COVID-19.

**Effects of Age on burnout factors during COVID-19**

**Table 13: One way ANOVA of Age on burnout factors during COVID-19**

Sl.	Statements	F	Sig.
1	Do you feel it is hard to work in the current scenario?	8.642	.000
2	Does it drain more of your energy to work during the current scenario?	3.786	.012
3	Do you find it fruitful while performing your work during the current scenario?	4.049	.009
4	Do you hesitate to work during this current scenario?	1.437	.235
5	Do you feel depressed because of the current scenario?	.401	.753
6	Do you feel that your patience (endurance) is tested while working in the current scenario?	.858	.465
7	Do you feel lockdown due to the current scenario has added stress on you?	.563	.641
8	Do you have fear to catch COVID-19 infection while working in the current scenario?	2.867	.039
9	Do you have a fear of family members catching infection because of your work exposure?	.994	.938
10	Do you feel welcomed by the community because you are the frontline worker working in the current scenario?	1.070	.364
11	Do you have a fear of death while working in the current scenario?	.334	.801
12	Do you feel you are being properly protected by the hospital while working in the current scenario?	1.193	.315
13	Do you feel you are being supported by colleagues during the current scenario?	.288	.834

Source: Field survey

**Table 14: Descriptive Mean for age**

	Upto 25 years	25-35 years	35-45 years	45-55 years	Total
Do you feel it is hard to work in the current scenario?	1.8571	3.2632	3.4828	3.6429	3.1357
Does it drain more of your energy to work during the current scenario?	2.3810	3.1053	3.5172	2.5714	3.0286
Do you find it fruitful while performing your work during the current scenario?	4.2381	3.2237	3.3793	3.6429	3.4500
Do you have fear to catch COVID-19 infection while working in the current scenario?	2.4762	3.2500	3.0345	3.6429	3.1286

Source: Field survey

In the table 13 it can be observed that age have significant relationship with burnout factors during COVID-19 and thus the Null hypothesis  $H_{07}$  has been partially rejected as four factors have a significant relationship with work life balance. It is further observed from descriptive mean in table 14 that respondent's whose age is below 25 years finds it hard to work during pandemic with the corresponding mean value of 1.857 and that working during COVID-19 pandemic drains more of their energy to work with a mean value of 2.3810. Respondent's age between 25-35 find it is fruitful to perform work during pandemic and the mean value is 3.2237. Respondents whose age is below 25 years further says that they have fear to catch COVID-19 infection while working with corresponding mean value of 2.4762.

**Effects of Experience on burnout factors during COVID-19**

**Table 15: One way ANOVA of Experience on burnout factors during COVID-19**

Sl.	Statements	F	Sig.
1	Do you feel it is hard to work in the current scenario?	4.935	.001
2	Does it drain more of your energy to work during the current scenario?	.777	.542
3	Do you find it fruitful while performing your work during the current scenario?	.570	.685
4	Do you hesitate to work during this current scenario?	2.595	.039
5	Do you feel depressed because of the current scenario?	2.205	.072
6	Do you feel that your patience (endurance) is tested while working in the current scenario?	.127	.972
7	Do you feel lockdown due to the current scenario has added stress on you?	2.548	.042
8	Do you have fear to catch COVID-19 infection while working in the current scenario?	2.623	.038
9	Do you have a fear of family members catching infection because of your work exposure?	1.519	.200
10	Do you feel welcomed by the community because you are the frontline worker working in the current scenario?	2.022	.095
11	Do you have a fear of death while working in the current scenario?	2.406	.053
12	Do you feel you are being properly protected by the hospital while working in the current scenario?	.876	.480
13	Do you feel you are being supported by colleagues during the current scenario?	1.629	.171

Source: Field survey



**Table 16: Descriptive Mean for Experience**

	1- 5 years	6-10 years	11-15 years	16-20 years	21-25 years	Total
Do you feel it is hard to work in the current scenario?	2.7857	3.6786	3.0000	4.2727	3.5000	3.1357
Do you hesitate to work during this current scenario?	2.4762	2.6071	1.6667	3.3636	1.8750	2.4857
Do you feel lockdown due to the current scenario has added stress on you?	2.9167	3.2143	2.3333	3.0909	1.6250	2.8786
Do you have fear to catch COVID-19 infection while working in the current scenario?	2.9762	3.3214	2.4444	3.9091	3.7500	3.1286

Source: Field survey

It is evident from one way ANOVA test in Table 15 that experience has significant relationship with burnout during COVID-19 and thus the Null hypothesis  $H_{08}$  has been partially rejected as many factors has a significant relationship with burnout factors during COVID-19. The descriptive mean in table 16 shows that that respondents with 1-5 years of experience find it is hard to work during COVID-19 with a mean score of 2.7288. Respondents age between 11-15 hesitate to go to work during pandemic (mean 1.6667) and lockdown due to pandemic in the state has added stress to themselves as stated by age group between 21-25 (mean 1.6250). Age group between 11-15 years further added that while working during pandemic, they have fear of catching COVID-19 infection and the mean value is 2.4444.

#### **IV. MAJOR FINDINGS**

- It has been found from the study that majority (80%) of the respondents from Zoram Medical College were female.
- It can be observed that majority of the respondents aged between 25-35 years.
- It is also observed from the study that majority (70.7%) of the respondents were unmarried.
- The study shows that most of the respondents have less experience in their profession and majority (60%) have only 1-5 years of experience.
- It is found from the study that female employees feels more that personal life gives them energy for their job.
- The study reveals that married employees find it harder to balance their work and life and feels that their work suffers because of their personal lives.
- It is evident from the study that employees of younger age i.e. below 25 years find it difficult to balance their work and life and that they put personal life on hold for works. Employees aged between 35-45 stated that they are not satisfied with the amount of time for non-work activities and that their work suffers because of personal life and also drains their energy for work.
- Respondents having less experience (1-5 years) finds it more difficult to manage work and non-work life and feels that their life suffers because of their work.
- It can be observed that female employees find it more fruitful to perform work during COVID-19 pandemic. They receives good supports from their colleagues and also feels that they are properly protected by the hospitals.
- The study show that there is no significant relationship between marital status with regards to burnout factors during COVID-19,
- The study further shows that respondents of age below 25 years finds it hard to work during COVID-19 and that it drains more of their energy. They further stated that while working during pandemic they are fear of getting COVID-19 infection. However respondents aged between 25-35 finds it fruitful to work during pandemic.
- It was found from the study that respondents who have experience less than 5 years find it hard to work during COVID-19 and respondents whose experience is between 11-15 years hesitate to go to work and that they have fear to catch COVID-19 infection from work.

#### **V. CONCLUSIONS**

The study reveals that gender, marital status, age and experience of the respondents have a significant relationship with factors of work life balance. With regards to burnout factors during COVID-19 pandemic, gender, age and experience have a significant relationship with burnout factors during COVID-19. However, regarding marital status of the respondents, there is no significant relationship with burnout factors during COVID-19.

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