

# Long Working Hours Related Factors Causing Heavy Workload: An Empirical Study Among Sanitary Workers

**Durairaj Rajan**

Lecturer I, Department of Business Administration, Faculty of Social and Management Sciences,  
University of Africa, Toru-Orua (UAT), Bayelsa State, Nigeria  
Email: drdirajan@gmail.com

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**Abstract:** The objective of this survey, quantitative and empirical based descriptive research, undertaken in Tirunelveli city of Tamil Nadu State, India, is to analyze perception of the sanitary workers towards various long working hour related factors and its association with their heavy workload. In order to achieve the objective, the study sampled 80 sanitary workers from the leading private multi-speciality hospitals using both convenience and purposive sampling techniques. From the chosen respondents, the primary data were directly collected using schedule method of data collection with the help of structured self-made questionnaire. The secondary data were collected from journals, projects and dissertations. The result of the study analyzed by administering percentage method found that, majority of the respondents strongly agreed that, long working hours related factors causing heavy workload to sanitary workers are long and unsocial working hours, rigid rules of the hospital with regard to working hours, inability to relieve from the duty on time, arrival and admission of the patients at the time of relieving from the duty, irregular shift work, inadequate rest in duty and challenges in travelling.

**Keywords:** Long working hour, sanitary worker, heavy workload, private multi-speciality hospital, Tirunelveli city

## INTRODUCTION

### Background of the study

Growing population need the service of private hospitals abundantly in addition to government hospitals which are in the position not able to fulfill the health care needs of huge population in India. Development in education, technology and culture, and tremendous changes in economy and consumer tastes and preferences prove it constantly. Admirably, private health care institutions principally contribute to the health care need and demand of the population, and thereby contribute majorly towards growth of economy of the country. Currently, health care industry has grown up to the level of determining economy of the country both positively and

negatively. And, at the same time, the private health care institutions have been becoming a primary source of employment in the country. It can be seen this from the fact that large volume of the students show interest studying short-term as well as degree courses from medical discipline because of the rich scope and immediate employment opportunity in the medical field, and they get job with decent salary immediately after their course completion. Thus, private health care institutions play a major role in both income as well as employment generation of the country.

Sanitary workers belong to housekeeping department which is the non-medical discipline in health care sector. In India, 99% of sanitary workers are appointed from downtrodden community which is last in the level in Indian caste system. Very rarely, people from other communities are employed at housekeeping department. Their nature of work is entirely physical oriented, and they involve in maintaining cleanliness environment in the hospital by cleaning, mopping floors and walls of whole hospitals, cleaning toilets using acids, removing dusts and collecting and segregating various biomedical wastes from all areas of the hospital. Their work also include giving care to the patients such as cleaning urine and stools, giving bath for long staying patients, and transporting the patients from one department to another department for surgery, diagnosis, and consultation. Their role also include preparing the patients for surgery by shaving the parts which is going to be taken surgery, and also preparing the patients after death. These are some of the patient related activities of the sanitary workers.

Working hour play a vital role in all kinds of organizations in deciding health, productivity and commitment of the employees. Hence, working hour should be normal and it should neither be too long nor too short in order to ensure employees' sound health, better productivity and significant happiness in the work life. Different organizations in India follow different types of working hour despite strict rules and regulations regarding working hour by the constitution. All government organizations are following the rules of working hour established in the constitution that says that working hour should not exceed eight hours but very few private organizations are following this rule systematically and most of the private organizations do not adhere to this rule despite strict monitoring by the government.

Volume and intensity of work tasks done by employees also play an important role in determining satisfaction, health and dedication of the employees in any kind of organization. Although there is difference in volume and intensity of workload allocated to different categories of employees, it remains always high to sanitary workers. The reasons for

allocation of huge workload is that unclear and unsound job description offered to them and their illiteracy which keep them to obey submissively without raising any questions when tasks which are not related to their job is assigned and absence of additional salary for the extra work. In the study area, it is commonly observed that sanitary workers are allocated huge volume and intensity of work tasks which are monotonous and repetitive in nature and some of which are very hazardous in nature such as cleaning toilets using acids and collection and segregation of biomedical wastes. Thus, high volume of workload join with hazardous natured tasks and the same are done for long hour, definitely they will be the factors endangering their health and work performance. If long working hours is compensated with monetary benefits, definitely it will satisfy a marked group of employees even though it does not satisfy all employees. But, in most of the hospitals, long working hours such as 10 hours and 12 hours are being followed compulsorily without any monetary benefit.

Besides, in the study area which has attained admirable growth in business for the past few years, very few private hospitals follow the working hour prescribed by the government. But, majority of the hospitals commonly have 12 hours duty with 2 shift work system which is associated with rigid leadership style, unhealthy and biased rotation shift of the employees, unstructured and unsystematic salary and increment procedure, poor welfare facilities and high level of discrimination in terms of caste. All these factors are the strong and definite risk factors endangering the employees both physically and mentally. Under these circumstances, when sanitary workers are pushed to work for long working hour with high volume and intensity of work tasks without proper rest and technological support, over the period of time it will definitely push them to leave from the organization and move towards other field that will again enhance the workload of the newly recruited employees. Thus, since long working hours and its association with heavy workload directly reflects on employee commitment, satisfaction, health aspects and employee turnover, it remains essential to examine various factors associated with long working hours that cause heavy workload among sanitary workers and thereby guide both hospital management and sanitary workers as to how to confront with those factors and protect health of the sanitary workers and deliver quality service in terms of cleanliness environment and patient care. Hence, this research is essentially needed and undertaken in the study area.

### **Statement of the problem**

Human body needs enough rest for its smooth and perfect function and it can be achieved by giving adequate workload which can be tolerated by

the human body and it is possible only when they are allowed to work normal working hours. Workload is directly associated with health condition of the employees. Heavy workload will definitely cause employees to undergo sick, whereas low workload will make the employees lazy. So, it is always important to assign normal workload in accordance with job description, rules and health conditions of the employees. Working hour is strongly associated with both workload and manpower strength in the department. When working hour is longer with lack of adequate manpower in the department, it will definitely be the causative factor of heavy workload and be responsible for illness of the employees. On the other side, if the working hour is too long with more number of employees than required in the department, it will also be the factor of causing illness to the body such as laziness and obsessed thoughts of mind and it will be the source of gossiping and lack of commitments.

Sanitary workers in the study area report that they are assigned huge workload and there is no adequate number of sanitary workers in the housekeeping department. Moreover, high rate of employee turnover is observed in most of the hospital among sanitary workers since significant number of employees move to different other field such as textile industries, petrol banks, banking industries, educational institutions, hotel industries and other areas where they do not need to carry out the tasks of cleaning stools and urine of the patients. Besides, turnover of employees to various other fields are increasingly increasing in the study area recently.

Moreover, absenteeism also is highly remaining in majority of the hospitals among sanitary workers. 12 hours duty and 2 shift work system being followed in majority of the hospital are the primary reason for high employee turnover and more absenteeism rate. Besides, when these 12 hours long duty join with lack of manpower, absenteeism and employee turnover, naturally the workload of the existing employees are tremendously increasing. Since sanitary workers are not given job description, they are always given wide variety of work which are neither part of nor limited to housekeeping work. It is commonly happening in almost all hospitals. This kind of ill-defined work get them working the whole 12 hours per day without enough rest. In addition, sanitary workers are not entitled to avail medical and casual leave like other departmental employees since they are threatened hugely of their job security and salary.

Thus, when long working hours is associated with lack of manpower in the department, absenteeism of workers and employee turnover of coworkers, ill-defined job description, threatening, discrimination and

unhealthy shiftwork, it will affect sanitary workers both physically and mentally. It will further push them to absent from the work and quit the job as well. On the other hand, it inflames their quality of work that they will not be able to complete their cleaning work on time and patient care properly and perfectly. Lack of perfection in cleaning, mopping and patient care activities will not only dissatisfy the patients, but also endanger their health conditions by pushing them susceptible to infection. Thus, long working hour is strongly associated with health and satisfaction of sanitary workers, other categories of employees and patients. So, it is necessarily important to the hospital management to look into the factors associated with long working hours and take necessary steps to minimize it so that sanitary workers should have normal working hours and give sound contribution to the organization. Hence, this study is undertaken in the study area to examine various factors associated with long working hours and assist to the hospitals to minimize them and thereby enhance efficiency of the employees.

### **Scope of the study**

This study has focused sanitary workers working with private multi-speciality hospitals in Tirunelveli city which is the capital of Tirunelveli District located at south end of Tamil Nadu State, India. The study has analyzed long working hour related factors causing heavy workload among sanitary workers.

### **Significance of the study**

This research will serve as a source of information for hospital management to know how long working hours are associated with heavy workload of sanitary workers and inflame their health, productivity and performance and thus, it will assist the management to revisit into their policy and make necessary policy changes with regard to regulating working hours, manpower appointment or strengthening welfare facilities to cope up with long working hours. This study will not only be the source of knowledge for the managers and supervisors of housekeeping department, but also guide them to reexamine their managerial skills and leadership approach and thereby strengthen their skills and approach in the area of task assignment, communication and motivation towards their subordinates in getting done without their health impaired when they undergo long working hours. This study will also be the guide for the sanitary workers to know, how and in what way, long working hours influence their health, productivity, family and social life, and also assist them how to plan their work and cope up with this long working hours and workload occurring

thereby without getting their health and family life disturbed. This research work will serve as a rich source of literature for future research scholars since it will guide them to choose population, variables, type of research design, research area, sampling techniques and tools to initiate their future research study.

### **Objectives of the study**

The objectives of this research study is to analyze perception of the sanitary workers towards long working related factors causing heavy workload and provide suitable suggestions to normalize the heavy workload by modifying long working hours.

### **REVIEW OF LITERATURE**

Workload is the sum of all activities that take the time of an employee. Workload can at times be heavy (overload) or light (under load) (Debra, E., 1995). Workload is the perceived relationship between the amount of mental processing capability or resources and the amount required by the task (Hart and Staveland, 1988). It is the relationship between a group and individual human operator and tasks demand (Spector P and Jex S, 1998). The main objective of assessing and predicting workload is to achieve evenly distributed, manageable workload and to avoid overload or under load (Wickens CD, 1984)

Hoogendoorn WE et al., (2002) studied whether physical and psychosocial load at work influence sickness absence due to low back pain from the sample of 1738 workers from 34 companies located throughout the Netherlands. The result of the study revealed that the rate of sickness absence due to low back pain was about twice as high among men as among women and diagnosed codes of most absences due to back pain were unspecified back disorders. The study also observed that trunk flexion, trunk rotation and lifting at work were significantly associated with the occurrence of sickness absence due to low back pain. The study found that there was a strongest relation between psycho-social work characteristics, short absences and low supervisor support and between long absences and low job satisfaction. The study also identified that high physical load was more strongly related to sickness absence due to low back pain than to low back complaints. The study suggested that decreasing physical load at work especially for workers with low back complaints may be an important tool in the prevention of sickness absence due to low back pain also improving job satisfaction and social support at work may contribute to the prevention of sickness absence due to low back pain.

Sugden (2010) in her dissertation, explored teacher workload experience via data from quantitative survey of sample of 484 senior high school teachers and qualitative focus group interviews from 15 teachers selected from three major high schools in East coast Canadian province. The result of the study found that majority of the respondents have reported that their workload was stressful and intensified over the past 3 years and impinged upon their personal time and also they needed to take sick days in order to cope. The findings also indicated that majority of the respondents (91%) reported that they teach 2 or more different subjects within one semester that impacts their preparation time. Besides, majority of the respondents responded that inclusive education and education initiatives also increased their workload. Majority of the respondents have responded that their workload was moderately high. With respect to teacher performance, the study found that majority of the respondents have reported that they teach between 3 out of field subject per semester which significantly increased their workload. The hypothesis of the study found that teacher workload does have a significant impact upon teacher performance. Besides, majority of the teachers have reported that they felt the work related stress had increased compared to 5 years ago. They reported that the major three which has increased their work related stress were inclusion in extra class without proper support, administrative work and lack of job embedded collaboration time with peers. They have also said that workload significantly impinges upon their free time. The hypothesis confirmed that teachers' workload does have a significant impact upon teacher well-being. The study also found that teachers' workload impact teachers' preparation time and teacher sometimes take sick leave as means of coping with their workload demand. The study concluded that workload intensification was primary reason for teachers leaving the profession.

Joseph Nyawara OP (2011) analyzed how workload influences on performance of teachers in public primary schools in Kombewa division, Kisumu West District, Kenya and indicated that majority of the teachers are certificate holders and all the teachers in the division had other responsibilities other than teaching alone that increased their workload. The study also found that majority of the teachers teach more than 35 lessons per week which indicated that there is heavy workload on teachers and no teachers are aware of any clear policy on the number of lessons they should teach per week. The study observed that majority of the teachers (83%) reported that they were not comfortable with average number of pupils per class in their schools because they are not able to give individual attention to the pupils and they are also not able to give pupils adequate work. The teachers reported that they viewed it as stressful and

discouraging hence it lowers their input in terms of quality performance. The teachers said that they were preparing 8 lessons per day and they did not have any free lessons per day to mark pupils' book during official working hours, so, they had to work extra time to achieve their objectives. Majority of the teachers revealed that they were not able to prepare all the lessons daily because they had other responsibilities such as games, subject panel leaders, disciplinary committee, guidance and counselling. The teachers also highlighted that it was stressful and impractical to prepare that lessons daily. Besides, majority of the teachers responded that due to high disparity in teacher and student ratio, they were not able to mark their lesson before next lesson. These all, in turn, translates to low performance. Thus, understaffing, high pupil – teacher ratio, heavy work load and inadequate facilities were the causes of low performance of teachers.

Gwambombo I (2013) examined the effect of teachers' workload on students' academic performance in community secondary schools in Myeya city of Tanzania and found the number of periods taught by a teacher per week and its effects on students' academic performance; identified how internal tests and marking load effect students' academic performance; examined how administrative roles affect students' academic performance and examined students' performance in the context of heavy teachers' workload. The result of the study revealed that teachers were teaching more than 30 periods per week which was contrary to the minimum workload of 30 hours per week according to URT 2004 and this high workload affected the performance of the students negatively. The study also observed that the teachers were conducting only terminal and annual tests only and did not conduct weekly or monthly tests due to large number of students in the class which is also one of the reason for negative performance of the teachers. The study also observed that all 100% of teachers were providing less than 5 exercises per term contrary to the rules of the government which said that 10 exercises should be given per term. The teachers justified that due to over crowd of the students they were giving 5 exercises. The study also observed that this is also one of the reason for poor performance of the teachers. The findings also showed that the administrative role of the teachers performed greatly enhanced their workload and it eventually affect students' performance in continuous assessment in 2011 and form 4 national examination were poor.

Amalu M (2014) determined the influence of stress from workload on professional effectiveness of secondary school teachers from the sample of 600 teachers and 2400 students who were chosen from 3 educational zones namely Calabar, Ikom and Ogoja of Cross River State, Nigeria. The study checked if teachers have stress or not by putting seven of their works under



examination in questionnaire. They were lesson presentation, use of instructional aids, class room management, evaluation of students, learning motivation, supervision of co-curricular activities, and professional and personal qualities. The teachers developed medium to high level stress from these factors. The study, at the same time, found that the level of stress arising from these works has no significant impact on the effectiveness. Despite medium and high level stress from these works, their effectiveness in performing these works were not affected. The study concluded that workload in the school system is distributed among all the teachers in such a way that the work done by an individual teacher may not lead to stress and subsequent job effectiveness. The study recommended that the management of industrial and organizational settings should adopt the secondary school system of sharing responsibilities among their workers and learn to delegate duties in order to reduce work done by an individual.

Shafie S *et al.*, (2014) identified the workload of technical secondary school teachers focusing on the management and administration of those teaching integrated living skills from the respondents of 284 KHB teachers in the state of Kedah, Malaysia. The study analyzed 15 variables to know the workload of teachers in both management and administration and found that preparation of form evidence on students' PBS course work, managing course work files, managing students attendance record book, tidying, cleaning and organizing after the practical activity, arrangement of parts and materials in the workshop, engaging in the scheduling of substitute teachers, preparing materials for students' practical were the tasks consuming their time so much and found by them as heavy workload in terms of management and administration. The study recorded that heavy workload of teachers was not influenced by age in both younger and older teachers had the same workload. The hypothesis test did not show any differences in the workload between males and females and similarly no difference between academic qualifications ranging from post graduate to non-graduate teachers.

Borah S (2015) determined the perceived physiological exertion, physiological response and musculo-skeletal problem while doing the activities of firewood collection. The study included the respondents of forty tribal women of West Garo Hill of Meghalaya within the age group of 20 to 50 years. The study analyzed activity during firewood collection under two category namely 20-35 years and 36-50 years group and found that age group of 20-30 years covers 3.10 km distance, carrying the load of 25.85 kg spending 6.65 hours per day. Whereas, the respondent of 36-50 years cover 3.20 km, carrying 31.9 kg spending 5.82 hours per day. The study also examined the physiological responses of farm women during firewood

collection under the same categories and observed that heart rate, peak heart rate, energy expenditure, peak energy expenditure, total cardiac cost of work, physiological cost of work, cardiovascular stress index and workload were high among the group of 36-50 years than 20-35 age group. Besides, both age group have reported that the activities were heavy to very heavy in backward journey from the forest because they had to carry heavy load of firewood on their back after the activities of firewood cutting and bringing activities. But, the jobs of onward journey to forest was very light to tight and workload was moderately heavy to heavy. The respondents commonly reported that upper and lower back pain, cervical pain, wounds in fingers, pain in fingers and wrist pain in shoulder joint, insects and snake bite wounds at foot and skin irritation were the common health hazards perceive by them.

Ndioho OF and Joy CC (2017) analyzed biology teachers' workload and academic performance of secondary school students from 220 biology teachers who were chosen from three educational zones namely rural and urban locations in Abia state of Nigeria. The result of the study showed that rural teachers reported that they had heavy working load, teachers mainly focus on course coverage and they teach more than one science subject, whereas urban teachers reported that teachers found difficult and stressful in giving assignment and marking them and teachers are discouraged in teaching large classes and controlling them. Majority of the teachers opined that teachers' supply to schools should be on subject basis and there is short supply of qualified biology teachers in rural areas, whereas urban teachers opined that teachers' supply should be based on specialization while posting teachers to schools and biology teachers should be given more priority in the posting. The hypothesis of the study revealed that there is no significant difference between the effects of teachers' supply in urban and rural locations on academic performance of secondary school students in biology. The study result also indicated that teachers' workload affect students' performance and that teachers' supply require attention in the aspect of location. The observation of the study indicated that teachers usually preferred to work in schools located in urban areas than rural due to presence of many school amenities and infrastructural facilities in the urban areas for their children education. The study concluded that the teachers resort to reduce teaching methods to one rather than using 2 or 3 more teaching methods, reduced number of assignments and lesson delivery to enable them to cope with stress of the workload.

Ayeni JA and Amanekwe AP (2018) analyzed class size and composition, school policy, subject area, ability / competence, teaching staff strength and working conditions to examine teachers' instructional workload in

Akoko North – East local government, Ondo state, Nigeria. The result of the study revealed that majority of the respondents strongly agreed that official work at home and administration work at home are the factors of causing high workload and they affect the quality of their instruction. The study also observed that majority of the respondents have strongly agreed that bureaucracies, frequent supervision, new curriculum and frequent changes in school policies, large class sizes, inaccessibility to school learning facilities, less learning infrastructure are the factors influencing workload. The result also said that majority of the respondents strongly agreed that teaching activities and recording, inputting data are the time consuming activities. Administration and support, staff meeting, reporting on students' progress, curriculum review initiatives, improvisation of instructional materials, feedback to parents and home contact, disciplinary work, supervising lunch and break times, guard duties, assembly function, completing incidence or adhoc report, pre term briefing, invigilation of external examinations are necessary activities. Besides, majority of the respondents reported that modifying marking requirements, reduction of administrative duties, improving teach work among teachers and across departments, reviewing remuneration packages and improvement of information technology are needed to tackle high workload. The result also found that there is significant relationship between teachers' instruction and workload implementation, between teacher actual workload and workload standards and between workload of teachers between public and private secondary school teachers.

Rajan D (2019a) investigated how various leadership related factors associated with workload of the sanitary workers and result found that the factors, bias in workload allocation, not observing and enquiring about health condition, bias in work area allocation, taking revenge and purposefully assigning work, not allowing employees to rest in the course of work during tired, treating employees based on caste, community and religion, allocating work area without consent of the employees, preparing work schedule in bias, not introducing any advanced technology to replace manual work, not stopping or questioning other department employees when they assign work, behaving rudely and disrespectfully and not supplying adequate manpower have been strongly agreed by majority of the respondents. The factors, not listening to personal and health issues, not controlling seniors when they pass their work over shoulder of the juniors and not communicating properly about the tasks and how to perform it have been agreed by majority of the respondents.

Rajan D (2019b) analyzed perception of sanitary workers towards lack of resources related factors causing heavy workload from the sample of 80

sanitary workers working in leading private multi-speciality hospitals, Tirunelveli city of Tamil Nadu, India and found that majority of the respondents strongly agreed that resources related factors such as inadequate manpower, sudden absent of coworker, sick of coworker during the work, lack of cooperation and coordination of coworkers and other category of employees, not filling vacancy in the department, lack of equipment and not introducing machineries, repair of machines and management not taking effort to repair it, lack of protective devices to protect from the hazards and inadequate or absence of information about work and work processes and protection from hazards were associated with their heavy workload.

Rajan D (2019c) in his study identified and described the perception of sanitary workers private multi-speciality hospitals in Tirunelveli city of Tamil Nadu, India toward various shift work related factors causing heavy workload. The result of the study revealed that majority of the respondents strongly agreed that the factors such as two shift work system with 12 hours duty, sudden extension of duty, continuous day or night shift, fixing schedule without consent of the employees, rigid approach in implementing shift schedule, lack of cooperation of coworkers to switch over shift work during emergency situations, no adequate off between two shifts, compulsorily forcing employees to come for duty during their off period, autocratic approach of the managers in preparing and executing shift schedule and managers not permitting to swap shift schedule with coworker with mutual consent were the factors associated with shift work causing heavy workload among sanitary workers.

Rose AB and Sika JO (2019) determined influence of teacher's workload on academic performance in secondary schools, Suba Sub-County, Kenya, and found that the workload assigned beyond 16 hours per week impacts negatively on both teacher and the students and the respondents strongly agreed that teachers would complete the syllabus despite the amount of workload. The study reported that majority of the head teachers agreed that teachers with maximum workload still completed the entire form four syllabus by end of term three and hence they had high workload. The head teachers also agreed that teachers can only complete the syllabus when they are arranged extra class. The head teachers also agreed that when teachers are paid for extra lessons taught they complete the syllabus earlier. They also reported that when teachers are given more lesson than earlier, they may have little time for marking students work and it influences academic performance moderately. The head teachers also reported that when teachers are given extra responsibilities their performance become low and most teachers in Suba-Sub County are involved in income

generating project and this influences performance of the teachers. The data inferred that the teachers need extra classes to enable them to complete the syllabus and revise with their candidates for examinations. The result of the study also indicated that the influence of teachers' workload on academic performance was significant. The analysis also showed that for every one unit added additionally with teachers' workload, there was a decrease in pupils' academic achievement. Thus, the study concluded that teachers' workload influenced students' academic performance in secondary schools in Suba Sub-County.

From the literatures reviewed, it can be learnt that the study undertaken in the study area concerning heavy workload of sanitary workers have been discussed from leadership, resources and shift work point of view, i.e., how leadership, resources and shift work related factors are associated with heavy workload of the sanitary workers in the study area. So, there is a scope to research as to how long working hours related factors are associated with heavy workload of the sanitary workers. Hence, this present research has been undertaken in the study area with the objective of how long working hours related factors are associated with heavy workload of the sanitary workers which has not been discussed so far.

## **RESEARCH METHODOLOGY**

This survey and empirical based quantitative research has adopted descriptive research design since it describes various long working hour related factors and its association with heavy workload quantitatively. The element of this research is sanitary worker working with private multi-speciality hospitals in Tirunelveli city. A sample of 80 sanitary workers was chosen from the leading private multi-speciality hospitals in Tirunelveli city of Tamil Nadu using both convenience and purposive sampling techniques. Primary data for this study were collected directly from the sampled sanitary workers using schedule method of data collection. The structured questionnaire which had been constructed based on own experience and observation of the researcher in the field of hospital administration was administered to collect the primary data. The questionnaire consisted of two sections namely 'Section A' which described demographic characteristics of the respondents and 'Section B' which explained various long working hour related factors and its association with heavy workload. The questionnaire was constructed based on Likert's five point scale which carried five responses for each question namely Strongly agree, Agree, No opinion, Disagree and Strongly Disagree that had held the values of 5, 4, 3, 2 and 1 respectively. Each question in the questionnaire was translated to the respondents in their mother language,

'Tamil', and their choice of response was recorded. The secondary data were collected from journals, dissertations and projects to add appropriate significance to the study. Percentage method has been administered to analyze demographic characteristics of the respondents and perception of the respondents towards long working hour related factors associated with heavy workload.

## ANALYSIS AND INTERPRETATION

### Demographic characteristics

**Table 1**  
**Profile of the respondents**

<i>Variable</i>	<i>Description</i>	<i>Frequency</i>	<i>Percentage</i>
Sex	Male	16	20.00
	Female	64	80.00
Age	Below 30 years	07	08.75
	Between 30 and 35 years	22	27.50
	Between 35 and 40 years	33	41.25
	Above 40 years	18	22.50
Marital Status	Married	72	90.00
	Unmarried	08	10.00
Year of working experience	Below 2 year	12	15.00
	Between 2 and 4 years	32	40.00
	Between 4 and 6 years	26	32.50
	Above 6 years	10	12.50
Salary (Rs)	Below 5000	12	15.00
	Between 5000 and 7000	41	51.25
	Between 7000 and 9000	21	26.25
	Above 9000	06	07.50

*Source:* Primary Data, 2018

It can be understood from Table 1 that among the respondents, 20.00% were male and 80.00% were female. Of them, 8.75% were below 30 years of age, 27.50% between 30 and 35 years, 41.25% between 35 and 40 years and 22.50% were above 40 years of age. Furthermore, among them, 90.00% were married and 10.00% were unmarried. In all, 15.00% had below 2 years of work experience, 40.00% between 2 and 4 years, 32.50% between 4 and 6 years and 12.50% had above 6 years of work experience. Among them, 15% were drawing below Rs. 5000 of salary, 51.25% between Rs. 5000 and 7000,

26.25% between Rs. 7000 and 9000 and 07.50% of them were drawing above Rs. 9000.

### Long working related factors associated with heavy workload

**Table 2**  
Perception of the respondents towards long working hour related factors causing heavy workload

Long working hour related factors	SA	A	NO	DA	SDA
Long and unsocial working hours	98.75	01.25	0	0	0
Rigid rules of the hospital with regard to working hours (e.g. compelling to come to the duty on time in the morning even if the sanitary workers leave lately in the previous day)	97.50	02.50	0	0	0
Inability to relieve from the duty on time due to large volume of patients and too much work load	88.75	11.25	0	0	0
Inability to relieve from the duty on time because of late arrival of reliever	95.00	05.00	0	0	0
Arrival and admission of the patients at the time of relieving from the duty enhance working time	68.75	31.25	0	0	0
Irregular shift work (too long day or night shift) which lead to stuck with long working hours	96.25	03.75	0	0	0
Inadequate rest in duty and need to do all work physically in standing position	96.25	03.75	0	0	0
Challenges in travelling (waiting for long time in bus station for bus before after work, traffic jam and distance)	97.50	02.50	0	0	0

*Source:* Computed from primary data, 2018 (In Table 2, SA – Strongly Agree, A – Agree, NO – No opinion, DA – Disagree, SDA – Strongly Disagree)

Based on the analysis of data, personal observation, interview held with sanitary workers and personal experience in the field of hospital administration, the researcher presents elaborate interpretation below for each variable discussed in Table 2.

### Long and unsocial working hours

Majority of the respondents have strongly agreed that too long and unsocial working hours are responsible for heavy workload. In the interview, they said their normal working hour is 12 hours, but sometimes they need to work beyond 12 hours. They also said that they are struggling hugely

because they are already working with lack of manpower. Under these circumstances, when they need to work for 12 hours and above continuously, definitely it will implicate on their health and performance. In the study area, almost all hospitals have 12 hours duty for paramedical and nonmedical categories of employees. Most of the hospitals function with lack of manpower in the department of housekeeping, and, at the same time, the sanitary workers are assigned huge work. Absenteeism among the sanitary workers remains serious issue in housekeeping department. Under this condition, when employees need to undergo high workload for long hours, it will question their health. Moreover, managers in housekeeping department are neither properly educationally qualified nor motivating in nature. And hence, they do not know importance of rest to be given in course of work and they do not allow the sanitary workers to perform their work giving enough rest. Instead, they compel them to continuously do their work without rest. This kind of autocratic and rigid nature of the managers increases the stress level of the sanitary workers. Moreover, improper and absence of job description to the sanitary workers push them to do multiple tasks, of which, some are not part of sanitary workers. In addition to the routine works which are done with lack of manpower, when they are assigned additional tasks such as bringing tea and coffee from canteen, sending them to the higher officials' house to clean their bathroom and other household works, their workload will increase double endangering their health physically and mentally. Thus, when sanitary workers perform all tasks physically without assistance of any equipment and for prolonged time continuously without adequate break, their workload increases hugely. Since, twelve hours duty is strictly followed in majority of the hospitals, managers of housekeeping department should be supportive and highly motivation in nature understanding their physical nature of work. Hospital management should pay additional remuneration when they are assigned additional work which are not part of their job description and when they are assigned works beyond their working hours.

### **Rigid rules of the hospital with regard to working hours**

Majority of the respondents have strongly agreed that rigid rules of the hospital with regard to working hours (e.g. compelling to come to the duty on time in the morning even if the sanitary workers leave lately in the previous day) is the factor causing heavy workload among them. When they were interviewed they said managers and supervisors behave rigidly in executing rules of the hospitals. Generally in all organizations, not only hospitals, when the rules come to sanitary workers, the management follow it more rigidly without any second thought. The policy of the organization



is not followed equally among all categories of employees. It is rigidly and strictly followed with sanitary workers. Ironically, illiteracy and community background of the sanitary workers are the principal reason for the rigid execution of rules on them. It is common in most of the organizations that if any employee do work beyond the prescribed time of rules of the organization, they may either be given extra salary or be allowed to come late in the following day. But, this rule is not applied to sanitary workers and instead they are neither be given additional salary nor be permitted to come late to the work in the following day. Their illiteracy and lower community background get them to accept everything submissively without able to raise the question against it assertively. Managers who lead the sanitary workers also neither show supportive leadership style by recommending to the management to offer additional salary for the extra work being done by them beyond the working hours nor offer flexibility in working hours to compensate the extra hour work. Since, in the study area, all hospitals follow twelve hours work system and two shift work in practice against the government norms, when the sanitary workers who do most of their work physically are compelled to work beyond twelve hours, definitely it will put their health in risk. When sanitary workers are continuously taken place to work beyond the routine working hours, it will not only endanger their physical and mental health, but also affect their family life since they cannot reach home on time which will eventually weaken their healthy family life. Hence, managers should be flexible whenever there is necessity and extend their support realizing their long working hours and physical nature of work.

#### **Inability to relieve from the duty on time due to large volume of patients and too much work load**

Majority of the respondents have strongly agreed that the factor, inability to leave from the duty on time, because of huge number of patients and too much work load is the factor causing heavy workload among them. In the interview, they said that it is most commonly and often taking place. They also said that due to lack of manpower, it is often taking place and they said that they have to do plenty work which are not part of their work. It can generally be seen in the study area that lack of manpower especially in the field of housekeeping department remain high. And, there are notable tasks in the housekeeping department that can specifically be done by sanitary workers and cannot be replaced by other category of employees. Cleaning toilets, removing urine of the patients and preparing the patients such as shaving the parts of the patients for surgery are some of those notable tasks that cannot be replaced by any other employees. In order to manage

the shortage of manpower in the department, most of the hospitals manage the department which has more than 12 patients with one sanitary worker. When the patients come to the hospital multiple in numbers at the same time such as in the case of accidents and seasonal diseases, the workload would be double. Those who work in emergency department, operation theatre, and intensive care unit very often undergo to these situations. In these departments, when the sanitary worker is posted in single in number, their workload commonly becomes double because there would be improbability that what time patients arrive and how many patients are admitted. Hence, they cannot leave from the ward if they have not completed their work completely. Especially, if the patients are admitted at the time when they relieve from the duty, it is not possible for them to relieve until their work end. Inability to relieve from the duty on time, will disturb their family life because it will get them late to reach to their house. Location of residents of sanitary workers and long distance will worsen their condition further, which will create imbalance between family and work life. Therefore, the managers and supervisors of the housekeeping department should plan appropriately and get the sanitary workers relieve from their duty after their working hours on time so that they can reach home on time and come to the duty next day on time. And, in case of unavoidable situations, if sanitary workers happen to leave from the duty lately, they should be permitted to come late in the next day or they should be paid additional monetary benefit to compensate the overtime work.

### **Inability to relieve from the duty on time due to late arrival of reliever in the opposite duty**

Majority of the respondents have strongly agreed that the factor, inability to leave from the duty on time due to late arrival of reliever in the opposite duty is the factor causing heavy workload. In the interview, they said that very often it happens to them and due to late in relieving from the duty they are not able to maintain balance between family and worklife and also it causes huge challenges in their family life.

The common challenge in the study area is transport problem. Most of the local employees come from their house, and very few employees live within the city and reachable place from the hospital. Majority of the employees travel by road and limited bus services are available from the remote areas. Moreover, they have to travel through 2 or 3 buses to reach the spot. This will ultimately cause delay to the employees to reach the hospital. Besides, due to 12 hours duty, those who completes the day shift will reach home late night when they travel through 2 or 3 buses. And, heavy workload and bus travel will cause undue tired to them. In addition,

they have to perform household activities after reaching home such as cooking, assisting to children with their homework if they are married, and after completing all these works when they go to bed almost it would be late night. The work they performed in hospital and home will cause body pain and too much tired. This will not allow them to wake up early in the next morning. This naturally cause them to start up lately from their house and reach the hospital late which in turn cause undue delay to the worker in the duty to leave from the duty. The same will happen to the employees who leave from night shift. Thus, long working hours and 2 shift work system, lack of transport facilities and lack of manpower in the department and health issues are the reasons for the employees not to relieve from the duty on time. Hence, the management should insist the managers and supervisors that they should not be too rigid with regard to late and early relieve from the duty since they work for 12 hours. Besides, the managers should allow the employees to swab among themselves in case if they need either to leave from the duty earlier or to come late to the duty in such a way it does not affect the routine work of the hospital.

#### **Arrival and admission of the patients at the time of relieving from the duty enhance working time**

Majority of the respondents have strongly agreed that both arrival and admission of the patients when the employees are actually being ready to relieve from duty after completing their work is the factor extending the working hours of the employees and eventually increasing the workload of the employees. In the interview, most of the sanitary workers shared the same answer and they told it happens often.

Since hospitals deal with unexpected circumstances and uncertain human beings it cannot be predicted at what time patient would arrive, at what time risk would takes place. Hence, it is not possible that things will move as per the plan always. At the time, when the sanitary workers is about to leave, if patients arrive to the emergency department or other departments such as ICU, operation theatre, it is not possible for them to relieve from the duty without attending the patients and it is not ethically right also. So, they have to stay till the process of dealing with newly arrived patients completes. So, naturally when they extend their duty for few more hours or minutes, eventually it will be considered as heavy workload. In order to deal with this situation, the manager can be flexible with working hours. They can give flexibility in duty time that if they relieve lately from the duty, they can come late to the duty next day. By doing this, employees also will not feel dissatisfied and frustrated to leave from the duty lately after completing the duty.

### **Irregular shift work (too long day or night shift) which lead to stuck with long working hours**

Majority of the respondents have strongly agreed that irregular shift work system is the strongest factor enhancing workload of the sanitary workers. In the interview, few employees said that they are often given prolonged night shift or day shift instead of rotating shift and it happens often. Although it is common that due to unavoidable circumstances, extending the shift remains common in the shift work system, if it is done few days or one week period it will be the acceptable one. Instead, if it is done for prolonged period of time, then it would be a factor of questioning.

In addition to influence of medical personnel, directors and family members of owners of the organization, leadership style of the house keeping managers also have the role in extending shift work for longer period without following policy of the organization. Some of the employees work with higher officials such as senior consultants, surgeons and directors as housemaid, security guards and other assistants. In order to balance their absence, the housekeeping managers purposefully allocate prolonged day shift and night shift for few employees. Some employees who are assertive refuse to comply with prolonged day or night shift, but those who are submissive and are scared of job security comply with the unfair shift work insisted by the manager. Basically, sanitary workers prefer rotating shift work in order to balance personal health and family life. Since most of the sanitary workers are married and have children they prefer day shift and usually the schedules are prepared in such a way that each employee will have to undergo one week night shift and three weeks day shift. But, in order to reconcile the deficiencies which arise since the employees go for house hold duties of the higher officials, the routine system is disturbed and due to this reason employees need to do prolonged night shift instead of rotating day and night shift. If there is vast difference in the shift work, the health, family life and social life of sanitary workers would be highly disturbed. The body physiologically undergo lot of changes especially with sleeping. When the employees undergo night shift continuously for more than two weeks, it will not only affect their health and work but also imbalance their family and work life especially if they are married with children.

Since most of the housekeeping managers are not highly educationally qualified, they do not assertively speak to the higher officials and do not stop the employees of the hospitals who are serving in their house as part time employees. In order to fulfill needs of higher officials such as consultants, surgeons and directors and also safeguard their job, managers

force the sanitary workers to accept the schedule which they prepare unfairly. Although few employees purposefully accept prolonged day shift or night shift, most of them agree with it due to job insecurity and financial commitment of the family. Adequate sleeping and rest are inevitable for sanitary workers due to their physical nature of work. But, when sanitary workers are forcefully allocated prolonged day or night shift, it disturbs their body physiology and affect their health hugely. With imbalanced physiological condition and inadequate sleeping and rest, when they continue their work, it will be the big burden for them and push them taking the work as a heavy workload both physically and mentally. It is the fact that carrying out the work without interest as well as willing is also the reason for heavy work burden. Hence, housekeeping managers should prepared work schedule on rotation basis as much as possible unless it is emergency situations and requested by the employee.

### **Inadequate rest in duty and need to do all work physically in standing position**

Majority of the respondents have strongly agreed that the factor, inadequate rest in duty and need to do all their work physically with standing position is the factor associated with heavy workload. In the interview, they said that there is no rest room for them and no any machineries for them to get assisted for their work. Despite the fact that all work of the sanitary workers are physical in nature and they are doing them without any assistance of machineries, since they are not given separate rest room even to rest for half hour is the factor to be given attention in all organization. Nature of their work, the community they belong to in the society push the hospital management from paying attention towards their needs in terms of their welfare facilities such as rest room, rest hours in between the work and introduction of both advanced equipment and machineries to reduce their manual work and innovative work processes which simplify their work.

12 hours duty and two shift work system being followed in all hospitals in the study area itself will get the employees tired both physically and mentally. Moreover, lack of manpower in housekeeping department is another major issue existing in most of the hospitals. So, when sanitary workers need to work physically for twelve hours without assistance of any equipment or machinery with lack of manpower, definitely it will be the source of heavy workload. Thus, continuous physical work without assistance of technologies for longer working hour will increase workload and that will further endanger their health, productivity, commitment and morale. Therefore, the hospital management should look into the matter of long working hours, welfare facilities and adequate manpower in the

department and take necessary steps to reduce long working hours, enrich welfare facilities, introduce technologies and increase manpower in accordance with workload in the department.

When organizations do not show any importance and priority towards improvising welfare facilities, housekeeping managers can take strong effort to safeguard interests and health of sanitary workers by exhibiting better leadership role. They can permit the sanitary workers to avail enough rest in course of work, realizing their health conditions, age, gender and physical workload. And, this is the way the managers can assist to the sanitary workers indirectly when top level management do not show any concern over welfare of the facilities. Moreover, the housekeeping managers should learn and develop managerial skills and leadership qualities to talk to the management assertively and fight for the rights of sanitary workers because the managers can show their concern and skills only by getting enough facilities to the sanitary workers from the top management. Hence, leadership and managerial skills of the housekeeping managers play a role. In addition, sanitary workers also on the other hand, should develop assertiveness to demand enough facilities such as rest room and rest hours explaining importance of their contribution and nature of their work.

### **Challenges in travelling (waiting for long time in bus station for bus before after work, traffic jam and distance)**

Majority of the respondents have strongly agreed that the factor, challenge in travelling such as waiting for long time in bus station for bus before after work, traffic jam and distance between hospital and bus station are the factor associated with heavy workload. In the interview, majority of them replied that they all are coming from rural areas and they have to travel through 2 or 3 buses to reach the hospital and the same to reach home after their work. Sanitary workers need to exist in the job earlier before all other departmental employees and patients come to the job because the hospital need to be clean before all other staffs and patients come. Hence, in order to reach hospital, they need to start from their house very earlier and it, firstly, is harder for them due to their long working hours and physical work that they have undergone previous day. So, basically when they have not had enough sleep, definitely they would find difficulty both to get up from the bed and start to the work.

Most remote areas from which majority of the sanitary workers come from and scarcity in the transport facilities get them to wait not only in bus station for too long but also travel through more than one buses to reach the spot. In some place, the location of hospital itself is far from main area

or bus station, and due to these reasons the employees need to walk far from bus station to hospital. Thus, before they reach work station and start their work, they physically and mentally get tired and the same situation they pass through when they go home having completed their work.

When complete physical nature of work, absence of support of technologies and lack of manpower in the department associate with physical and mental tiredness which sanitary workers have undergone during their travel to the work, their tiresome doubles pushing them to sick. It further impacts on their work by worsening their productivity, causing quarrel among the co-workers and leaving the work incomplete, and thus, the consequence of this will further not only weaken satisfaction of the patients, but also question cleanliness of the environment. Hence, the hospitals should try to manage the challenges they undergo in transport aspect by means of allowing them to take some rest during the course of work; and the managers and supervisors should not be so much harder in dealing with working hours of the sanitary workers and instead the sanitary workers should be allowed in to swab their duties among the sanitary workers in such a way that it does not affect the work even if they come late or leave earlier. Besides, the sanitary workers should plan their work accordingly and have smooth relationship with coworkers in such a way they adjust each other among themselves whenever they need to come late or leave earlier.

## **SUGGESTION AND CONCLUSION**

### **Suggestions**

Based on analysis and findings of the study, the following suggestions are given, in order to regulate longer working hours and reduce heavy workload.

1. Working hours can be regulated in such a way that eight hours duty can be implemented with three shift work system so that the employees can be prevented from working for longer hours. In the hospitals where twelve hours duty system is in operation, the managers of housekeeping department should neither be too rigid nor too flexible in managing employees considering their physical nature of work.
2. Sufficient number of sanitary workers should be recruited and it should be ensured that vacancies remain filled always. Besides, housekeeping managers should educate their employees that employees should come to and relieve from the duty on time.



Education should also be extended about how late arrival of the employees to the opposite shift duty hurts the employees in duty. Besides, managers can permit the employees to swap among themselves to come to or relieve from the duty either earlier or late subject to the conditions without getting the work affected in any way. In some critical situations, managers should plan in advance and do necessary arrangement to balance both late arrival of the employee to the opposite shift and early relieving of employee from existing shift in such a way that the work cannot be disturbed.

3. Managers of housekeeping department should schedule shifts work fairly and neutrally without any personal bias and discrimination. Unless needed and requested by employees, it should be avoided allocating either too long day or night shift. All employees must be allocated shift work on rotation basis in order to ensure their sound both physical and mental health. Managers should always take physical work and long working hours into the account and allow the employees to take enough rest to breath in between the work on humanitarian basis without getting the work affected.

### **Limitations of the study**

The study has following limitations. The first limitation of the study is its study area and type of hospital. The study has been confined to Tirunelveli city only and it has not covered the entire District. Similarly, the study is limited to private multi-speciality hospitals, and it has not extended to single speciality hospitals, government hospitals, clinics and diagnostic centers. The second limitation of this study is sample size and sampling techniques. The study has sampled only 80 respondents using convenience and judgment sampling techniques, and it has not used probability sampling technique. The third limitation of this research is target respondent. The study has researched about sanitary workers working with private multi-speciality hospitals and it has not included any other category of employees working in private multi-speciality hospitals such as paramedical employees, medical category employees, and other non-medical category employees such as front office employees, maintenance employees, security guards, cafeteria employees and administrative office employees. The fourth limitation of this study is its variable. The study has analyzed single variable namely long working hours and its association with heavy workload. It has not been combined with any other factors which is associated with heavy workload such as leadership, shift work, resources, work and family imbalance, organization structure and policy, motivation and so on. As a result of these limitation, it should be cautious to generalize the result of



this research to the whole district, other district and other category of employees because the rules of working hours will vary from hospital to hospital and the way the employees perceive it may also vary from employees of different categories.

### **Direction for future research**

This present study throw lights on future research in multiple way. The future research can be undertaken extending the same study into the entire district. In the same way, workload of sanitary workers arising out of long working hours can be analyzed among the sanitary workers working with single speciality hospitals, government hospitals and diagnostic centers. Future research study can also be undertaken using probability sampling technique adding large sample size to give more justification to the study. The same concept can be applied to other discipline of employees such as paramedical, medical and other category of employees in non-medical, working in the hospitals to check how far long working hours influences on their workload. Besides long working hours, other variables such as organization structure and policy, motivation, role and work life imbalance can be examined to know how they are associated with heavy workload of the sanitary workers and other categories of employees in the hospital sector and other kind of business organizations. A comparative study can be undertaken as to how long working hours are associated with heavy workload of sanitary workers working with both multi-speciality and single speciality hospitals.

### **CONCLUSION**

This survey, quantitative and empirical based descriptive research aimed at analyzing perception of sanitary workers towards various long working hour related factors and its association with heavy workload quantitatively. In order to achieve the objective, the study sampled 80 sanitary workers from the leading private multi-speciality hospitals in Tirunelveli city of Tamil Nadu using both convenience and purposive sampling techniques. From the chosen respondents, the primary data were directly collected using schedule method of data collection with the help of structured self-made questionnaire. The secondary data were collected from journals, projects and dissertations. The result of the study derived by applying percentage method found that, majority of the respondents strongly agreed that, the factors associated with long working hours causing heavy workload are long and unsocial working hours, rigid rules of the hospital with regard to working hours, inability to relieve from the duty on time, arrival and admission of the patients at the time of relieving from the duty, irregular

shift work, inadequate rest in duty and challenges in travelling. It is essentially required for all hospitals in the study area to regulate the working hours by converting two shift work into three shift system and thereby reducing working hours into eight hours from twelve hours since long working hours are directly associated with heavy workload, low productivity and ill health of the employees. It is equally important that rich attention should be paid over heavy workload of the sanitary workers that arise as a result of not only long working hours, but also other factors considering their complete physical nature of work. By regulating long working hours, not only heavy workload of the sanitary workers, but also their absenteeism rate which occur due to ill health can be reduced, which will further assist the hospitals to enhance their productivity and enrich cleanliness environment and thereby provide better quality of care in the hospital.

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