

Medical School Faculty and Staff Well-being Post COVID-19 Pandemic Follow-up

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In 1993, the Medical School Hotline was founded by Satoru Izutsu PhD (former vice-dean UH JABSOM), it is a monthly column from the University of Hawai'i John A. Burns School of Medicine and is edited by Kathleen Kihmm Connolly PhD; HJH&SW Contributing Editor.

Abstract

The authors performed a follow-up COVID pandemic era employee well-being survey in spring 2022 during the period of vaccine and antiviral therapy availability. The survey results for medical school employees were compared with the results of a pre-vaccine survey from fall of 2020 to assess employees' continued concerns. At the time of the follow-up survey, employee well-being programs and resources along with telework policies had been introduced. The survey findings reinforced the need to tailor such programs differently for staff members, given their different work context. Priority areas should include providing well-being programs during working hours, time-off for well-being or mental health needs, and attention to equity in access to the well-being and telework programs.

Introduction

The coronavirus disease 2019 (COVID-19) pandemic profoundly impacted medical education. Faculty and staff members had to adjust to changes in administrative policies and teaching. New technology and workplace processes were quickly implemented during the pandemic, which included online or remote meetings, modified teaching processes, and telework/remote work arrangements. As a community-based medical school with no attached university hospital, the John A. Burns School of Medicine (JABSOM) also had to incorporate and abide by policies and procedures aligning with affiliated hospitals and clinics. These mandated educational delivery and evaluation changes placed considerable stress on faculty and staff members.

The authors of this manuscript previously reported a survey of JABSOM faculty and staff members in the fall of 2020 to gauge individual stress and worries and how the medical school communicated and handled the necessary educational changes.¹ At that time, policies were in place requiring only essential workers to report to campus in person. Results of the 2020 survey showed that both faculty and staff members reported high concerns regarding the health risks and well-being of family, friends, and themselves as compared to other potential personal and work concerns. Staff members had significantly more worries than faculty members about their own health and well-being, ability to pay bills, and potential loss of their jobs.

By spring 2022, most courses were back in person, and telework policies had been implemented. Similar to universities across the world, the shift from remote work and teaching during the pandemic to a new post-pandemic in-person or hybrid environment required new standards and practices for administration, medical education curricula,

and clinical practice, all of which appeared to add additional stress and worry to faculty and staff. To assess employees' continued concerns, a follow-up study to the initial survey was administered in spring 2022 during the period of vaccine and antiviral therapy availability, ongoing viral mutations, diagnostic and infection prevention advances, and related new policies.

Methods

Participants represented a convenience sample of JABSOM compensated teaching, research, and administrative faculty and staff members. Recruitment was conducted electronically by email, through general school announcements, and through presentations at faculty and staff meetings. Surveys were voluntary, self-administered, anonymous, and available via a website. No incentive was offered. Survey results from 2022 were compared with the original 2020 survey results. The fall 2020 surveys were open for 6 weeks, closing on October 31, 2020. The spring 2022 surveys were open for 8 weeks, closing on June 3, 2022. Faculty and staff member categories were self-identified according to their university appointment. University of Hawai'i (UH) Institutional Review Board approval was obtained (protocol number 2020-00284).

The Higher Education Data Sharing Consortium COVID-19 Institutional Response Staff and Faculty survey instruments (© 2020 Higher Education Data Sharing Consortium) were used to measure how the pandemic affected the employees' duties as faculty and staff members.² These surveys were created to help gauge faculty and staff member responses to COVID-19. For this analysis, questions on worry due to the pandemic (11 questions) were examined using 5-point Likert scales. Open-ended text response questions on what was appreciated at work, causes of stress/anxiety, and future worries and concerns are presented using a thematic analysis.

The Mann-Whitney U test (known also as the Wilcoxon rank sum test) was used to compare distribution differences in the independent responses of faculty (2022) versus staff (2022) members. The Wilcoxon signed-rank test (also known as the Wilcoxon matched pair test) was used to compare matched responses: faculty (2022) versus faculty (2020); and, correspondingly staff (2022) versus staff (2020). Participants from both survey iterations were recruited from the same medical school population. However, since surveys were anonymous, a post hoc matching of pairs was conducted to reduce statistical inhomogeneity. Pairs from 2022 and 2020 were matched based on demographic variables: full-time or part-time, primary work category, gender, and self-identified race(s).

The Bonferroni correction was applied to address type 1 error risk due to multiple comparisons, and an adjusted P value of $\leq .005$ was considered significant. Statistical tests were 2-tailed, and data analysis was performed using IBM SPSS, version 28 (IBM Corp, Armonk, NY).

Results

In the spring 2022 survey, 57 faculty and 73 staff members participated in the survey. In the previous study's fall 2020 survey, 80 faculty members and 73 staff members participated.¹ In both groups (2022 and 2020, respectively), the majority were female (61%, 61%), over half the faculty and staff identified as Asian (51%, 55%), followed by White (23%, 19%), more than one race (16%, 17%), and Native Hawaiian or Pacific Islander (10%, 6%). For both groups, most respondents were full-time employees (77%, 84%). Participating faculty members' academic ranks were mostly in the (assistant, associate, or full) professor category (85%, 81%). See [Table 1](#) for the characteristics of survey participants.

Faculty (2022) Versus Staff (2022)

Comparing faculty versus staff respondents in 2022, the staff reported a higher level of worry than faculty members in all except for 3 questions: health and well-being of students, losing connections with colleagues, and doing jobs effectively despite changes. Statistically significant differences were detected in 3 worry questions: one's own health ($P < .001$), paying bills ($P = .003$), and losing connections with colleagues ($P < .008$). For the first 2 questions, staff members reported greater worry than faculty members, whereas faculty had greater worry levels for losing connections with colleagues than staff (see [Figure 1](#)).

Paired Differences - Faculty (2022) Versus Faculty (2020)

Post hoc matching of respondents resulted in 41 survey respondent pairs for faculty. Unmatched pairs were removed from analyses: 2022 ($n=16$), 2020 ($n=39$). In comparing the matched faculty members from 2022 ($n=41$) to 2020 ($n=41$), no statistical differences were detected in any of the analyzed responses to the worry questions. However, there was a general trend of less or similar worry felt in 2022 as compared to 2020, (see [Figure 2](#)).

Paired Differences - Staff (2022) Versus Staff (2020)

Post hoc matching of respondents resulted in 54 respondent pairs for staff members. Unmatched pairs were removed from analyses: 2022 ($n=19$), 2020 ($n=19$). Matched staff responses from 2022 ($n=54$) compared to 2020 ($n=54$) demonstrated a general trend of less worry felt in 2022 as compared to 2020, except for 1 question related to pressure to come to work. A significant difference in 1 worry question was detected: how often do you worry about the future of JABSOM ($P < .001$) (see [Figure 3](#)).

Open-ended Responses Related to Stress and Worry 2022 - Faculty and Staff

In response to the open-ended question in the 2022 survey, "What are your biggest worries or concerns (e.g., administrative, education, research) as you think about what's coming in the next few months?" the most common response theme for faculty members (16 responses) was concern related to the impact of COVID-19 on education and student learning. This included worries and concerns about changes in educational practices, teaching approaches, educational expectations, and support. The second most common concern for faculty members (13 responses) was the impact of COVID-19 on the workplace. Concerns included a balance of telework and in-person modalities, increased workload, and work-life balance.

The most common response theme for staff members in the 2022 survey (39 responses) was having worry and concern about returning to the workplace. Responses included returning to work in-person full-time and ending the telework option, increased possibility of COVID-19 exposure when returning to in-person activities, and the logistics of coordinating with those who continue to telework. The second most common theme was COVID-19 infection risk and the possibility of new variants (9 responses). Comments included concerns and worries regarding a potential rise in COVID-19 cases due to relaxed restrictions and the resurgence of the pandemic.

Discussion

This follow-up study reexamined well-being among medical school faculty and staff members approximately 2 years after the start of the COVID-19 pandemic. Consistent with the 2020 survey, faculty members generally had fewer worries compared to staff. This may relate in part to differences in the roles of faculty members versus staff. Faculty members at a medical school may have greater knowledge on health and virology as compared to staff, and may have fewer financial worries and job insecurity due to generally higher salaries and dual roles as faculty members and clinicians. For the open-ended question, both faculty and staff groups shifted from worries on financial and economic concerns in 2020, to concerns related to workflow and workplace activities and expectations in 2022. It is likely that a growing understanding of COVID-19, the availability of vaccines and effective antiviral treatments, which ended lockdowns and restrictions, and the reopening of businesses and services helped mediate individual's job insecurity and financial concerns. Despite better workplace communication, accommodations, and other job-related support at the medical school, worries may have shifted to job requirements and expectations post-pandemic.

To proactively address stress and well-being among JABSOM employees, several initiatives described below were established and have been institutionalized since the start of the pandemic, as part of the overall JABSOM strategic plan. A mindful practice program was initially established for faculty in February 2019, but later expanded in March 2020 to include all JABSOM faculty, staff, and students.

Table 1. Characteristics of JABSOM Well-being Survey Respondents, Fall 2020 and Spring 2022

	2020			2022		
	Faculty (n=57)	Staff (n=73)	Total (n=130)	Faculty (n=80)	Staff (n=73)	Total (n=153)
	Gender,					
Male	26 (45)	22 (30)	48 (37)	37 (46)	22 (30)	59 (39)
Female	30 (52)	49 (67)	79 (61)	43 (54)	50 (69)	93 (61)
Non-binary ^a	1 (2)	2 (3)	3 (2)	0	1 (1)	1 (1)
	Race identified, n (%)					
American Indian or Alaska Native	0	0	0	1 (1)	0	1 (1)
Asian	23 (40)	49 (67)	72 (55)	35 (44)	43 (59)	78 (51)
Native Hawaiian or Pacific Islander	2 (4)	6 (8)	8 (6)	8 (10)	7 (10)	15 (10)
White	18 (32)	7 (10)	25 (19)	23 (29)	12 (1)	35 (23)
Hispanic or Latino	2 (4)	1 (1)	3 (2)	0	0	0
More than one race	12 (21)	10 (14)	22 (17)	13 (16)	11 (15)	24 (16)
	Employment, n (%)					
Part-time	16 (28)	5 (7)	21 (16)	28 (35)	7 (9)	35 (23)
Full-time	41 (72)	68 (93)	109 (84)	52 (65)	66 (90)	118 (77)
	Academic Rank (faculty only), n (%)					
Professor	19 (32)		19 (32)	24 (30)		24 (30)
Associate Professor	12 (21)		12 (21)	19 (24)		19 (24)
Assistant Professor	15 (26)		15 (26)	25 (31)		25 (31)
Researcher	0		0	3 (4)		3 (4)
Specialist	7 (12)		7 (12)	5 (6)		5 (6)
Instructor	4 (7)		4 (7)	4 (5)		4 (5)
	Employment Category (staff only), n (%)					
Hourly (non-exempt) without responsibility for supervising staff		11 (15)	11 (15)		13 (18)	13 (18)
Hourly (non-exempt) with responsibility for supervising staff		4 (5)	4 (5)		1 (1)	1 (1)
Salaried (exempt) without responsibility for supervising staff		36 (49)	36 (49)		43 (59)	43 (59)
Salaried (exempt) with responsibility for supervising staff		22 (30)	22 (30)		16 (22)	16 (22)

^a Non-binary refers to the self-reported sexual identity of the survey respondent.

This program offers monthly mindful webinar sessions to create resilience and meaningfulness at work to prevent burnout and improve work quality and interactions with colleagues, students, and potentially patients. The mindful practice sessions occur as monthly 30-minute lunchtime webinars on various topics that have included the following titles: Coping with Change and Uncertainty; Defeating Distractions, Mindful Priorities; Just Let It Go; Self-care – How to Practice it Without Feeling Selfish; Accentuating the Positive During Challenging Times; Freedom Through Forgiveness; and Mindfulness Amidst Global Conflict.

Another post-pandemic JABSOM initiative included the hiring of a Well-being and Resiliency Director, and the de-

velopment of a school-wide committee: Well-being Enhancement and Resiliency Committee (WERC). The WERC is designed to assist the dean in fostering the development and sustainability of resilience and well-being for the JABSOM community. This includes planning and promoting well-being opportunities and resources, identifying barriers, and promoting a culture of well-being at the school. In 2024, the WERC conducted in-person and virtual “talk story” sessions that resulted in 17 school-wide recommendation priorities on well-being and resiliency. Recommendation topics are categorized in the following topic themes: *cultural humility*- curiosity and respect for values and experiences of self and others; *connection* - human need to be-

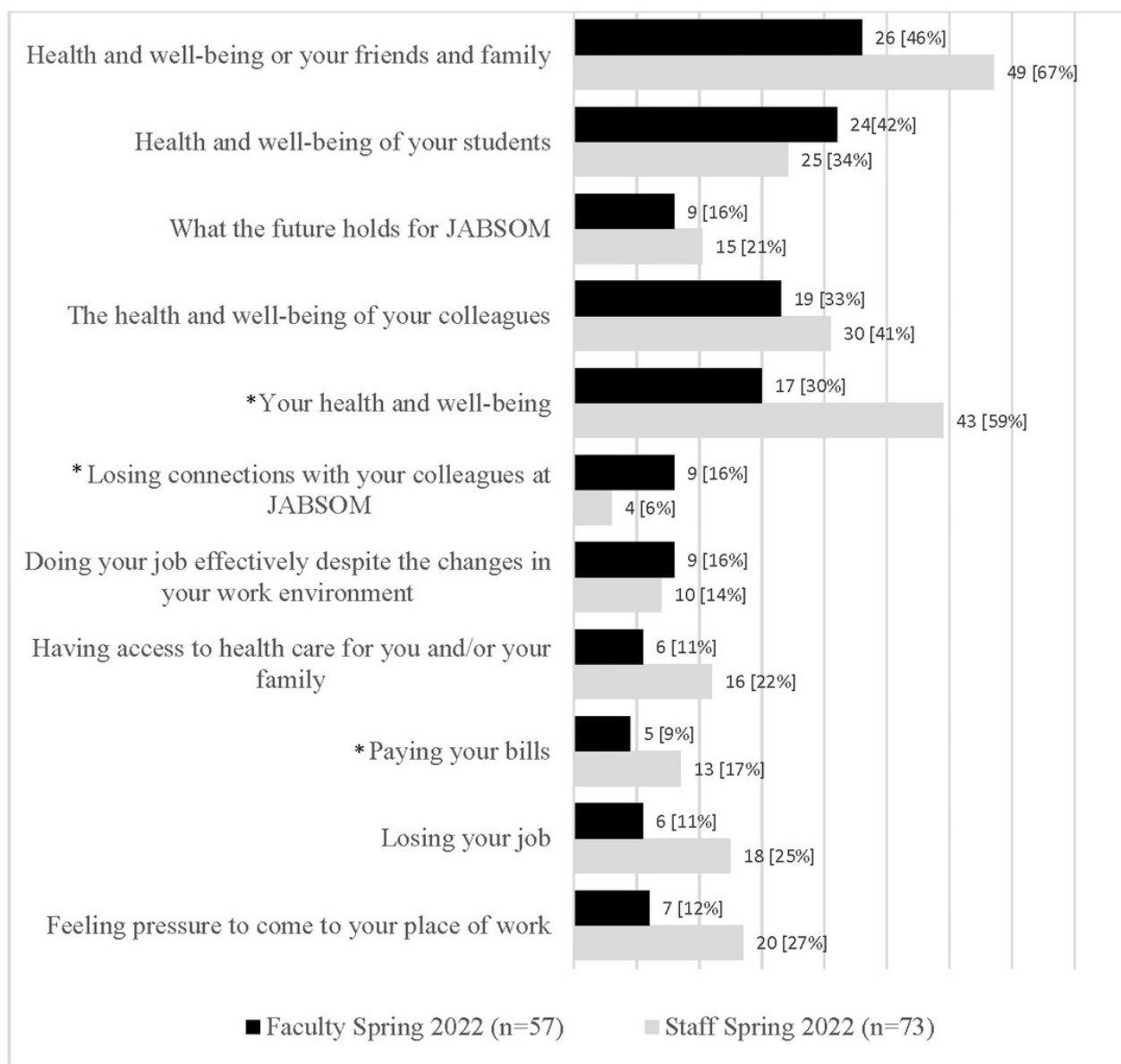


Figure 1. Faculty (2022) and Staff (2022) Comparison Reporting *Often* or *Very Often* for Questions on Worry Due to the Coronavirus Disease 2019 Pandemic

*Bonferroni correction was applied for an adjusted significance level P value of <.005

long and feel included and valued; *aloha spirit* - establishing a welcoming environment of diversity and inclusion; *clarity purpose structure; leadership and care and compassion*- caring for ourselves and each other; and *professional fulfillment* - finding joy and meaningfulness in learning and work. For more information visit the WERC webpage on the JABSOM website.³

Well-being and resiliency efforts have been long-standing and institutionalized in graduate medical education. In the 2015-2016 academic year, in order to address resident well-being, a Resident Well-Being subcommittee of the JABSOM Graduate Medical Education Committee (GMEC) was established. Due to the pandemic, in 2020 this committee evolved to include faculty and hospital administrators and was renamed the GMEC Well-Being Subcom-

mittee. Impetus for this change was to support the faculty well-being as they are expected to be role models for clinical care teams. Goals are defined by the current committee charge: "To create a culture that is engaging and supportive of resident and faculty well-being by implementing evidence-based wellness programs guided by feedback and outcomes. To create learning environments of mutual respect where all find fulfillment, meaning, and embrace positive challenges at work (GMEC Well-Being Subcommittee, updated July 2023)." The subcommittee is responsible for developing, prioritizing, and operationalizing action plan items to advance this culture, including acting as a liaison in building partnerships such as those with Hawai'i Residency Program and affiliated health systems.

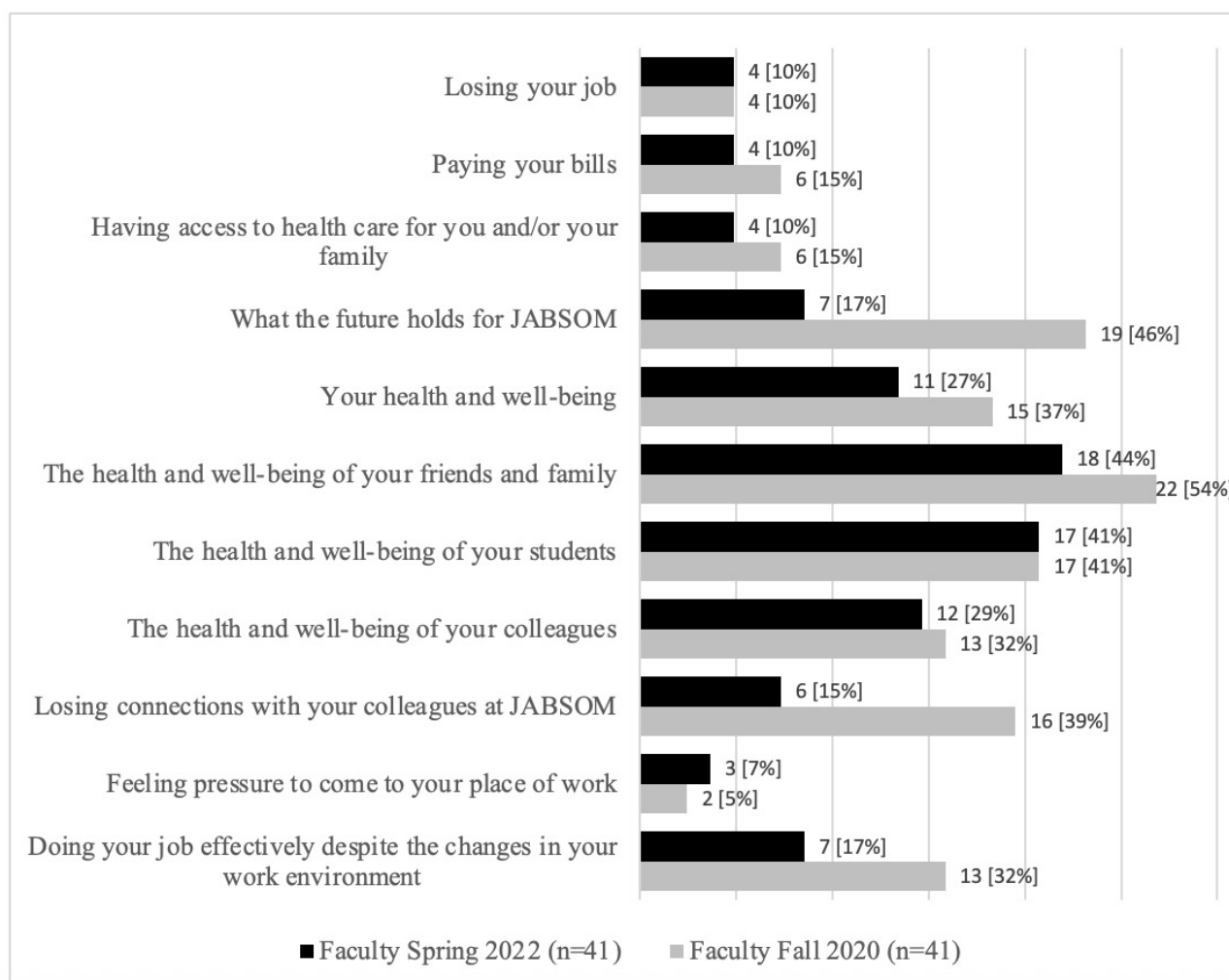


Figure 2. Faculty (2022) and Faculty (2020) Comparison Reporting *Often* or *Very Often* for Questions on Worry Due to the Coronavirus Disease 2019 Pandemic

Limitations

Data for this study were limited to one medical school, which limits generalizability. Limitations also include a small sample size, and the post hoc matching of group pairs may have introduced errors in analysis. Additionally, since the surveys were self-administered online, there may be selection bias since those with little operational or wellness concerns may not view the survey as a priority to complete. The recruitment process may have also excluded those who do not regularly check their university email or are unable to attend faculty and staff meetings. Although these data are from a single medical school, they help further expand our knowledge of organizational stress and worries caused by the COVID-19 pandemic.

Conclusion

Findings from this study inform the evolution of JABSOM well-being programs and resources, particularly for staff members, whose work context differs from faculty. Priority areas include funding or time to participate in well-being programs during working hours, time-off for well-being or

mental health needs, and attention to equity in access to well-being programs. In developing these strategies and policies, input and shared experiences from faculty and staff members can also be beneficial in determining strengths, weaknesses, and appropriateness of the different work and teaching modalities to reduce stress and worry, and support productivity. Future studies are needed to assess the impact of well-being programs on the mental health of university employees and how they affect teaching and educational outcomes.

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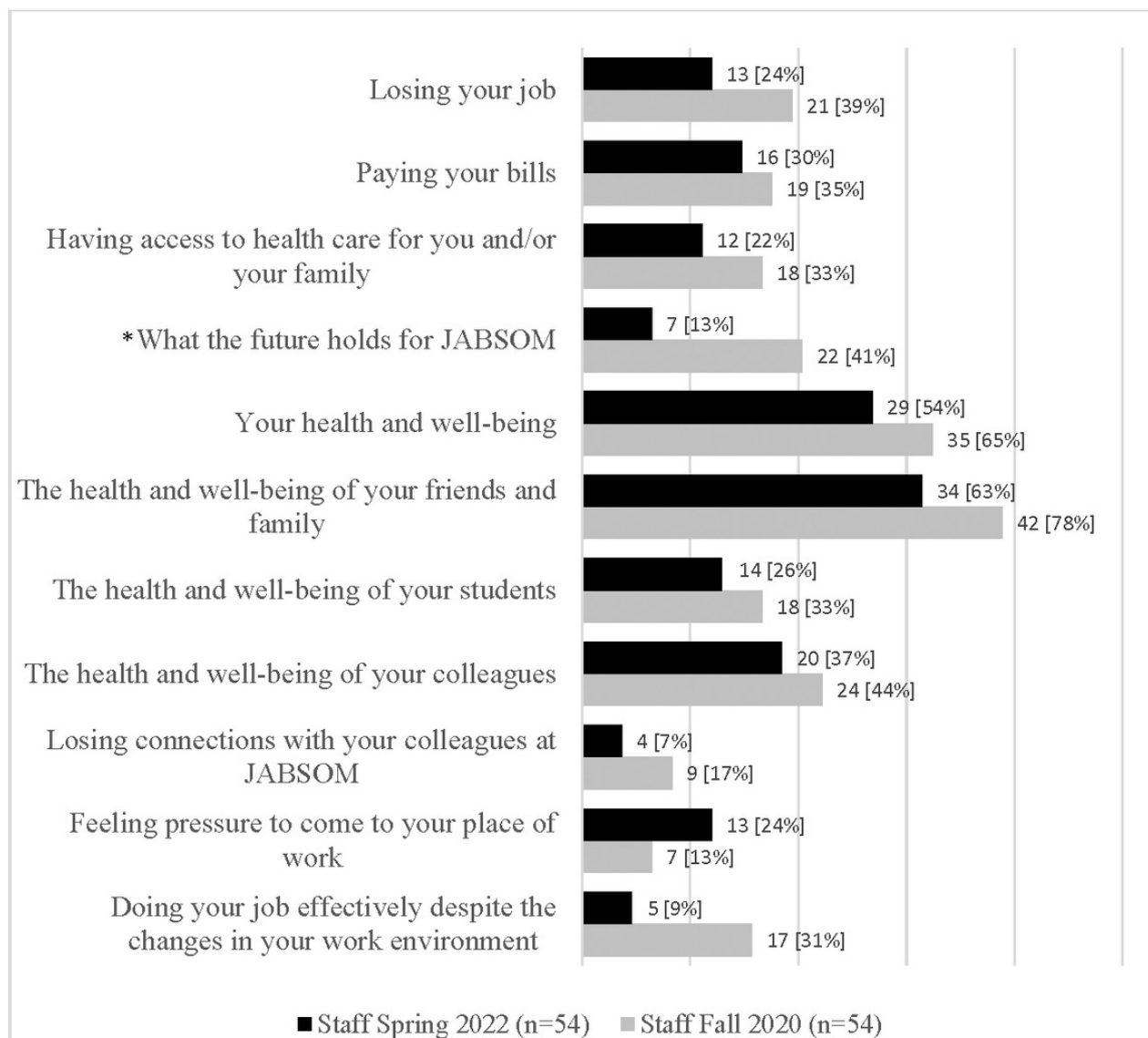


Figure 3. Staff (2022) and Staff (2020) Comparison Reporting *Often* or *Very Often* for Questions on Worry Due to the Coronavirus Disease 2019 Pandemic

* Bonferroni correction was applied for an adjusted significance level P value of <.005

References

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