

Working Hours And Satisfaction Among Health Medical Staff In All Specialties In KSA

Raneem Emad Gommsani¹, Rakan Saud Aloqaili², Fahad Awadh Alharthi³, Hoda Jehad Abousada⁴, Turki Yahya Alsaedi⁵, Nada Hussain Aljohari⁶, Malak Ahmed Hamdoon⁷, Manar Ahmed Hamdoon⁸, Afraa Nasser Baoom⁹, Fatimah Jassim Al Salim¹⁰, Saba Mohammed Bamagos¹¹, Suhayb Abdalalah Alhazmi¹², Ali Sabbar Alanazi¹³, Dhaifallah Abdullah Alamri¹⁴, Areej Mushref Alamri¹⁵

¹ Consultant Radiologist, Radiology department, King Abdullah Medical Complex, Jeddah , KSA

² Consultant in Pediatric Dentistry, Ministry of Health

³ Anesthesia specialist, Security Forces Hospital, Makkah, KSA

⁴ Obstetrics & Gynaecology, KFSHRC, KSA

⁵ Anesthesia Technician, Security forces hospital, Makkah, KSA

⁶ Health administration Specialist, Riyadh, KSA

⁷ MBBS, Medical Doctor, King Saud Medical City ,Riyadh,KSA

⁸ MBBS, Medical Doctor, King Saud Medical City ,Riyadh,KSA

⁹ MBBS, Medical Doctor, International University of Africa, Khartoum, Sudan

¹⁰ Laboratory technician , Dammam Regional Laboratory , Dammam, KSA

¹¹ MBBS, Medical intern, Umm Al-Qura University, Makkah, KSA

¹² MBBS, Medical intern, Umm Al-Qura University, Makkah, KSA

¹³ Nursing Specialist, Hail, KSA

¹⁴ Nursing Specialist, Aseer, KSA

¹⁵ Nursing Specialist, Aseer, KSA

ABSTRACT

Objective: Assessing the effect of working hours on job satisfaction among healthcare professionals in different specialties throughout Saudi Arabia and determining satisfaction levels among several job categories (physicians, nurses, and allied health personnel) are the goals of the study. Additionally, the study will attempt to evaluate job satisfaction in tertiary hospitals, private healthcare facilities, and government healthcare facilities.

Methods: The study will use a descriptive cross-sectional design with the goal of collecting data from a large number of healthcare professionals who work in Saudi Arabia's public and private healthcare systems at one particular period. In order to find patterns, correlations, and the frequency of satisfaction levels related to working hours across different medical specialties, the design was selected.

Results: The study included 360 participants. The study included 360 participants. The most frequent age among them was 18-28 years old (n=193, 53.6%), followed by 30-39 years old (n=98, 27.2%), then 50-59 years old (n=27, 7.5%). The most frequent gender among study participants was male (n=189, 52.5%) and female (n=171, 47.5%). The most frequent marital status among study participants was Single (n=197, 54.7%), followed by married (n=163, 45.3%). Profession among study participants, with most of them were doctors (n=270, 75%), followed by Nurses (n=43, 11.9%), then lab technicians (n=18, 5%), and Admin/Clerical

(n=14, 3.9%), at least pharmacists (n=9, 2.5%). Current workplaces where most of them Government hospitals (n=313, 86.9%), followed by private hospitals (n=28, 7.85%), then Health centers (n=10, 2.8%), and at least a clinic (n=28, 7.8%). The participants' Work experience is most of them 1-5 years (n=187, 51.9%), followed by more than 10 years (n=83, 23.1%), then less than a year (n=74, 20.6%), and at least 6-10 years (n=16, 4.4%). The participants' Working hours per week are most of them 41-48 hours (n=213, 59.2%), followed by 49-60 hours (n=57, 15.8%), then less than 40 (n=53, 14.7%), and more than 60 (n=37, 10.3%). Participants were asked Do you suffer from sleep disturbances due to long shifts; Most of them said yes (n=199, 55.3%), followed by sometimes (n=131, 36.4%), then no (n=30, 158.3%). Participants were asked Have you experienced burnout or emotional fatigue in the past 6 months; Most of them said yes (n=223, 61.9%), followed by sometimes (n=106, 29.4%), then no (n=31, 8.6%). Participants were asked Have long working hours led you to consider changing your profession or workplace; Most of them said yes (n=219, 60.8%), followed by no (n=86, 23.9%), then not sure (n=55, 15.3%).

Conclusion: The study showed that age, profession, workplace, years of experience, and working hours are clearly associated with sleep disturbances among healthcare workers, while gender and marital status show no such association.

INTRODUCTION

One of the primary things people strive for throughout their lives is to raise and maintain a high quality of living. It is "an individual's perception of their position in life in the context of the culture and value systems in which they live and about their goals, expectations, standards, and concerns," **Binkanan (2024)** according to the World Health Organization. A person's productivity, or career, is a major factor that significantly affects their quality of life. A person's work or career not only takes up a significant amount of his time, but it also influences the quality of his life. Conversely, it has been demonstrated that having a strong career quality increases productivity in addition to its beneficial effects on a person's dedication, health, and life expectancy. **Al-Dossary (2022)**

As was already discussed, motivation levels and productivity are directly impacted by job satisfaction. **Al-Surimi et al (2022)** As a result, people who are happy in their jobs do better overall in all facets of their careers and in organizations. "Job satisfaction measures how happy employees are with their jobs, including whether they are happy with specific aspects of their jobs, like the nature of their work or supervision." Tools for measuring job satisfaction include behavioral, emotive, and cognitive (evaluative) components. Validated surveys are frequently used to measure work satisfaction objectively. **Wali et al (2023)**

In any nation, the healthcare industry is one of the most crucial industries, and it directly affects the degree of economic development, progress, and civilization. Worker productivity and efficacy disruption is a significant element that impedes healthcare organizations. **Alotaibi AHMM et al (2022)** Job satisfaction, as previously stated, has a direct impact on an individual's productivity. Therefore, it is imperative to debate, look into, and evaluate healthcare professionals' job satisfaction in order to eventually increase outputs to their highest levels. The validity and reliability of the "Satisfaction of Employees in Health Care" (SEHC) questionnaire, a validated data collection tool, have been demonstrated in numerous prior research. **Aljohani et al (2023)**

When comparing job happiness across several industries, a 2020 survey found that workers in the healthcare sector were the most satisfied, followed by those in education and tourism. **Elsayed et al (2025), GAS (2023)** According to a different survey that evaluated job satisfaction among healthcare professionals with a sizable sample, roughly 77% of employees were content with their positions. A sizable survey carried out in Saudi Arabia in 2019 revealed, however, that 67.1% of nursing personnel and 52.4% of doctors were not satisfied. Another recent survey conducted in 2021 throughout several Saudi locations confirmed the same findings, indicating that public sector healthcare professionals in Saudi Arabia were typically unsatisfied.

METHODS

Study design

The study will use a descriptive cross-sectional design with the goal of collecting data from a large number of healthcare professionals who work in Saudi Arabia's public and private healthcare systems at one particular period. In order to find patterns, correlations, and the frequency of satisfaction levels related to working hours across different medical specialties, the design was selected.

Study approach

The study will involve medical professionals from a variety of specialties, including emergency care, laboratory medicine, radiology, pediatrics, general medicine, surgery, anesthesia, and nursing. Participants will be chosen from a number of medical facilities in key cities, such as Medina, Jeddah, Riyadh, and Dammam.

Study population

Licensed healthcare professionals who are currently working in Saudi Arabia will be among the target population, i.e., doctors, nurses, and other acquitted healthcare workers. a condition that they should be working in Saudi Arabia for about 6 months to 1 year, and be willing to participate in the study. Other non-medical staff, interns, trainees, etc. Will not be included in the study.

Study sample

This study will rely on a stratified random sampling technique. This will be used to ensure the justify the fair presentation of all the elements of population, from most of the specialties and regions. For each of the strata, simple random sampling will be used.

A minimum of 360 participants will be the target of the projected sample size, which will be calculated using standard prevalence-based formulae. A buffer of 10–15% will be added to accommodate for incomplete or non-response inquiries.

Study tool

For the current study, a questionnaire was used for data collection and was also considered a study tool.

Data collection

Three sections of a standardized self-administered questionnaire will be used:

- Data pertaining to age, gender, employment role, years of service, work hours, and other demographics

- Information regarding working hours and the pattern of shifts.

- Some open-ended feedback will also be gathered.

Data analysis

SPSS software (version 25 or higher) will be used to analyze the collected data. Working hours and levels of satisfaction will be summed up using descriptive statistics (means, frequencies, and standard deviations). To investigate correlations between variables like specialization, hours worked, and satisfaction levels, inferential techniques like logistic regression, ANOVA, and chi-square tests will be used. The threshold for significance will be set at $p < 0.05$.

Ethical considerations

It will be carried out on 10% of the total respondents (may be 30-40), and the results will be checked thereof. Further, any type of discrepancy will be removed, and the questionnaire or data sheet will be revised. A pilot study may also be conducted to state the precision level of the statistical tools and even the selection criteria of the respondents. The above-stated process will be followed throughout the pilot study, and the outcomes will be analyzed. The duration, manner, and viability will also be evaluated.

RESULTS

The study included 360 participants. The most frequent age among them was 18-28 years old ($n=193$, 53.6%), followed by 30-39 years old ($n=98$, 27.2%), then 50-59 years old ($n=27$, 7.5%). Figure 1 shows the age distribution among study participants. The most frequent gender among study participants was male ($n=189$, 52.5%) and female ($n=171$, 47.5%). Figure 2 shows the gender distribution among study participants. The most frequent marital status among study participants was Single ($n=197$, 54.7%), followed by married ($n=163$, 45.3%). Figure 3 shows the distribution of marital status among study participants.

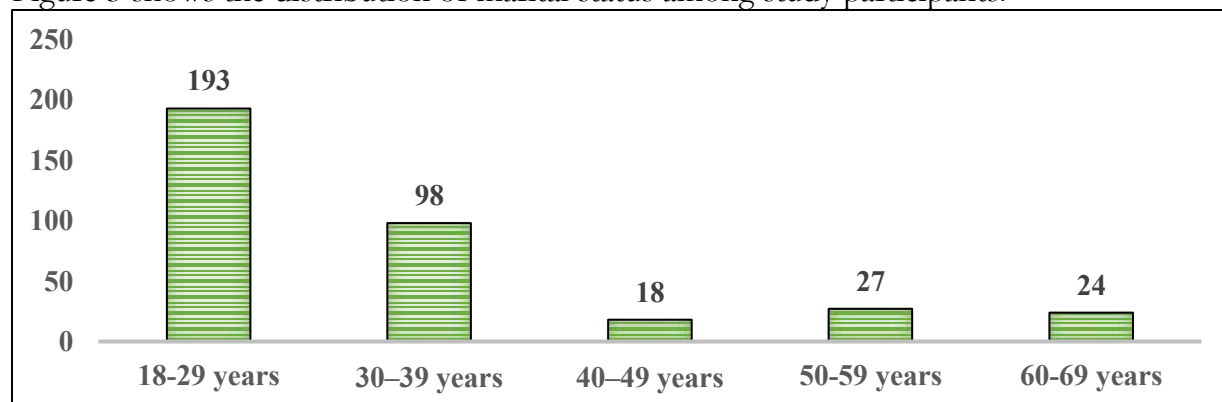


Figure 1: Age distribution among study participants

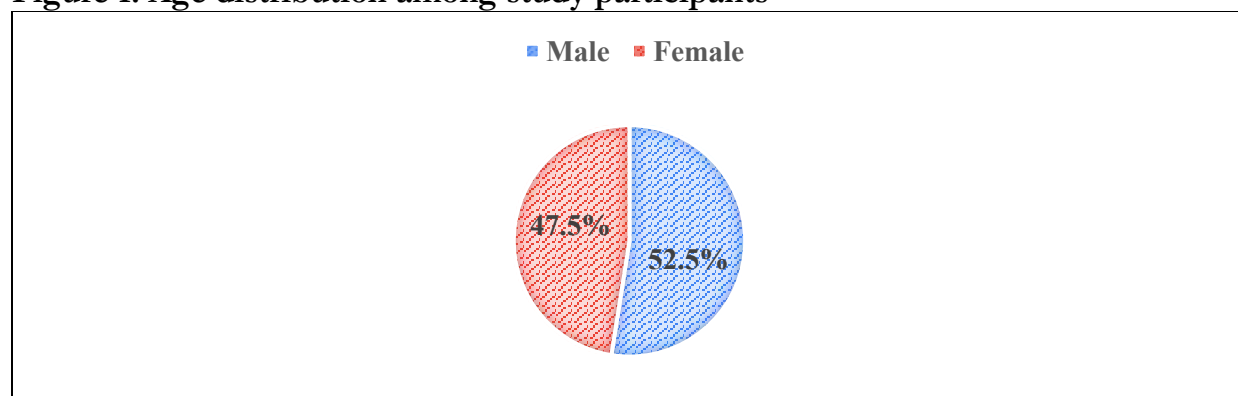


Figure 2: Gender distribution among study participants

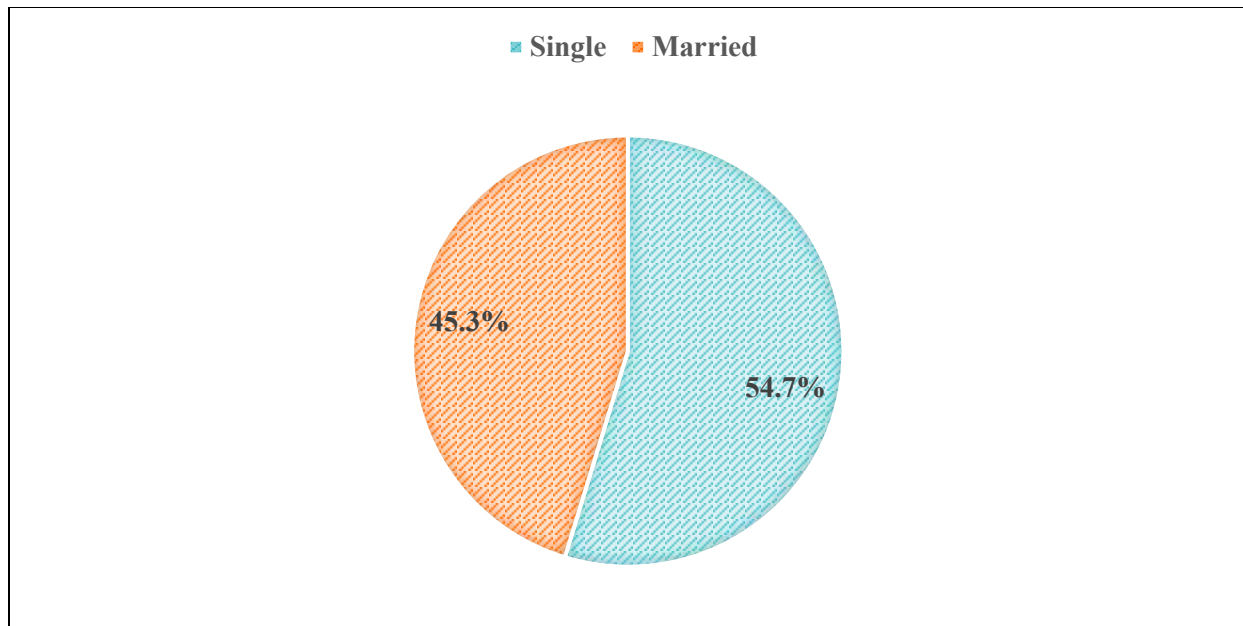


Figure 3: Marital Status distribution among study participants

Profession among study participants, with most of them were doctors ($n=270$, 75%), followed by Nurses ($n=43$, 11.9%), then lab technicians ($n=18$, 5%), and Admin/Clerical ($n=14$, 3.9%), at least pharmacists ($n=9$, 2.5%). Figure 4 shows the distribution of Profession among study participants. Current workplaces where most of them Government hospitals ($n=313$, 86.9%), followed by private hospitals ($n=28$, 7.85%), then Health centers ($n=10$, 2.8%), and at least a clinic ($n=28$, 7.8%).

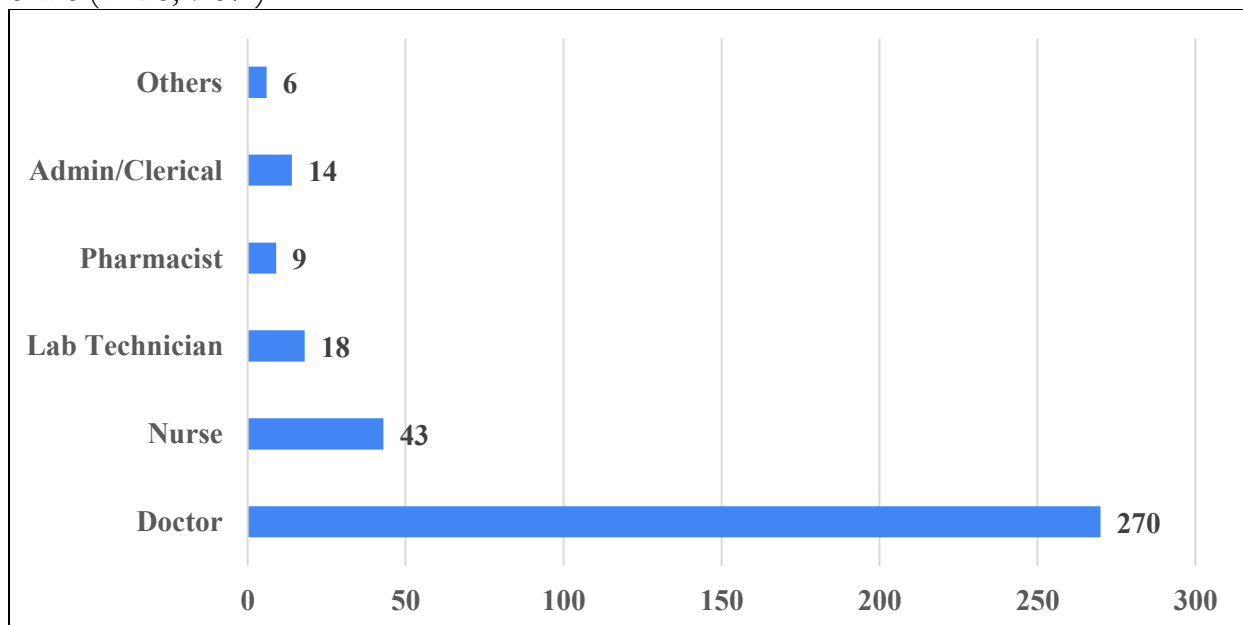


Figure 4: Current Workplace distribution among study participants

The participants' Work experience is most of them 1-5 years ($n=187$, 51.9%), followed by more than 10 years ($n=83$, 23.1%), then less than a year ($n=74$, 20.6%), and at least 6-10 years ($n=16$, 4.4%). The work experience is presented in Figure 5.

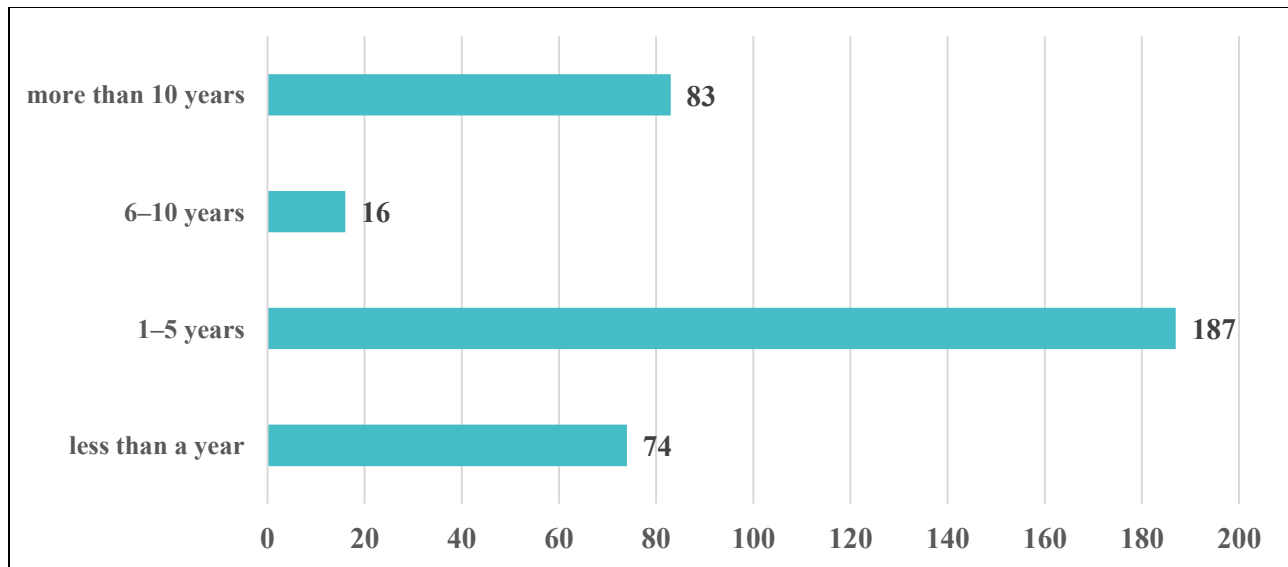


Figure 5: Work Experience distribution among study participants

Participants were asked about the working hours statement. Their responses and results are presented in Table 1.

<i>Table 1: Agreement Levels on Statements About Working Hours</i>					
Statement	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
My current working hours are excessive.	18 (5.0%)	40 (11.1%)	125 (34.7%)	94 (26.1%)	83 (23.1%)
I frequently work overtime without additional compensation.	39 (10.8%)	42 (11.7%)	75 (20.8%)	91 (25.3%)	113 (31.4%)
I feel physically and mentally exhausted after my shifts.	10 (2.8%)	29 (8.1%)	72 (20.0%)	122 (33.9%)	127 (35.3%)
My work schedule allows me enough rest and recovery time.	67 (18.6%)	94 (26.1%)	127 (35.3%)	59 (16.4%)	13 (3.6%)
Long working hours affect my ability to provide quality care.	17 (4.7%)	64 (17.8%)	87 (24.2%)	79 (21.9%)	113 (31.4%)
I have control over my shift timings and scheduling.	59 (16.4%)	90 (25.0%)	127 (35.3%)	64 (17.8%)	20 (5.6%)
I often skip meals or breaks due to workload.	18 (5.0%)	44 (12.2%)	58 (16.1%)	93 (25.8%)	147 (40.8%)
I experience difficulty balancing work and personal life.	18 (5.0%)	54 (15.0%)	82 (22.8%)	114 (31.7%)	92 (25.6%)

The participants' Working hours per week are most of them 41-48 hours (n=213, 59.2%), followed by 49-60 hours (n=57, 15.8%), then less than 40 (n=53, 14.7%), and more than 60 (n=37, 10.3%).

Participants were asked about Job Satisfaction Across Different Workplace Aspects. Their responses and results are presented in Table 2.

Table 2: Job Satisfaction Across Different Workplace Aspects					
Aspect	Very Dissatisfied	Dissatisfied	Neutral	Satisfied	Very Satisfied
Salary and financial benefits	53 (14.7%)	53 (14.7%)	121 (33.6%)	100 (27.8%)	33 (9.2%)
Work-life balance	50 (13.9%)	111 (30.8%)	152 (42.2%)	37 (10.3%)	10 (2.8%)
Respect and recognition from supervisors	48 (13.3%)	60 (16.7%)	96 (26.7%)	105 (29.2%)	51 (14.2%)
Opportunities for career advancement	78 (21.7%)	65 (18.1%)	92 (25.6%)	101 (28.1%)	24 (6.7%)
Relationship with colleagues and team support	29 (8.1%)	38 (10.6%)	85 (23.6%)	115 (31.95%)	93 (25.8%)
Access to training and development	43 (11.9%)	70 (19.4%)	106 (29.4%)	99 (27.5%)	42 (11.7%)
Mental health support available at work	113 (31.4%)	69 (19.2%)	102 (28.3%)	56 (15.6%)	20 (5.6%)
Overall job satisfaction	31 (8.6%)	55 (15.3%)	150 (41.7%)	99 (27.5%)	25 (6.9%)

Participants were asked Do you suffer from sleep disturbances due to long shifts; Most of them said yes (n=199, 55.3%), followed by sometimes (n=131, 36.4%), then no (n=30, 158.3%).

Participants were asked Have you experienced burnout or emotional fatigue in the past 6 months; Most of them said yes (n=223, 61.9%), followed by sometimes (n=106, 29.4%), then no (n=31, 8.6%).

Participants were asked Have long working hours led you to consider changing your profession or workplace; Most of them said yes (n=219, 60.8%), followed by no (n=86, 23.9%), then not sure (n=55, 15.3%). Figure 6 shows participants' long working hours.

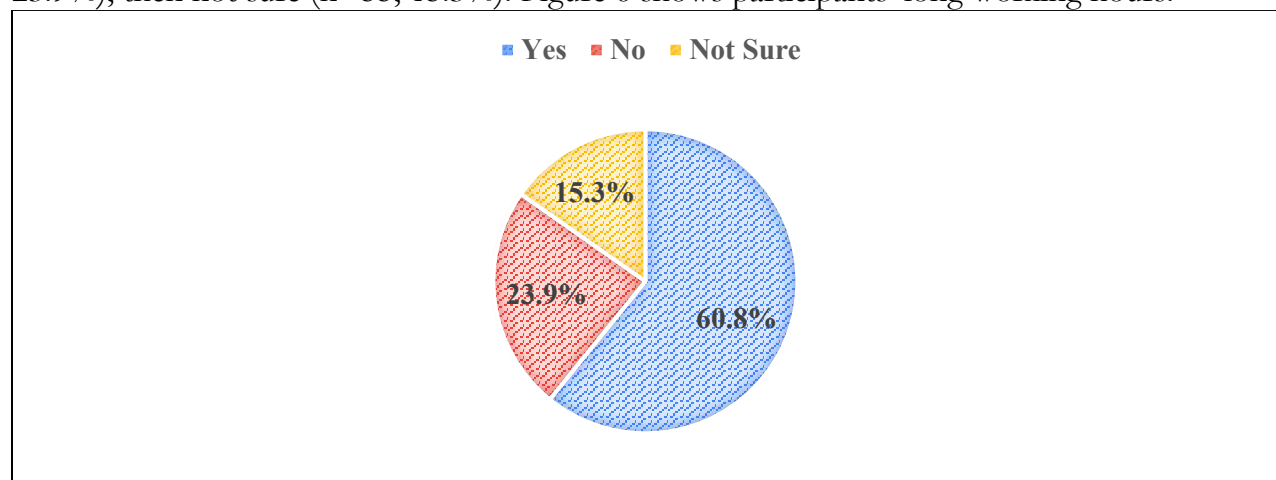


Figure 6: Long Working Hours distribution among study participants

CONCLUSION

The study showed that age, profession, workplace, years of experience, and working hours are clearly associated with sleep disturbances among healthcare workers, while gender and marital status show no such association.

References

1. Binkanan A. *Burnout and job satisfaction among wound care staff in Saudi Arabia: Implications for quality of care*. Wound Pract Res. 2024;32(4):192–9.
2. Al-Dossary RN. *The relationship between nurses' quality of work-life on organizational loyalty and job performance in Saudi Arabian hospitals: a cross-sectional study*. Front Public Health. 2022;10:918492.
3. Al-Surimi K, Almuhayshir A, Ghailan KY, Shaheen NA. *Impact of patient safety culture on job satisfaction and intention to leave among healthcare workers: Evidence from Middle East context*. Risk Manag Healthc Policy. 2022;15:2435–51.
4. Wali IA, Alzahrani MA, Aldeerawi M. *Job satisfaction among nurses working in King Abdul Aziz Medical City Primary Health Care Centers: a cross-sectional study*. J Family Med Prim Care. 2023;12(3):xxx–xxx. (PubMed PMID: 36788903)
5. Reddit+11PubMed+11journal.yemdd.org+11Cambridge Media Journals+1arXiv+1FrontiersDove Medical Press
6. Alotaibi AHMM, Alotaibi AHM, Alotaibi AMH, Alwahbi EB, Alkhathlan MS, Alnaddah SM, et al. *Job satisfaction among primary healthcare workers in Saudi Arabia and associated factors: a systematic review*. J Family Med Prim Care. 2022;6:185. Gavin Publishers
7. Alotaibi MT, Alqahtani MA, Aljohani MA, Alharthi SF, Alqahtani NS. *The analysis of job satisfaction of health practitioners in Saudi Arabia: Determinants and strategic recommendations for health workforce planning*. BMC Health Serv Res. 2023;23:xx. (PubMed PMID: 38249243) PubMed
8. Alghamdi R, Bahari G. *Shift work, psychological health disorders, and job security among nurses: a cross-sectional study in Saudi Arabia*. Healthcare. 2025;13(3):221. Lippincott Journals+4MDPI+4PubMed+4
9. Elsayed AE-M, Alshehri AA, Alshehri E, Sairafi RA, Alenazi SK, Hashem HA, et al. *Staffing levels, work schedules, required overtime, and turnover in acute-care hospitals: impact on healthcare workers' burnout, intention to leave, and job satisfaction – a cross-sectional study*. Heal Sci J. 2025;20(1):xx–xx. ripped-online.com
10. University Hospital Jeddah Team. *Occupational stress in healthcare workers at a university hospital, Jeddah, Saudi Arabia*. J Fam Community Med. 2022;29(1):xx–xx. PubMed+1Lippincott Journals+1
11. General Authority for Statistics. *Over 45% of employees in Saudi Arabia worked more than 40 hours a week in 2023*. Arab News. 2023 Dec 31: Business-Economy section.
12. WHO. Health and well-being. (2022). <https://www.who.int/data/gho/data/major-themes/health-and-well-being#:~:text=The%20WHO%20constitution%20states%3A%20%20>
13. Horst DJ, Broday EE, Bondarick R, Serpe LF, Pilatti LA: *Quality of working life and productivity: an overview of the conceptual framework*. Int J Manag Stud Res. 2014, 2:87-98.

14. Turner HC, Archer RA, Downey LE, Isaranuwatthai W, Chalkidou K, Jit M, Teerawattananon Y: An introduction to the main types of economic evaluations used for informing priority setting and resource allocation in healthcare: key features, uses, and limitations. *Front Public Health*. 2021, 9:722927. 10.3389/fpubh.2021.722927
15. McPake B, Dayal P, Zimmermann J, Williams GA: How can countries respond to the health and care workforce crisis? Insights from international evidence. *Int J Health Plann Manage*. 2024, 39:879-87. 10.1002/hpm.3766
16. Chang E, Cohen J, Koethe B, Smith K, Bir A: Measuring job satisfaction among healthcare staff in the United States: a confirmatory factor analysis of the Satisfaction of Employees in Health Care (SEHC) survey. *Int J Qual Health Care*. 2017, 29:262-8. 10.1093/intqhc/mzx012
17. Sng GG, Tung JY, Chua JL: Measuring the job satisfaction of junior doctors in Singapore: validating the Satisfaction of Employees in Health Care tool. *Singapore Med J*. 2023, 10.4103/singaporemedj.SMJ-2022-094
18. Sharma SC, Gupta R: Job satisfaction: difference in levels among selected industries. *Int J Recent Technol Eng*. 2020, 8: 5698-703. 10.35940/ijrte.F7994.038620
19. Halawani LA, Halawani MA, Beyari GM: Job satisfaction among Saudi healthcare workers and its impact on the quality of health services. *J Family Med Prim Care*. 2021, 10:1873-81. 10.4103/jfmpc.jfmpc_2236_20
20. Salam A: Job stress and job satisfaction among health care professionals. *Qatar Foundation Annual Research Conference Proceedings*. QScience, Doha, Qatar; 2016. 10.5339/qfarc.2016.HBOP2571
21. Yehya A, Sankaranarayanan A, Alkhal A, Alnoimi H, Almeer N, Khan A, Ghuloum S: Job satisfaction and stress among healthcare workers in public hospitals in Qatar. *Arch Environ Occup Health*. 2020, 75:10-7. 10.1080/19338244.2018.1531817
22. Rostami F, Babaei-Pouya A, Teimori-Boghsani G, Jahangirimehr A, Mehri Z, Feiz-Arefi M: Mental workload and job satisfaction in healthcare workers: the moderating role of job control. *Front Public Health*. 2021, 9:683388. 10.3389/fpubh.2021.683388
23. Giménez-Espert MD, Prado-Gascó V, Soto-Rubio A: Psychosocial risks, work engagement, and job satisfaction of nurses during COVID-19 pandemic. *Front Public Health*. 2020, 8:566896. 10.3389/fpubh.2020.566896
24. Said RM, El-Shafei DA: Occupational stress, job satisfaction, and intent to leave: nurses working on front lines during COVID-19 pandemic in Zagazig City, Egypt. *Environ Sci Pollut Res Int*. 2021, 28:8791-801. 10.1007/s11356-020-11235-8
25. Alrawashdeh HM, Al-Tammemi AB, Alzawahreh MK, et al.: Occupational burnout and job satisfaction among physicians in times of COVID-19 crisis: a convergent parallel mixed-method study. *BMC Public Health*. 2021, 21:811. 10.1186/s12889-021-10897-4
26. Barili E, Bertoli P, Grembi V, Rattini V: Job satisfaction among healthcare workers in the aftermath of the COVID-19 pandemic. *PLoS One*. 2022, 17:e0275334. 10.1371/journal.pone.0275334
27. Karaferis D, Aletras V, Niakas D: Job satisfaction of primary healthcare professionals: a cross-sectional survey in Greece. *Acta Biomed*. 2023, 94:e2023077. 10.23750/abm.v94i3.13878
28. Ab Rahman N, Husin M, Dahian K, Mohamad Noh K, Atun R, Sivasampu S: Job satisfaction of public and private primary care physicians in Malaysia: analysis of findings from QUALICO-PC. *Hum Resour Health*. 2019, 17:82. 10.1186/s12960-019-0410-4

ANNEX 1: DATA COLLECTION TOOL**Q1.****Age:**

- a. 18-29 years
- b. 30–39 years
- c. 40–49 years
- d. 50-59 years
- e. 60-69 years
- f. 70 years and more

Q2. Gender:

- a. Male
- b. Female

Q3. Marital Status:

- a. Single
- b. Married

Q4. Profession:

- a. Doctor
- b. Nurse
- c. Lab Technician
- d. Pharmacist
- e. Admin/Clerical
- f. Others: _____

Q5. Current Workplace:

- a. Government hospital
- b. Private hospital
- c. Clinic
- d. Health center

Q6. Work Experience:

- a. less than a year
- b. 1–5 years
- c. 6–10 years
- d. more than 10 years

Q7. Working Hours per Week:

- a. Less than 40
- b. 41–48
- c. 49–60
- d. More than 60

Section B: Workload and Working Hours Perception

(Please rate each statement on a 5-point Likert scale)
 (1 = *Strongly Disagree*, 2 = *Disagree*, 3 = *Neutral*, 4 = *Agree*, 5 = *Strongly Agree*)

No.	Statement	1	2	3	4	5
Q8.	My current working hours are excessive.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Q9.	I frequently work overtime without additional compensation.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Q10.	I feel physically and mentally exhausted after my shifts.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Q11.	My work schedule allows me enough rest and recovery time.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Q12.	Long working hours affect my ability to provide quality care.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Q13.	I have control over my shift timings and scheduling.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Q14.	I often skip meals or breaks due to workload.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Q15.	I experience difficulty balancing work and personal life.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Section C: Job Satisfaction Dimensions

(1 = Very Dissatisfied, 2 = Dissatisfied, 3 = Neutral, 4 = Satisfied, 5 = Very Satisfied)

No.	Aspect	1	2	3	4	5
Q16.	Salary and financial benefits	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Q17.	Work-life balance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Q18.	Respect and recognition from supervisors	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Q19.	Opportunities for career advancement	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Q20.	Relationship with colleagues and team support	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Q21.	Access to training and development	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Q22.	Mental health support available at work	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Q23.	Overall job satisfaction	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Q24. Do you suffer from sleep disturbances due to long shifts?

- a. Yes
- b. No
- c. Sometimes

Q25. Have you experienced burnout or emotional fatigue in the past 6 months?

- a. Yes
- b. No
- c. Sometimes

Q26. Do you find it hard to maintain a healthy lifestyle (exercise, meals, rest) due to work demands?

- a. Yes
- b. No
- c. Sometimes

Q27. Have long working hours led you to consider changing your profession or workplace?

- a. Yes
- b. No
- c. Not Sure

APPENDIX 2: Participants' responses to scale items

age	Frequenc y	Percent
18-29 years	193	53.6
30-39 years	98	27.2

40–49 years	18	5.0
50-59 years	27	7.5
60-69 years	24	6.7
Total	360	100.0

gender	Freque ncy	Percent
Male	189	52.5%
Female	171	47.5%
Total	360	100.0

Marital Status	Freque ncy	Percent
Single	197	54.7%
Married	163	45.3%
Total	360	100.0

Profession	Freque ncy	Percent
Doctor	270	75.0
Nurse	43	11.9
Lab Technician	18	5.0
Pharmacist	9	2.5
Admin/Clerical	14	3.9
Others	6	1.7
Total	360	100.0

Current Workplace	Freque ncy	Percent
Government hospital	313	86.9
Private hospital	28	7.8
Clinic	9	2.5
Health center	10	2.8
Total	360	100.0

Work Experience	Frequency	Percent
less than a year	74	20.6
1–5 years	187	51.9
6–10 years	16	4.4
more than 10 years	83	23.1
Total	360	100.0

Working Hours	Frequency	Percent
Less than 40	53	14.7
41–48	213	59.2
49–60	57	15.8
More than 60	37	10.3
Total	360	100.0

Table 1:

Statement	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
My current working hours are excessive.	18 (5.0%)	40 (11.1%)	125 (34.7%)	94 (26.1%)	83 (23.1%)
I frequently work overtime without additional compensation.	39 (10.8%)	42 (11.7%)	75 (20.8%)	91 (25.3%)	113 (31.4%)
I feel physically and mentally exhausted after my shifts.	10 (2.8%)	29 (8.1%)	72 (20.0%)	122 (33.9%)	127 (35.3%)
My work schedule allows me enough rest and recovery time.	67 (18.6%)	94 (26.1%)	127 (35.3%)	59 (16.4%)	13 (3.6%)
Long working hours affect my ability to provide quality care.	17 (4.7%)	64 (17.8%)	87 (24.2%)	79 (21.9%)	113 (31.4%)
I have control over my shift timings and scheduling.	59 (16.4%)	90 (25.0%)	127 (35.3%)	64 (17.8%)	20 (5.6%)

I often skip meals or breaks due to workload.	18 (5.0%)	44 (12.2%)	58 (16.1%)	93 (25.8%)	147 (40.8%)
I experience difficulty balancing work and personal life.	18 (5.0%)	54 (15.0%)	82 (22.8%)	114 (31.7%)	92 (25.6%)

Table 2:

Aspect	Very Dissatisfied	Dissatisfied	Neutral	Satisfied	Very Satisfied
Salary and financial benefits	53 (14.7%)	53 (14.7%)	121 (33.6%)	100 (27.8%)	33 (9.2%)
Work-life balance	50 (13.9%)	111 (30.8%)	152 (42.2%)	37 (10.3%)	10 (2.8%)
Respect and recognition from supervisors	48 (13.3%)	60 (16.7%)	96 (26.7%)	105 (29.2%)	51 (14.2%)
Opportunities for career advancement	78 (21.7%)	65 (18.1%)	92 (25.6%)	101 (28.1%)	24 (6.7%)
Relationship with colleagues and team support	29 (8.1%)	38 (10.6%)	85 (23.6%)	115 (31.9%)	93 (25.8%)
Access to training and development	43 (11.9%)	70 (19.4%)	106 (29.4%)	99 (27.5%)	42 (11.7%)
Mental health support available at work	113 (31.4%)	69 (19.2%)	102 (28.3%)	56 (15.6%)	20 (5.6%)
Overall job satisfaction	31 (8.6%)	55 (15.3%)	150 (41.7%)	99 (27.5%)	25 (6.9%)

sleep disturbances	Frequency	Percent
Yes	199	55.3
No	30	8.3
Sometimes	131	36.4
Total	360	100.0

emotional fatigue	Frequency	Percent
Yes	223	61.9
No	31	8.6
Sometimes	106	29.4
Total	360	100.0

healthy lifestyle	Frequency	Percent
Yes	263	73.1
No	34	9.4
Sometimes	63	17.5
Total	360	100.0

long working hours	Frequency	Percent
Yes	219	60.8%
No	86	23.9%
Not Sure	55	15.3%
Total	360	100.0

Chi-square:

Test Statistics								
	age	gender	Marital Status	Profession	Current Workplace	Work Experience	Working Hours	Sleep disturbances
Chi-Square	313.361 ^a	.900 ^b	3.211 ^b	896.433 ^c	739.267 ^d	168.778 ^d	226.622 ^d	120.517 ^e
df	4	1	1	5	3	3	3	2
Asymp. Sig.	.000	.343	.073	.000	.000	.000	.000	.000
a. 0 cells (0.0%) have expected frequencies less than 5. The minimum expected cell frequency is 72.0.								
b. 0 cells (0.0%) have expected frequencies less than 5. The minimum expected cell frequency is 180.0.								
c. 0 cells (0.0%) have expected frequencies less than 5. The minimum expected cell frequency is 60.0.								
d. 0 cells (0.0%) have expected frequencies less than 5. The minimum expected cell frequency is 90.0.								
e. 0 cells (0.0%) have expected frequencies less than 5. The minimum expected cell frequency is 120.0.								

The results indicate that work-related factors—such as profession, workplace setting, years of experience, and weekly working hours—as well as age, are significantly associated with sleep disturbances. However, gender and marital status show no statistically significant relationship with sleep disturbances.