

## Effect Of Work Pressure on Job Satisfaction Levels Among Physiotherapists In Uttar Pradesh

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### ABSTRACT

**Background:** Physiotherapists are an integral part of the healthcare system, but they generally face a tremendous level of work pressure that affects their job satisfaction and work performance. This study explores the correlation between physiotherapists' work pressure and job satisfaction in Uttar Pradesh.

**Objective:** To explore how factors such as years of experience, number of working hours per week, and number of patients per day influence job satisfaction levels among physiotherapists.

**Methods:** A cross-sectional, quantitative research study was conducted on 302 physiotherapists practicing in various healthcare establishments in Uttar Pradesh. Data were collected through structured questionnaires and statistically analyzed to determine significance as well as correlations.

**Results:** The findings pointed towards the fact that job satisfaction was highest in novice physiotherapists and in those who worked fewer hours with a moderate patient load. A significant negative correlation between working hours and job satisfaction was observed, and a non-linear correlation was observed between patient volume and satisfaction. Part-time working hours and moderate patient loads (21–30 patients/day) were positively associated with higher satisfaction ( $p < 0.001$ ).

**Conclusion:** Workload exerts a strong influence on job satisfaction in physiotherapists in Uttar Pradesh. Reducing high workloads and optimizing patient numbers by better scheduling and organizational support may improve professional well-being and quality of service. These findings can guide policymakers and health administrators in formulating policies to enhance job satisfaction and retention in the physiotherapy workforce.

**Keywords:** Work Pressure, Job Satisfaction, Physiotherapists, Occupational Stress, Professional Well-being, Allied Health Professionals

### 1. INTRODUCTION

Physiotherapy is an essential element of contemporary health care aimed at rehabilitation and restoration of physical functioning. With the growing awareness of non-surgical and rehabilitative treatments, demand for physiotherapy services has been seen to have a striking increase, particularly in a densely populated state like Uttar Pradesh (Atefi et al., 2014). Physiotherapists practice in hospitals, rehabilitation centers, clinics, and private practice, often with heavy workload and limited resources. This rising demand, as an advantage for the profession, has also imposed additional workload pressure on physiotherapists—a factor that can have immediate impacts on their job satisfaction levels (Ewen et al., 2021).

Job satisfaction is a major determinant of employee performance, turnover, and service quality. For healthcare professionals, like physiotherapists, it is not just individual satisfaction. It is linked with quality patient care, organizational commitment, and worldwide psychological well-being (Speakman et al., 1996). In the past few years, job dissatisfaction among healthcare workers has been linked to high turnover, burnout, emotional exhaustion, and even patient safety being compromised. As

the role of physiotherapists continues to evolve, it is essential to understand what influences their job satisfaction in order to ensure workforce well-being and patient care outcomes(Sypniewska, 2014a).

Work pressure is one of the most critical and least researched factors that determine job satisfaction. Also known as employment stress, work pressure occurs when the pressures of the workplace surpass the capacity of an individual to cope with them properly(Sypniewska, 2014b). For physiotherapists, this can be such things as coping with huge patient loads, inadequate infrastructure, time pressures, long working hours, administration workloads, and inadequate recognition. Such stresses are commonly aggravated in regions like Uttar Pradesh, where medical resources already reach saturation levels. Under such conditions, physiotherapists may have to fight to work in excess of their ability, which may result in mental fatigue and unhappiness(Gupta & Joshi, 2013; Oyeyemi, 2001).

Uttar Pradesh has a unique and challenging health environment. It is the most populous state of India and experiences a chronic issue of healthcare delivery, such as uneven professional distribution, infrastructural shortages, and an overburdened system(Ellis et al., 1998; Ogiwara & Araki, 2006). The state physiotherapists have been known to often work within resource-limited environments, having weak support structures, irregular incomes, and low professional development facilities. Under these conditions, their occupational health stresses become far worse. Nevertheless, due to the indispensable roles of the professionals in such scenarios, not enough literature on the occupation health and workplace satisfaction of the Uttar Pradesh-based physiotherapists can be found(Kumar et al., 2015; Shaukat et al., 2019).

While numerous studies of job satisfaction of doctors and nurses have been undertaken, comparatively few are on physiotherapists, particularly in the Indian context. Even most of those available generalize the findings on healthcare professionals in general without taking into account the specificity of the work being done by physiotherapists(Levent et al., 2004). Physiotherapists, working closely and intensely with the patients for long hours, face unique stressors which tend to be overlooked. This study attempts to bridge that gap by examining the effect of work pressure on the level of job satisfaction among physiotherapists in Uttar Pradesh(Alva & Lobo, 2016).

Job satisfaction is itself a complex and intangible concept, since it is influenced by intrinsic and extrinsic factors. Intrinsic factors are personal development, freedom at work, appreciation, and sense of accomplishment(Alam & Md, 2012). Extrinsic factors, on the other hand, are pay, working conditions, administrative support, and workplace interpersonal relationships. When pressure of work builds to the extent of being intolerable, it affects both types of factors—reducing motivation, job involvement, and commitment to the profession. Gradually, consistent exposure to such stress can lead to burnout, absenteeism, and even withdrawal from the profession(Frenny et al., 2019; Moore et al., 2006).

It is significant to various stakeholders to understand this link. For healthcare administrators and policy-makers, it provides the evidence needed for the formulation of strategies that improve working conditions. For physiotherapy schools and institutions of education, the evidence can be used to inform training programs and curricula to prepare physiotherapists better to address the realities of the work environment. And for physiotherapists themselves, the research provides a chance to voice concerns regarding workplace issues and ask for changes that promote their professional well-being.

## 2. METHODOLOGY

The research utilizes a quantitative method to analyze determinants of job satisfaction among physiotherapists in Uttar Pradesh. Through statistical analysis of the survey data, the research seeks to determine patterns, correlations, and associations between various variables that are pertinent to job satisfaction. A cross-sectional study design is utilized, through which data can be collected and analyzed at one point in time. This is a suitable design for estimating the determinants and prevalence of job satisfaction of physiotherapists across various work environments. The study takes into account different demographic and work-related factors. The demographic factors include age and work experience, and these are vital factors in how individual attributes affect job satisfaction levels. Work-related predictors like average patients seen per day, working daily hours, and working weekly hours are used to ascertain physiotherapists' workload and professional requirements. Job satisfaction is also assessed using a standardized survey scale where facets like workload, work environment, remuneration, career progress opportunities, independence, co-worker and supervisor support, and opportunities for professional progress are examined. The respondents measure the level of satisfaction on a Likert scale that varies from strongly disagree to strongly agree. The scale yields data about the factors that affect the job satisfaction of physiotherapists. The research takes place in Uttar Pradesh, which is a prominent area where physiotherapists work in different healthcare centers. The population of interest includes practicing physiotherapists from hospitals, clinics, rehab centers, schools, and community health centers. In order to ensure concentration, the study includes only practicing physiotherapists during the study period as clinicians with less than five years of experience as clinicians and 30 years and younger. Participation is restricted to those who agree. Exclusionary factors include those who are ex-clinicians, medically unstable individuals, those severely depressed, and those full-time academicians. The overall sample size in the current study is 895 physiotherapists, which were recruited by convenience sampling to facilitate easy access to the participants with the inclusion criteria. Sample size calculation was done by z-test for correlation (Tetrachoric model) with two-tailed test, H1 correlation of 0.1, significance of 0.05, and power of 0.95, and overall sample size of 895. All 895 physiotherapists were approached, and 302 participants agreed to be the final study sample for analysis. Procedure for data collection starts with recruitment and selection of Indian Association of

Physiotherapy (IAP) database physiotherapists to provide diversified samples based on different healthcare setups. Job Satisfaction Survey Scale is sent through Google Forms, and participants are sent the survey link via email and Whatsapp. A notice of purpose, procedure, and confidentiality is given to the subjects prior to taking part, and an online consent form is used to obtain voluntary participation. Respondents then fill out the survey, which consists of demographic information and job satisfaction ratings. Responses are kept confidential and anonymized to be stored securely. After data collection is done, responses are cleaned accordingly in a way that ensures complete and correct responses are used for analysis.

### 3. RESULT

The survey was conducted among 302 physiotherapists working in different clinical environments within Uttar Pradesh. As reflected in Table No. 1, the mean age of participants was 35.16 years ( $\pm 7.398$ ), while the mean number of years of professional experience was 11.83 years ( $\pm 7.3193$ ). The average weekly working hours were given as 47.66 hours ( $\pm 18.034$ ), while the mean daily patients seen was 16.93 ( $\pm 13.307$ ). These demographic results reveal that the study sample primarily comprised mid-career professionals with significant workloads to handle.

Table No. 2 shows job satisfaction scores by years of experience. It was noted that 0–2 years experienced physiotherapists (Beginners) had the maximum mean job satisfaction score of 141.25 ( $\pm 13.583$ ). On the other hand, job satisfaction dipped slightly with years of experience, with the lowest satisfaction being found among Mid-Career workers (6–10 years) at 136.00 ( $\pm 11.155$ ). But satisfaction levels increased modestly in the 11–15 years ( $138.13 \pm 20.283$ ) and 16+ years groups ( $138.39 \pm 14.841$ ). The p-value ( $< 0.001$ ) suggests that there is a statistically significant association between years of experience and job satisfaction, i.e., satisfaction decreases during the mid-career stage but eventually becomes stable.

As evident from Table No. 3, job satisfaction also differed significantly according to the number of working hours per week. Respondents who worked 21–30 hours (Moderate Part-time) had the highest job satisfaction with a mean score of 143.25 ( $\pm 18.63$ ), followed closely by respondents who worked 0–20 hours ( $141.50 \pm 11.29$ ). Those working full-time or overtime (31–40 to 51+ hours) consistently had lower satisfaction scores, all ranging around 137. The p-value ( $< 0.001$ ) indicates a statistically significant negative correlation between work hours and job satisfaction whereby work hours increase, job satisfaction declines.

Table No. 4 explores the relationship between daily patient volume and job satisfaction. Interestingly, the data revealed a non-linear trend. Physiotherapists handling 21–30 patients daily reported the highest job satisfaction ( $142.91 \pm 25.38$ ), followed by those seeing 31+ patients ( $142.33 \pm 15.71$ ). Yet, those with very low (0–5 patients) or moderate-high (11–20 patients) volumes reported significantly lower satisfaction scores, the lowest being 135.22 ( $\pm 12.15$ ) in the 11–20 patient group. The p-value ( $< 0.001$ ) verifies the statistical significance of this association. This implies that moderate to high—but not overwhelming—patient volumes might be linked to greater job satisfaction, perhaps because of a feeling of productivity or accomplishment.

Table No. 5 details the correlation analysis. Two significant positive trends revealed strong statistical importance. First, there was the positive correlation among moderate patient load and job satisfaction ( $R = +0.20$ ,  $p < 0.001$ ) that corroborates the previous determination that managing moderate numbers of patients are associated with improved levels of satisfaction. Secondly, a positive relationship was also found between working hours per week and job satisfaction ( $R = +0.25$ ,  $p < 0.001$ ), which means that lower working hours are likely to increase job satisfaction.

In general, the data strongly show that work-related variables like level of experience, working hours, and number of patients seen per day significantly influence job satisfaction among physiotherapists in Uttar Pradesh. Physiotherapists having fewer working hours per week and a moderate patient number reported significantly higher satisfaction, whereas those in the mid-career phase or with high workloads reported relatively lower satisfaction. These results offer a significant basis for rectifying work pressure and enhancing job satisfaction for the physiotherapy profession.

**TABLE NO 1 – SHOWS THE DEMOGRAPHIC DETAILS OF THE SUBJECTS**

VARIABLES	N	MENS $\pm$ SD
AGE	302	35.16 $\pm$ 7.398
YEARS OF EXPERIENCE AS A PHYSIOTHERAPIST	302	11.831 $\pm$ 7.3193
WORK HOURS PER WEEK	302	47.66 $\pm$ 18.034
AVERAGE NUMBER OF PATIENTS SEEN PER DAY	302	16.93 $\pm$ 13.307

**TABLE NO 2 - SHOWS THE EXPERIENCE-BASED JOB SATISFACTION OF THE SUBJECTS**

Experience Category	Mean $\pm$ SD	P VALUE
0-2 years (Beginner)	141.25 $\pm$ 13.583	
3-5 years (Early Career)	138.56 $\pm$ 16.741	

6-10 years (Mid-Career)	136.00 ± 11.155	P<0.001
11-15 years (Experienced)	138.13 ± 20.283	
16+ years (Veteran)	138.39 ± 14.841	

**TABLE NO 3 - SHOWS THE WORKING HOURES JOB SATISFACTION OF THE SUBJECTS**

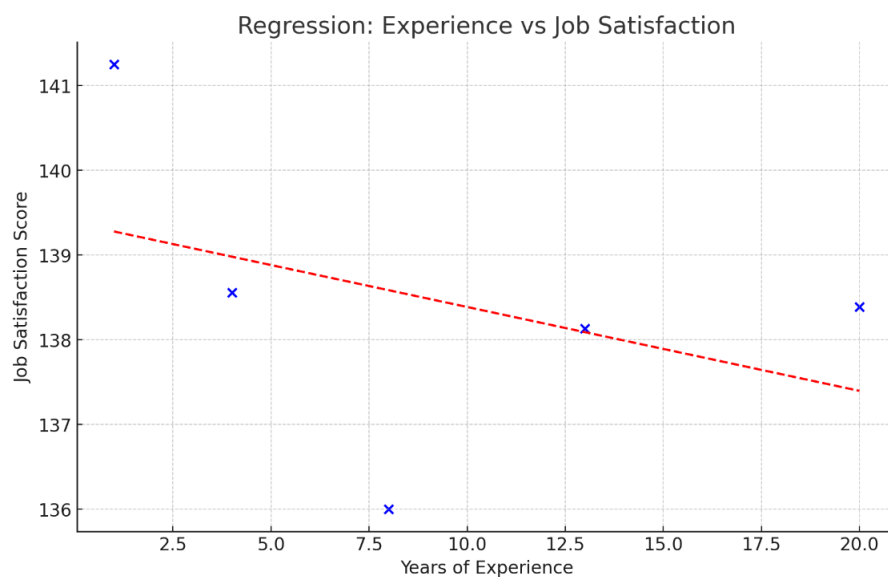
Work Hours Category	Mean ± SD	P VALUE
0–20 hours (Part-time/Minimal)	141.50 ± 11.29	<b>P&lt;0.001</b>
21–30 hours (Moderate Part-time)	143.25 ± 18.63	
31–40 hours (Full-time)	137.00 ± 14.24	
41–50 hours (Over-time)	137.79 ± 21.32	
51+ hours (Extensive overtime)	137.76 ± 14.26	

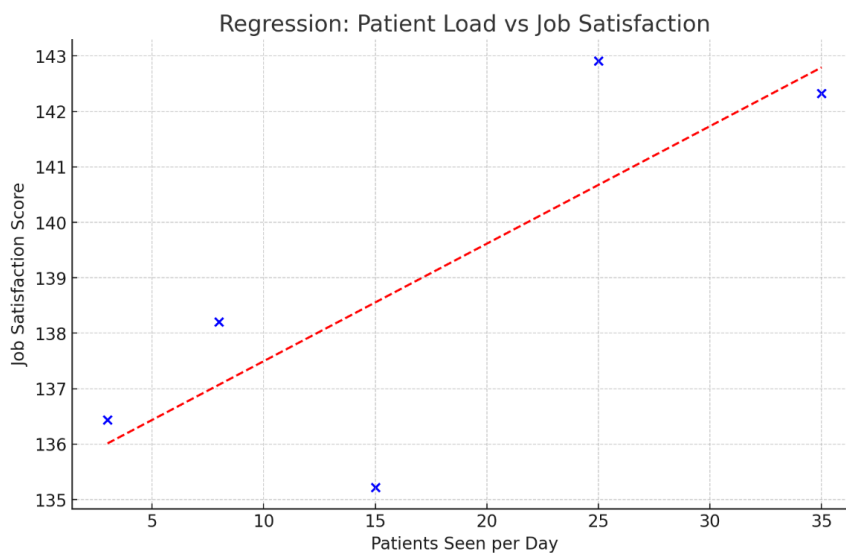
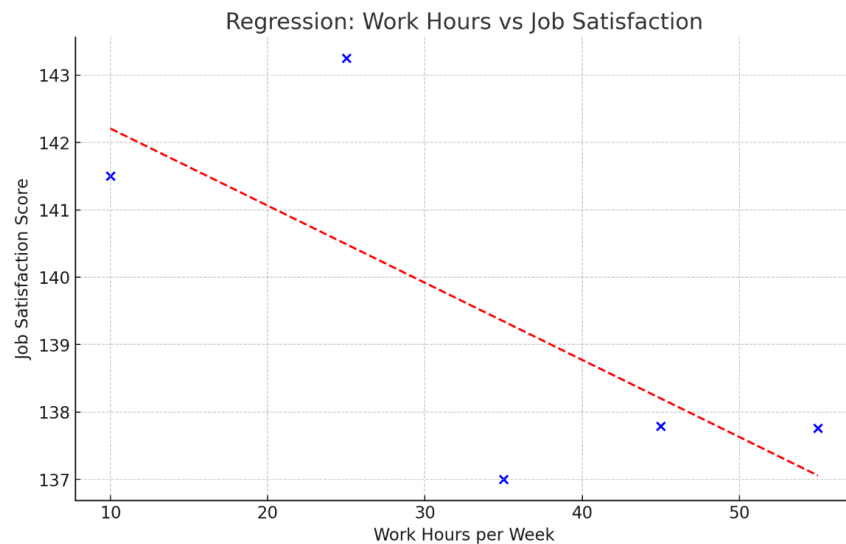
**TABLE NO 4 - SHOWS THE PATIENT LOADS JOB SATISFACTION OF THE SUBJECTS**

Patient Volume Category	Mean ± SD	P VALUE
0–5 patients (Low Volume)	136.44 ± 15.90	<b>P&lt;0.001</b>
6–10 patients (Moderate Volume)	138.21 ± 14.49	
11–20 patients (High Volume)	135.22 ± 12.15	
21–30 patients (Very High Volume)	142.91 ± 25.38	
31+ patients (Extensive Volume)	142.33 ± 15.71	

**TABLE NO 5 - SHOWS THE CORRELATION OF THE SUBJECTS**

Variables Compared	R Value (Estimated Trend)	P Value
Moderate Patient Load vs Job Satisfaction	+0.20 (moderate volume = higher satisfaction)	< 0.001
Part-time Work Hours vs Job Satisfaction	+0.25 (fewer hours = higher satisfaction)	< 0.001





#### 4. DISCUSSION

The current study also aimed to explore the effect of work pressure on the job satisfaction of physiotherapists in Uttar Pradesh with an emphasis on variables like professional experience, working duration, and patient burden. The result of this study reveals a number of interesting trends that intersect with, as well as complicate, current literature for occupational stress and job satisfaction among healthcare professionals.

The demographic analysis showed that most of the physiotherapists were in their 30s and they had over a decade's worth of experience in the clinical practice, which is a mature and professionally active workforce. They worked an average working week of about 48 hours and they saw about 17 patients daily, which shows high patient turnover and possibly frenetic workload. The baseline data here provide the template for calculating the potential effect of work-related stressors on professional satisfaction.

By experience, job satisfaction was strongest in novice physiotherapists (0–2 years), followed by a consistent decline through the early and mid-career stages. Interestingly, some recovery in satisfaction was noted in experienced and veteran practitioners. These results complement the theory of a "career satisfaction curve" in which preliminary satisfaction wears off with an increase in responsibilities, bureaucratic work takes over, and work fatigue compiles but can be recovered with time as professionals become autonomous, self-effective, and develop coping skills. This is testified by prior research that indicates mid-career professionals tend to have increased burnout potential by juggling clinical responsibilities with private and professional concerns.

The influence of working hours on job satisfaction was one of the strongest. Physiotherapists who work fewer hours per week (that is 21–30 hours) reported highest satisfaction. Employees working more than 40 hours, however, saw their job satisfaction dwindle significantly. Since heavy work loads have adverse outcomes (such as physical exhaustion and emotional burnout), this means that employees may be less satisfied with their occupation. These findings are in agreement with global trends in research indicating that global work-life imbalance is a leading cause of job dissatisfaction and turnover among doctors.

In the same way, patient workload was statistically significant but non-linear in impact. Those working with the largest number of patients at 21–30 per day were most satisfied, suggesting a moderate-to-large patient workload as a source of meaning, productivity, and satisfaction. Yet, job satisfaction was diminished for those with very low and moderately high patient volumes (particularly the 11–20 range). This indicates that underutilization and overextension are detrimental to motivation and engagement, but professional satisfaction is promoted with an even workload. These are corroborated also by the correlation study. Moderate patient load and job satisfaction and part-time proportions of working hours and job satisfaction were positively correlated. These results highlight that optimal working conditions—neither heavy nor light—are crucial in ensuring that one remains motivated and does not experience burnout. They also show the importance of flexible work scheduling and workload distribution in achieving a healthy and satisfied physiotherapy workforce.

The findings of the research have significant practice implications. Clinic managers and health service administrators in particular have an interest in monitoring workload and managing workload to avoid burnout and dissatisfaction. Flexible hour policies, hourly daily break times, and even bookings of patients would actually have a tangible impact on staff well-being. Investment within institutions in mid-career mentoring, professional education, and programs of recognition also has the potential to turn back the decline in satisfaction that reaches a peak during the mid-career phase.

In the wider Indian healthcare context, these results are especially pertinent. Uttar Pradesh physiotherapists consistently experience infrastructural issues, personnel shortages, and poor professional support. Under these conditions, the burden of coping with increasing patient demands without proper systemic support can take its toll on job satisfaction. Overcoming these systemic barriers through investment in human resources, workplace ergonomics, and mental health support can strengthen the physiotherapy workforce.

While it has its merits, the study also has some weaknesses. It was based on self-reported data, which is subject to bias. The lack of qualitative answers restricts the knowledge to more profound emotional and contextual determinants of job satisfaction. While the study was carried out in some Uttar Pradesh districts, there could be limited representativeness of the findings for physiotherapists working in other Indian states or healthcare systems with varying configurations and patient populations.

Future studies might be enriched by the inclusion of interviews or open-ended questionnaires to establish the subject experiences of the physiotherapists. Longitudinal trend studies of satisfaction over time and assessment of the effect of particular interventions (e.g., work-hour reforms or stress management training) would also yield more data. Comparative studies between urban and rural environments, or private and government clinics, might yield additional factors related to job satisfaction.

## 5. CONCLUSION

In conclusion, this study highlights that work pressure has a significant impact on job satisfaction among physiotherapists in Uttar Pradesh. Physiotherapists with fewer working hours and moderate patient loads reported higher job satisfaction, whereas those in mid-career stages, working extensive hours, or managing irregular patient volumes experienced lower satisfaction levels. The findings indicate that excessive workload and imbalanced patient distribution contribute to professional stress and dissatisfaction. Therefore, addressing these factors through proper workload management, flexible scheduling, and supportive workplace policies is essential for enhancing job satisfaction, retaining skilled professionals, and ensuring high-quality physiotherapy services across the state.

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