

## IMPACT OF COVID-19 ON PERFORMANCE AND JOB PRODUCTIVITY LOSS AMONG WOMEN ADMINISTRATIVE OFFICERS OF MAHARASHTRA

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### Abstract:

India crossed the grim milestone of three crore Covid-19 cases by June 2021. Today, as the country steers its way through the pandemic to safer shores, we must foreground the battle fought by the country's frontline workers, especially women leaders who helmed decisive administrative tasks and prevailed most unprecedented and challenging circumstances. Women administrative officers who worked in adverse conditions and risked all in line of duty deserve special mention and acknowledgment. This study aims at highlighting the impact of the pandemic on work productivity of women administrative officers, especially when the pandemic peaked in the state of Maharashtra between 2020 and 2021. Employing the Work Limitations Questionnaire (WLQ), a 25 item self-report survey instrument, we tried to assess the work limitations encountered by women officers in four areas namely Time Management, Physical Demands, Mental-Interpersonal Demands and Output Demands which, upon using an algorithm get converted into an estimate of Productivity Loss. Using purposive sampling method 79 officers belonging to Pune and Aurangabad divisions of Maharashtra were administered the WLQ in either offline or online mode. Results revealed that each one of the woman officers suffered productivity loss in varying degrees. About 43 officers suffered between 15% to 20% work productivity loss while 25 officers reported suffering grave work productivity loss exceeding 20%. Scaled scores indicate that most work limitations were faced handling time and scheduling demands, performing cognitive tasks, engaging in social interactions and diminished output of work. This study takes cognisance of challenges faced by women officers in discharging their duties and offers opportunities for actionable solutions. Authorities can engage in an iterative process of building and scaling up intervention prototypes for women workforce and contributing to their work proficiency and wellbeing.

**Keywords:** Covid-19, Work Productivity Loss, Women Officers, Administration, Work.

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### Introduction:

The Covid-19 pandemic has been hailed as the century's worst governance crises (CSDS, 2021). The unprecedented events following the outbreak of the pandemic have been most unusual and extraordinary challenges of all time. Men and women serving in administration have been indispensable conduits who proactively executed the four phases of Disaster Management such as Mitigation, Preparedness, Response, and Recovery when India ostensibly invoked the

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Disaster Management Act 2005 (NDMA, 2021). Civil servants were directed to stringently implement Acts such as the Epidemic Diseases Act 1897 and enforcement of Sections 188, 269, and 270 of IPC, often at grave personal risk. Administrative officers, who work in a never-ending circle of development and upliftment through various projects and initiatives, selflessly immersed themselves in prompt disaster management strategies. The new role of civil servants included establishing jumbo medical facilities for citizens, providing centres with medicines, essentials, pharmacy, antigen testing, contact tracing, household door-to-door and mobile ambulance surveys, and flu referrals. This study highlights the unconventional role that particularly women administrative officers have played and the challenges they faced during the pandemic. Working relentlessly to serve the state and nation, these officers have sacrificed much in the line of duty. We probe into the impact of the pandemic on work productivity of women administrative officers, specifically when the pandemic peaked in the state of Maharashtra between 2020 and 2021.

### Method:

Employing the Work Limitations Questionnaire (WLQ), a 25 item self-report survey instrument, we tried to assess the work limitations encountered by women officers in four areas namely Time Management, Physical Demands, Mental-Interpersonal Demands and Output Demands which, upon using an algorithm get converted into an estimate of Productivity Loss. Using purposive sampling method 79 officers within the age range of 28yrs to 65yrs (M= 43.94yrs SD=8.3yrs) belonging to Pune and Aurangabad divisions of Maharashtra were administered the WLQ in either offline or online mode. Pune Division consisted of four districts Pune, Solapur, Sangli and Kolhapur. The Aurangabad division consisted of eight districts Aurangabad, Latur, Beed, Osmanabad, Jalna, Parbhani, Nanded, Hingoli. Visits and phone calls were made to the Commissioner's Office, Municipal Corporation, Zilla Parishad, Government hospitals and District Division offices in both divisions. After explaining the objective of the study and seeking support letters from respective nodal authorities, Field Investigators (FI) established contact with referrals received from offices. On obtaining informed consent, data collection proceeded in either paper-pencil or online mode as per preference, availability and assessment of risk factors for both participant and FI. The participants included were women officers of Class two and above ranks which included Medical officers at District Civil Hospitals, Collector, Deputy Collector, Chief Officer, commissioner, Deputy commissioner, medical officer, Child Development Project Officer, district planning officer, Engineers, Deputy Engineers in Electricity, water supply, All India Radio, Education Officer, Medical Superintendent & Dean, State Tax Inspector, Chief Administrative Officer, Women and Child Welfare Officer and District Information Officers. The Work Limitations Questionnaire (Lerner, Amick & GlaxoWellcome, 1998) was used to assess work limitations and aggregate work productivity loss of officers while serving during the peak of the pandemic in the two divisions. The WLQ is a 5-point Likert Scale survey instrument with 25 items which are aggregated into four scales such as time management scale which contains five items addressing difficulties handling time and scheduling demands. The six-item Physical Demands scale covers a person's ability to perform job tasks involving bodily movement, endurance, strength, coordination and flexibility. The Mental-Interpersonal Demands Scale has nine items addressing cognitive job tasks and on-the-job social interactions. The fourth scale is the Output Demands scale containing five items about diminished work quantity and quality. An estimate of Productivity Loss can be calculated upon using an algorithm for four scale scores. The maximum attainable productivity loss is 24.9%. A review of its psychometric properties revealed that the WLQ scales have been assessed in various populations and have demonstrated acceptable levels of reliability, validity, and responsiveness (William et al 2007). The internal consistency of the subscales ranges from 0.77 to 0.97 (Lerner et al 2002, Walker et al 2005; Beaton et al 2010). Test-

retest validity ranges from 0.69-0.80 for the four sub scales (Lerner 2001).

### Result and Discussion:

Scale scores of WLQ indicate self-reported difficulties at work, higher the score greater the difficulty faced in a particular domain. Results revealed that the women administrative officers faced maximum work related difficulty meeting the mental interpersonal demand task. 60% officers belonged to the group that scored between 80-100, 100 being the highest possible score in each scale. Followed by Output Demand task where 58% officers reported facing very high level of difficulty. Time demand tasks posed moderate difficulty whereas physically demanding tasks were not perceived as greatly challenging.

Clearly, every woman officer faced challenges while on duty during the pandemic. Reasons ranged from severe lack of manpower and high infection rate among personnel accompanied by constant fear for dependents in their families to feeling guilt and anxiety for not being available to their own families in hour of need. Obstacles in public service were encountered during death management or performing last rites for the deceased infected citizens. Communal tension among citizens was high and often at loggerheads with the administration regarding performance of last rites and rituals of deceased relatives. There was significant political interference causing hindrances complicated by circulation of inaccurate news on social media. Non co-operation from colleagues and general public was rampant. These factors made implementing swiftly changing government directives challenging for the officers. The results have highlighted the shortfall of bureaucratic expertise that combine medical, technical, administrative and logistical know how. As a result on several occasions government doctors faced frequent aggression and violence from public. Duties such as setting up and managing jumbo Covid centres, make shift medical facilities, making financial arrangements for state funded medical treatment for the vulnerable added to the work burden. In light of the obstacles and challenges faced by the women officers during the peak of the pandemic in Maharashtra, increased scores on mental- interpersonal tasks and output tasks seem like a plausible explanation. Stressors affect cognition and sociability adversely and this results in decreased quality and quantity of work. This is evident in 32% participants who reported experiencing grave work productivity loss while on duty during the pandemic in Maharashtra state.

### Conclusion:

Despite the risk and enormous challenges, women administrative officers remained steadfast and motivated to deliver their mandated responsibilities. Women officers serve as important role models in society. It is imperative to cultivate an environment where women leadership can thrive and enjoy personal and professional wellbeing. Their journeys need a special mention and ought to be documented and acknowledged. We hope this study will help synchronously introduce critical reforms and systemic changes so that the Indian women leadership can better position itself for future challenges. This study provides compelling evidence of women officers facing significant challenges in systemic procedures, applying coping strategies, maintaining and improving personal wellbeing therefore these, deeper questions need to be addressed by policy makers and civil society.

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