Exploring The Mental Health and Well-Being of Public Healthcare Workers (HCWs) Amid Economic Crisis in Sri Lanka

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Abstract: This study explores the mental health and well-being challenges faced by public healthcare workers (HCWs) in the midst of Sri Lanka's economic crisis. Despite existing research on the psychological impacts of pandemics on HCWs worldwide, there is a dearth of qualitative investigations that specifically focus on the mental health struggles of HCWs during economic downturns. Against the backdrop of Sri Lanka's financial crisis and the Covid-19 pandemic, this study aims to fill this research gap by exploring the lived experiences and perspectives of HCWs. From September 2023 to February 2024, researchers conducted a qualitative study of mental health outcomes among HCWs during crises in Sri Lanka. This study, through thematic analysis of interviews with doctors, nurses and healthcare assistants, explores key challenges and outcomes at personal and professional levels. The study identified four significant themes such as impact on personal relationships, unhealthy coping mechanisms, impaired job performance, and reduced job satisfaction. It demonstrates how these challenges are interconnected, leading to a cycle of negative consequences. Introducing a new framework, the study elucidates the interrelationship and impact of these challenges on adverse consequences. This research underscores the urgency to address the mental health challenges faced by health workers during economic crises, emphasizing the critical need for strong support systems. It emphasizes theoretical and managerial contributions, emphasizing the importance of organizational support, effective communication and coping mechanisms in improving the well-being of HCWs. Ultimately, this research sets the stage for future efforts to better understand and support the mental health of HCWs during crises.

Keywords: *Economic crisis, Framework, Mental health and well-being, Public Healthcare Workers, Sri Lanka*

Introduction

The economic downturn that has emerged in recent years is expected to have negative social and health consequences. The economic crisis affects both public health and the role of health professionals, presenting challenges that must be addressed. However, there is a gap in research related to the mental health and well-being of healthcare workers (HCWs) in the midst of these situations. Although several studies globally have extensively explored the psychological impact of working during pandemics on HCWs, there is a substantial research gap in relation to qualitative investigations (Marinaci et al., 2023). Especially in developing counties like Sri Lanka, there is a convergence of financial crisis with the Covid-19 pandemic as unique challenges.

Despite the acknowledgment of increased psychological stress among HCWs due to COVID-19, little attention has been paid to understanding the additional stress imposed by economic crisis constraints. Especially in contexts where the expectation of economic impact is high. In Sri Lanka, where the effects of the economic crisis have spread across many sectors, including healthcare, there is a need to examine how these intersecting crises affect the mental health and well-being of HCWs. This study aims to fill this gap by exploring the lived experiences and perspectives of HCWs, providing qualitative insights into the effects of preparation and work on their well-being during the economic crisis. Furthermore, the study aims to identify specific challenges faced by HCWs that can be mitigated through changes in hospital systems or healthcare setting processes. Through this research, we can gain a deeper understanding of the nuanced challenges faced by the health workforce in Sri Lanka amid the economic crisis. At last, this research problem aims to explore the impact of economic or financial crises on the mental health and well-being of public HCWs in developing countries, particularly Sri Lanka, to identify challenges and suggest system improvements to support their overall well-being.

Contextual background

Sri Lanka, once renowned as a model for its healthcare system, has historically enjoyed a commendable health status by providing its citizens with widely accessible medical services at no cost. Provision of free medical services across the country ensures comprehensive, high quality, equitable and sustainable healthcare facilities. Over the years, according to a report by the Ministry of Health, overall health expenditures have increased significantly from 43 billion in 2005 to 206 billion in 2017, which aims to ensure the long-term sustainability of

the health system and contribute to socioeconomic development of the Nation. Despite the rich diversity of medical practices in Sri Lanka, the emergence of COVID-19 has posed substantial challenges to the health system due to its rapid spread. Presently, the country grapples with managing healthcare costs amidst an economic crisis, endangering the national healthcare system. The shortage of fuel has particularly affected the transportation of healthcare professionals and emergency patients, as highlighted in the annual report of 2023. Additionally, in April 2022, a steep increase in pharmaceutical product prices by 40% has discouraged people from seeking treatment in private hospitals, consequently placing a heavier burden on public HCWs (Dilini Mataraarachchi, 2023).

In Sri Lanka, publications such as the weekly epidemiological report highlight the mental health struggles of the general public during economic crises, yet there is a gap in understanding the well-being of HCWs in similar contexts. While the physical effects are documented, the psychological threats posed by political instability, social unrest, and protests are obvious, leading to elevated depression, anxiety, and suicide risks. Additionally, limited access to medicines exacerbates these conditions, further affecting affected communities. Focused research is needed to address the mental well-being of HCWs in such a challenging environment.

Objectives and Research Questions

The research objectives are to investigate the mental health and well-being challenges encountered by HCWs during economic crises, to explore the consequences of these challenges on HCWs, and to recommend potential improvements to healthcare systems or processes aimed at mitigating stress and enhancing the well-being of HCWs. The research explores into the viewpoints of diverse HCWs by investigating the following questions:

> ***RQ1:*** *What mental health and well-being challenges are experienced by HCWs during the economic crisis?*
> ***RQ2:*** *What are the consequences of mental health and well-being challenges faced by HCWs during the economic crisis, both personally and professionally?*
> ***RQ3:*** *What specific improvements to healthcare systems or processes can be recommended to reduce stress and improve the well-being of HCWs during the economic crisis?*

In order to address the research questions outlined, this study adopts a comprehensive research framework that includes several key components. Following a thorough review of the existing literature, subsequent sections explore the methodology used for this qualitative study, followed by an in-depth analysis of the data collected and a presentation of conclusions. The following discussion explains the findings and explores their implications in terms of theoretical and managerial relevance. This structured approach contributes to an in-depth exploration of the research questions and a deeper understanding of the healthcare setting.

Literature review

In the process of bridging the research gap, researchers have conducted a comprehensive review of existing literature. Recent studies have shed light on various aspects of HCWs' mental health and well-being. Specifically, the literature has explored themes such as the relationship between staff well-being and patient outcomes, the impact of the pandemic on the work-life balance of primary health workers, factors contributing to stress levels among primary health workers, HCWs' awareness of patient safety culture and organizational factors influencing employee perceptions and behavior (Table 1). Through this review, valuable insights have been gained, providing a foundation for further investigation into the complex dynamics affecting the mental health of HCWs in economic crisis situations.

Previous research examines work-life balance (WLB) and its impact on quality of life (QoL) among HCWs. WLB significantly affects QoL in all areas, with findings revealing that workers spend more time at work than in personal life (Askari et al., 2021). That study underscores the need to address WLB concerns, particularly among HCWs, to improve overall QoL through effective workplace strategies. Review of literature finds that job satisfaction is closely tied to working conditions, organizational environment, job stress, and role perception (Lu et al., 2012). A study underscores ongoing investigations in occupational health psychology regarding the impact of leadership on follower well-being. It emphasizes the importance of defining "good" leadership, developing effective leadership styles, understanding long-term health outcomes, and acknowledging the contextual factors that shape leadership influence. The need for future research to fully understand the relationship between leadership and employee health and well-being is emphasized (Nielsen et al., 2009; Nielsen & Taris, 2019; Wong et al., 2013). Despite valuable insights from the study of psychological distress and Health-Related Quality-of-Life (HRQoL) of HCWs during the peak of COVID-19, several areas for future research remain unexplored. Further investigation is needed into HCWs' coping mechanisms in response to stressors and their impact on mental health outcomes. Further studies can provide clarity on the long-term effects of stressors on the well-being of HCWs. Additionally, examining the effectiveness of tailored intervention strategies for HCWs in low-resource settings will be important to inform targeted support efforts (Manh Than et al., 2020).

Table 1: Summaries of the Literature Review on Mental Health and Well-Being of HCWs

Study focuses on	Findings	Identified themes	Source
Elements of improving quality and safety in healthcare	Highlight the links between staff wellbeing and patient outcomes and recommend health promotion integrated into the daily work of frontline staff. The importance of adequate time, resources and commitment to quality in professional work	• Workplace conditions • Staffing • Psychological safety, teamwork and speaking up • Staff health and well-being at work	(Maben et al., 2023)
Work stress among primary HCWs	During the pandemic, primary HCWs experience interference between work and personal life, contributing to higher stress levels	• Mental health • Primary healthcare • COVID-19 pandemic • Work-life balance • Stress	(Putri et al., 2023)
Psychological distress experienced by health workers during the COVID-19 pandemic	Highlight themes of pandemic significance and impact, emphasizing the risks of fear normalization and the importance of recognizing HCWs' vulnerability and resilience amidst resource limitations	• Health emergency and personal crisis • COVID-19	(Marinaci et al., 2023)
Investigates the quality of life and its correlates among doctors in Uva province, Sri Lanka	Factors such as age, involvement in private practice, regular physical exercise, level of qualification, and living arrangement were significant predictors of quality of life among doctors, suggesting potential avenues for improving their well-being	• Behavioral factors among medical professionals • Explore in-depth impacts on quality of life	(Ariyadasa et al., 2023)
The resilience of Sri Lanka's health care system amid crises emanating from non-health sectors, examine factors that contribute to resilience, particularly during the current economic crisis	Infrastructure investments, skilled workforce, universal health coverage, robust disease prevention, effective policies, political commitment, and accessible social networks are elements that enhance health outcomes, enabling the system to withstand crises	• Healthcare system • Resilience • Robustness • Investments • Infrastructure • Workforce • Universal health coverage • Disease prevention • Policies • Political commitment • Social networks	(De Silva et al., 2022)
Investigates depressive symptoms, anxiety levels, and related psychosocial and	High depressive symptoms and anxiety in over half of the participants, with fear of	• Heavy workload • Psychological support services	(Perera et al., 2021)

occupational factors among healthcare professionals in Sri Lanka during the COVID-19 pandemic	infection and spreading among family members, stigmatization, poor self-confidence, poor occupational safety, and heavy workload identified as critical risk factors	tailored to healthcare professionals	
Psychological problems experienced by HCWs, military professionals, and the general public in Sri Lanka during the COVID-19 pandemic	High education level acted as a protective factor, while being a HCW or military professional increased the risk of experiencing depressive symptoms and severe anxiety compared to the general public	• COVID-19 pandemic • Psychological vulnerabilities • Healthcare workers • Military professionals • General public • Depressive symptoms	(Sundarapperuma et al., 2023)
The impact of organizational culture and leadership climate on organizational attractiveness and innovative behavior among hospital employees	Organizational culture, IMOC (Internal market-oriented culture), organizational climate resources, and SA (Support for autonomy) strongly influence employee perceptions of organizational attractiveness and innovative behavior	• Internal market-oriented cultures (IMOCs) • Support for autonomy (SA)	(Mutonyi et al., 2022)
Patient safety culture awareness among HCWs	Overall patient safety awareness is low, requiring attention and solutions such as error reporting, safety barriers and leadership corridors. Healthcare administrators must foster cultures of safety that focus on trust, justice, and learning and reporting	• Patient safety culture • Awareness among HCWs	(Albaalharith & A'aqoulah, 2023)

Methodology

Emphasizing subjective experiences and interpretations, this research adopts a qualitative approach with an interpretive philosophy to explore the mental health and well-being impact of times of crisis among HCWs in Sri Lanka. Using thematic analysis, the researchers analyse the data collected through in-depth interviews in Sinhala and Tamil, with the aim of identifying patterns, themes and meanings, contributing to a comprehensive understanding of the phenomenon. Purposive sampling is used to select relevant HCWs to ensure representation of diverse perspectives in the study.

Qualitative research

This research was undertaken during September 2023 – February 2024 in Sri Lanka as qualitative research (Savin-Baden & Howell Major, 2023). The overall aim of this study is to explore the mental health and well-being impact of the crisis times among HCWs in Sri Lanka. Researchers deployed thematic analysis to interrogate the data and focus on individual accounts of experience, for analyzing and framing the research data.

Sample and Recruitment

In this study, purposive sampling was used to select a specific individual of public HCWs includes doctors, nurses and healthcare assistants from hospitals in different Province in Sri Lanka for whom the research questions were relevant (Stallings, 2007). Demographic information of the respondents is presented in Table 2.

Table 2: Demographic Details of HCW Respondents

Code	Designation	Gender	Year of experiences	Province
HCW01	Nurse	Female	21	Northern
HCW02	Doctor	Female	19	Central
HCW03	Doctor	Male	27	Central
HCW04	Healthcare assistant	Male	30	Eastern
HCW05	Doctor	Male	20	Northern
HCW06	Nurse	Female	15	North central
HCW07	Nurse	Male	26	Eastern
HCW08	Doctor	Male	22	Northwestern
HCW09	Healthcare assistant	Female	28	Southern
HCW10	Doctor	Female	12	North central

Data Collection

Using in-depth interview methods (Osborne & Grant-Smith, 2021), researchers collected data from health workers in their native languages, including Sinhala and Tamil. Each interview varied in duration, typically lasting between 30 and 35 minutes, depending on the conversational flow. The interview guide questions are Can you describe your typical workday and the various factors that contribute to your sense of wellbeing at work?, How do you perceive the level of support provided by your workplace in terms of mental health and wellbeing resources?, What specific challenges do you encounter in maintaining your mental wellbeing while working in the healthcare sector, particularly during crisis periods?, Can you share any strategies or coping mechanisms you have developed to manage stress and promote wellbeing in your workplace?, How do you feel your workplace culture impacts your mental health and overall wellbeing?.





Figure 1 and 2: Follow-Up Interview with A Doctor and Nurses of A Hospital
The Third Author Took Pictures with The Permission of Doctor and Hospital Nurses.
Source: Authors' Information-gathering

Date Analysis

Thematic analysis is the search for emerging themes that best describe the phenomenon (Jeanne Daly et al., 1997). Braun & Clarke, (2006) claim that thematic analysis is a flexible and useful research tool, providing a rich and very detailed, but complex, account of the data. Hence, researchers obtained consent from participants and recorded the interviews. Subsequently, the data collected from health workers were translated into English and transcribed. The researchers then conducted an analysis of the interviews, carefully reading the data and generating open codes to describe the experiences of the respondents regarding mental health and well-being. The raw codes extracted from the data were organized and categorized into subthemes as a method for data reduction and sense-making (Michael Quinn Patton, 2002). From a total of ten interviews' data, several common themes emerged (see Table 3).

Table 3: Commonly Reported Themes from Coding

Open coding	Axial coding	Final coding / Coded themes
Increasing demand for public healthcare services, workload pressures, balance work and personal life, less time to spend with family and friends, never faced a crisis like the financial crisis, under great stress, well-being goes beyond illness, happiness and life satisfaction, healthy work-life balance, limited time devoted to family, wellbeing is lacking, constant pressure and long hours, inaccessible or inadequate, migration of health workers, better wages and working conditions, without receiving any additional compensation, avoid avoiding their stressors, repressing their problems, withdrawing from social interactions, overwhelmed with patients, workload was relentless, cleanliness is often neglected, due to cost-cutting measures, causes additional hardship, patients' ability to afford needed treatments, sad to see patients struggling financially, contributing to our community, decline in job satisfaction over time, ongoing administrative pressures, Finding time to take a break, we can't afford amid the understaffed, otherwise our job satisfaction becomes questionable	Workload stress Mental health stigma Staffing challenges Lack of support systems Patients' financial strain Supply shortages Increased patient visits Resource constraints Access barrier Patient grief	Impact on personal relationships Unhealthy coping mechanisms Impaired job performance Reduced job satisfaction

Validity and Credibility

This study strengthens validity and reliability through several approaches. Researchers ensured accurate respondents' representation through member checks, verifying the accuracy and reliability of interpretation based on respondents' remarks. Data saturation was achieved, indicating that new data did not provide additional insights. For example, both first and last HCW respondents expressed similar experiences. In addition, feedback was sought from qualitative research experts, and experienced researchers reviewed the study, providing valuable insights to improve the overall credibility of the analysis (Johnson et al., 2020).

Results

The study used data analysis to explore ten challenges related to mental health and well-being, gathering insights from public HCWs. These perspectives focused on Sri Lanka's economic crisis. The results section presents significant findings from these interviews, organized according to emerging themes.

Impact on personal relationships

HCWs face profound challenges in maintaining personal relationships due to financial burdens, work-related stress, and stigma surrounding mental health issues. The increasing demand for health services exacerbates workload pressure, reducing time for family and friends and hindering support-seeking behavior. Respondents highlight the psychological toll of economic crisis situations, emphasizing the necessity for effective management responses.

> *"In my experience, the increasing demand for public healthcare services driven by financial constraints and workload pressures significantly affects our ability to balance work and personal life. This often leaves less time to spend with family and friends" – HCW01*

From managing with a surge in patients to questioning the suitability of their environment for future generations, the impact is deeply felt:

> *"I have been working as a nurse in this hospital for the last 3 years, but my dedication to this profession is 15 years. In my entire life, I have never faced a crisis like the financial crisis. It brought unprecedented challenges. Seeing our HCWs under great stress, many struggling with concerns about their own lives and the lives of their children, is deeply worrying, especially given the uncertain circumstances in Sri Lanka" – HCW06*

However, a HCW acknowledges challenges in achieving a healthy work-life balance due to demanding professional obligations. This disparity affects the overall well-being, neglecting individual lives:

"In my view, well-being goes beyond illness… it encompasses a person's physical, mental, emotional and social health. Well-being is intricately linked to happiness and life satisfaction. However, HCWs face difficulties in maintaining a healthy work-life balance due to limited time devoted to family. When we are fully involved in our professional duties, our personal lives often take a back seat" – HCW02

Increasing demands on healthcare increase workload pressure, limit time for family and prevent seeking support. Evidence highlights the psychological toll of economic crises on health workers, urging effective management responses. Despite recognizing the importance of holistic well-being, HCWs struggle to balance professional obligations and personal lives, often neglecting the latter.

Unhealthy coping mechanisms

Short-staffed and overcrowded hospitals compromise quality of care and contribute to stress and burnout among HCWs. During crises, insufficient resources and support systems can heighten stress and compassion fatigue. HCWs may resort to unhealthy coping mechanisms such as withdrawal from social activities to manage stress related to economic pressures. With understaffing and inadequate resources, respondents feel overwhelmed and underserved:

"Frankly, the support provided by my workplace regarding mental health and wellbeing is lacking… Despite my best efforts to stay positive, the constant pressure and long hours really took a toll on my mental health" – HCW01

"The support offered by my workplace in relation to mental health and wellbeing is limited and although some resources are available on paper, they are often inaccessible or inadequate to address the real issues we face on a day-to-day basis" – HCW10

The migration of health workers in Sri Lanka presents a significant challenge, resulting in heavy workloads for those who remain without additional compensation. Despite constant stress and long hours of trying to stay positive, this strain on mental health is evident. Respondents also expressed their feelings towards brain-drain due to high workload:

"Now-a-days, migration of health workers is a challenge in Sri Lanka. The desire to move to economically advanced countries stems from the pursuit of better wages and working conditions. As a result, existing employees are forced to perform duties across districts without receiving any additional compensation" – HCW04

Furthermore, another tendency to withdraw from social activities can exacerbate mental health challenges and hinder the ability to effectively cope with work-related stressors.

"I have observed that many HCWs avoid avoiding their stressors or seeking help, instead repressing their problems or withdrawing from social interactions" – HCW09

HCWs under economic crisis may resort to unhealthy coping mechanisms, such as withdrawing from social activities, increasing feelings of isolation, and straining mental well-being. This stress is compounded by challenges such as avoidance and lack of support, understaffed hospitals, hindering the delivery of quality care and contributing to stress and burnout. This underscores the critical need for comprehensive support measures to address the mental health challenges faced by HCWs.

Impaired job performance

Mental health challenges stemming from economic pressures can reduce the ability of HCWs to treat patients, make sound decisions, and provide high-quality care. Heavy workload and long hours contribute to physical and mental tiredness. Additionally, the rise in malnutrition cases as a result of the economic crisis indirectly affects health workers, increasing feelings of helplessness. Likewise, the emotional stress of witnessing patient suffering, providing temporary care, and experiencing loss undermines health workers' well-being.

"Last couple of months we had a very bad time in the hospital due to the surge in dengue cases, our unit was overwhelmed with patients, and the workload was relentless…. not only an increase in dengue cases but also an increase in malnutrition cases among our patients. This trend is attributed to low consumption of nutritious foods among the public. This is a complex situation we are currently struggling with…" – HCW03

Furthermore, respondents revealed concerns about resource allocation, specifically mentioning cuts in essential services such as cleaning workers and travel expenses which to some extent hinder job performance:

"To face these challenges, we must strive to change the current environment. Conditions around us are not ideal as cleanliness is often neglected due to cost-cutting measures implemented by hospital management. Due to this, the number of cleaning staff decreases and hygiene is caused. Also, essential services such as fuel or travel expenses for our extra efforts are not provided, which causes additional hardship, especially in times of crisis" – HCW05

An economic crisis affects patients' ability to access essential medical treatments. Respondent is concerned about the link between economic factors and health accessibility, seeing patients' financial struggles raise the emotional burden on HCWs.

> *"I see a variety of patients with a variety of medical conditions, from minor illnesses to life-threatening illnesses. The economic crisis has heightened my concern about patients' ability to afford needed treatments and medicines. It is sad to see patients struggling financially and it breaks my heart" – HCW08*

Economic pressures negatively affect the mental health of HCWs, reducing their focus on patient care and decision-making skills. Heavy workloads and budget constraints contribute to physical and mental overtiredness, while limited access to mental health support worsens the situation. Especially, diagnosing patient distress increases emotional distress, affecting job performance. Evidences from health workers emphasize the need to address economic factors and health access to improve job performance.

Reduced job satisfaction

Financial pressures and work-related stress reduce job satisfaction and affect the well-being of HCWs. Economic crises hinder patients' ability to afford treatments, while shortages of medical supplies add to the concern. Respondents expressed HCWs' concerns about work-related safety and self-sustainability, which further affected their overall well-being and job satisfaction. Adequate resources and appropriate work setting are identified as an important factor affecting job satisfaction, suggesting a link between resource availability and satisfaction levels:

> *"As someone who finds fulfillment in contributing to our community, I take great pride in my role as a HCW. However, I have noticed a decline in job satisfaction over time, often due to a number of factors. These include high patient load, occasionally toxic work environments, challenges with accommodation and transportation, inadequate pay rates, difficulties with transfers, and ongoing administrative pressures" – HCW09*

Inability to find time for breaks or leisure activities can lead to feelings of overtiredness and negatively affect job satisfaction. Establishing clear boundaries between work and personal life is emphasized as essential to reduce burnout and maintain job satisfaction among HCWs.

> *"Finding time to take a break or pursue a hobby seems like a pleasure we can't afford amid the understaffed and overworked wards… Establishing clear boundaries between work and personal life is essential to prevent burnout, otherwise our job satisfaction becomes questionable" – HCW07*

As patients struggle to afford treatments and medicines due to the economic crisis, HCWs face the challenge of balancing patient care with limited resources, leading to increased stress and compassion exhaustion. The combination of low job satisfaction and supply shortages further increases the pressure on health workers, highlighting financial constraints, lack of resources and overall well-being in the health sector.

Discussion

The data collected from the thematic interviews were analyzed using thematic analysis techniques, following the steps outlined by Clarke & Braun (2017). The analysis aimed to identify and interpret recurring patterns of meaning within the transcripts, focusing on the experiences and perspectives shared by the respondents regarding their mental health and wellbeing in the healthcare sector, particularly during crisis times. Respondents reported varied and nuanced experiences from the outset of the crisis in Sri Lanka. Researchers therefore generated four overarching themes, each with several sub themes. Four themes are impact on personal relationships, unhealthy coping mechanisms, impaired job performance, reduced job satisfaction.

The findings of this research shed light on the multifaceted dynamics surrounding the mental health and well-being of public health workers and present a comprehensive framework that summarizes the various challenges they face in their healthcare setting. These challenges include a range of pressures, including workload pressures, mental health stigma, staff shortages, lack of support systems, financial stress among patients, supply shortages, increased patient attendance, resource constraints and access barriers. It is clear that these challenges are intertwined and prolong a cycle of adverse consequences, ultimately affecting the personal and professional domains of health workers.

A discussion of these findings resonates with the existing literature, which underscores the importance of work-life balance in fostering employee well-being. Studies such as Askari et al. (2021), emphasize the importance of addressing workload stress and implementing strategies to reduce its impact on healthcare professionals. Similarly, research by Lu et al. (2012) highlighted the important role of adequate resources and staffing in improving job satisfaction and maintaining the well-being of HCWs, which is consistent with the results of this study.

Notably, the importance of organizational culture and leadership in supporting the well-being of HCWs is confirmed by the findings of this research, resonating previous studies conducted by previous researchers (Nielsen et al., 2009; Wong et al., 2013). Effective communication, transparency, and supportive leadership practices emerge as critical factors in creating environments that prioritize employee well-being, thereby improving morale, job satisfaction, and quality of patient care. Furthermore, research findings highlight the significant impact of crisis situations on the mental health of HCWs, which aligns with existing literature emphasizing the psychological stress experienced by healthcare professionals during such times (Manh Than et al., 2020).

Collectively, these findings underscore the importance of addressing the multifaceted challenges faced by HCWs, prioritizing their mental health and well-being. Developing interventions and policies that target these key themes is critical to supporting HCWs during crises and ultimately improving the quality of patient care delivered.

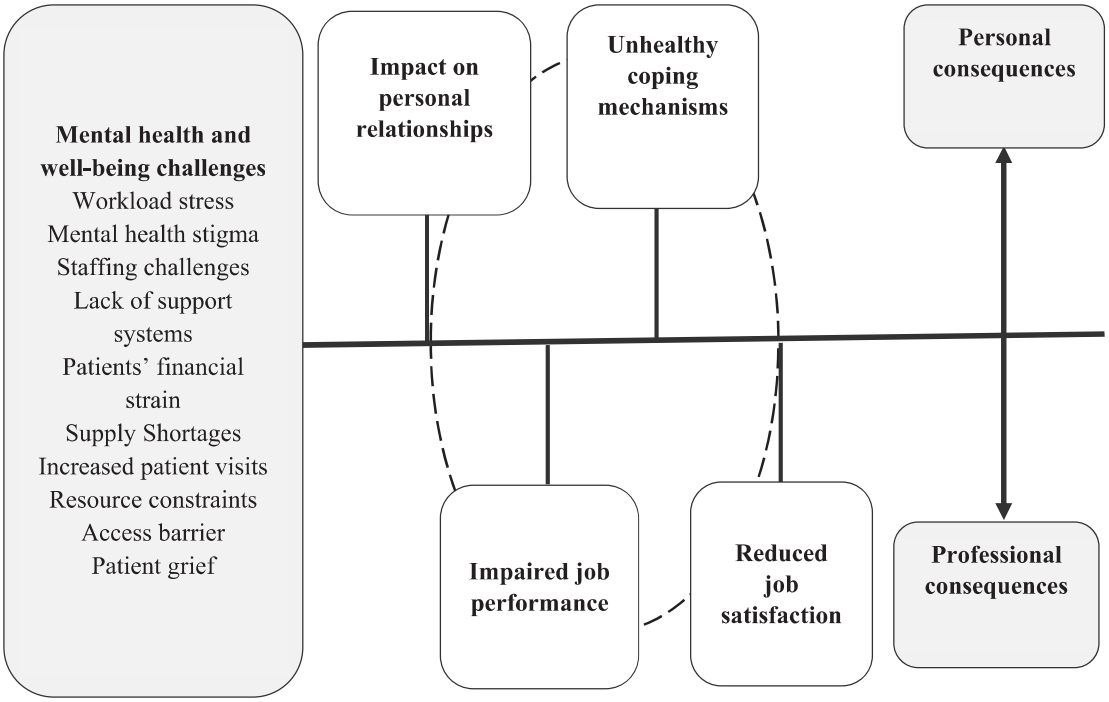


Figure 3: Framework of the Mental Health and Well-Being Dynamics Amid Public Healthcare Workers (HCWs)

The framework presented above (see Figure 3) provides a clear illustration of how mental health and well-being challenges are interconnected, creating a cycle of adverse consequences that affect the personal and professional aspects of public HCWs' lives.

Theoretical contributions

This study presents new insights into mental health and well-being, a breadth that has been relatively under-explored in previous literature, particularly in the context of economic crises. While existing research provides basic knowledge, it falls short in providing comprehensive studies of challenges and consequences specific to economic crises. Similarly, although Maben et al. (2023) highlighted the links between staff well-being and patient outcomes, they did not study contextual factors such as Sri Lanka's economic crisis. By focusing on the mental health and well-being of public health workers in Sri Lanka amid economic challenges, this study introduces new perspectives on the dynamics within this population. It sheds light on how mental health challenges influence the personal and professional behavior of public health workers, deepening our understanding of the intersection between mental health and well-being and HCWs under economic crisis.

With a particular emphasis on the stressful experiences of public health workers in Sri Lanka amid economic crises, this study introduces a new conceptual framework, "a framework of mental health and well-being dynamics among public health workers," considered for the health sector. Informed by insights from health workers, this model addresses research gaps and provides a theoretical basis for subsequent empirical investigations. Although previous studies have indicated the influence of organizational culture and leadership environment on factors such as organizational attractiveness and innovative behavior among hospital employees (Mutonyi et al., 2022), they are insufficient, practical implications for mental health and well-being, particularly in the context of economic crises in developing countries. Consequently, this research makes a substantial contribution to the existing body of literature and claims for further research in this domain, emphasizing the need to examine personal and professional transitions. While prior research has primarily focused on the psychological distress experienced by health workers during the COVID-19 pandemic, this study expands the scope to include economic crises, particularly among health workers in developing countries, thus making a significant theoretical advance.

Through thematic exploratory analysis, this study enriches the theoretical underpinnings of qualitative research within healthcare studies. By conducting in-depth interviews with health workers including doctors, nurses and health assistants from various hospitals across Sri Lanka, this study introduces new theoretical perspectives to the field of health sector research. In particular, it examines the mental health of health workers in the midst of economic crises, the pathways that affect interpersonal relationships, unhealthy coping mechanisms, concerns about decreased job performance, and decreased job satisfaction. In conclusion, this research paves the way for future scholarly endeavors, new avenues of inquiry infused with a mental health and well-being lens.

Managerial contributions

The study provides managerial implications for hospital management administrations and healthcare work organizations in economic crisis situations. First, administrators must recognize the importance of maintaining the mental health and well-being of their HCWs. This includes implementing policies and practices that support work-life balance, providing resources for coping with stress and fostering a positive workplace culture. Adequate staffing and workload management are critical to prevent physical strain and ensure the well-being of HCWs. Healthcare work organizations should adopt an empathetic, transparent and supportive leadership style. This includes actively listening to employees' concerns, providing them with the resources and support they need, and advocating for their well-being within the organization.

Second, effective communication and collaboration among HCWs is essential to manage stress and promote well-being. Hospitals should facilitate open lines of communication, encourage teamwork, and provide opportunities for peer support and collaboration. Third, hospitals should implement strategies and coping mechanisms to help HCWs effectively manage stress. These include providing access to mental health resources, offering stress management workshops, and encouraging self-care practices such as regular exercise and mindfulness techniques.

Finally, hospitals should continually evaluate and improve their policies, procedures, and initiatives aimed at improving employee well-being. This includes soliciting feedback from HCWs, monitoring key metrics of well-being and making adjustments as needed. By prioritizing the well-being of HCWs, developing supportive leadership, encouraging communication and collaboration, implementing coping strategies, monitoring workload and staffing levels, and continually improving their approach, hospitals can help mitigate the impact of financial and economic crisis situations. Promote a healthier, more resilient workforce.

Conclusion

Through this study, it is clear that health workers face significant mental health and well-being challenges amid economic crises. Persistence of stress in such situations not only affects interpersonal relationships, but also creates unhealthy coping mechanisms, resulting in reduced work performance and reduced job satisfaction. These effects perpetuate a cycle of personal and professional negativity. Examining mental health issues among health workers underscores the urgent need to mitigate the cyclical effects of the challenges they face. However, this study does not represent the end of the investigation, but rather serves as a foundation for further investigation to improve the understanding of well-being in the field of mental health and health. Future qualitative research should focus on solution-oriented approaches, exploring the developed themes and conceptual framework clarified in this study. This framework illustrates four primary cycling stations that encompass a series of mental health and well-being challenges in the midst of economic crises. Furthermore, expanding research efforts to include other fields, such as education, broadens the scope of inquiry and deepens understanding of mental health and well-being dynamics.

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