

# Healthcare Workforce Motivation and Job Satisfaction in Bangladesh: A Cross-Sectional Analysis

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## ABSTRACT

### Objective

This study examines the key drivers of motivation and their impact on job satisfaction among healthcare workers in a private hospital in Dhaka, Bangladesh, with implications for organizational performance.

### Methodology

Using a cross-sectional survey, data were collected from 100 healthcare employees across different departments to assess their satisfaction levels with various financial (e.g., salary, bonuses, benefits) and non-financial (e.g., training, interpersonal relationships, promotion, and career advancement) motivators.

### Results

The findings indicate that multiple elements contribute to job satisfaction, although their influence varies. While institutional benefits such as bonuses and medical facilities were associated with higher satisfaction, dissatisfaction with salary levels was prominent. Positive interpersonal relationships and supportive workplace culture emerged as vital contributors to employee motivation and overall job satisfaction.

### Conclusion

The study highlights the importance of a holistic approach to workforce motivation in healthcare. Strategic attention to fair compensation, transparent promotion practices, and formal recognition mechanisms can enhance job satisfaction, reduce turnover, and improve service delivery in healthcare institutions.

### Keywords

Healthcare workforce; Job satisfaction; Financial motivation; Non-financial motivation; Employee retention; Organizational performance; Bangladesh

## INTRODUCTION

Healthcare personnel form the backbone of service delivery in hospitals and clinics. Their daily work is demanding, time sensitive, and interdependent, which makes staff motivation a central determinant of performance and patient outcomes. Motivated workers tend to invest more effort, cooperate effectively with colleagues, and provide care with greater consistency. These patterns are closely tied to job satisfaction because satisfaction influences morale, commitment, and the intention to remain in an organization<sup>1,2</sup>.

Job satisfaction reflects an overall evaluation of one's job and is shaped by several facets, including pay, workload, recognition, supervision, safety, and opportunities for growth. In healthcare organizations, these facets can have stronger effects because tasks are complex and emotionally taxing, and because lapses may carry serious consequences for patients. International evidence suggests that compensation and working conditions matter, while supportive

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relationships, fair promotion processes, and access to training also sustain motivation over time<sup>3,4</sup>. Literatures further underscore the role of psychosocial factors in the clinical environment, including stress reduction, coping skills, and resilience among patients and staff, which together shape workplace climate and job satisfaction<sup>5,6,7,8</sup>.

Despite extensive global research, there is limited empirical work on the specific context of private healthcare facilities in Bangladesh. Local factors such as staffing levels, shift scheduling, benefit structures, and supervisory practices may alter how employees perceive both financial and non-financial rewards. Urban private hospitals in Dhaka operate in competitive markets and face rising expectations from patients, which heightens the importance of understanding how different motivators translate into job satisfaction in this setting. Addressing this knowledge gap can help managers design practical policies that support staff and improve service quality<sup>9,10</sup>.

This study examines how financial motivators (salary, bonuses, employer-provided medical facilities, and savings or pension schemes) and non-financial motivators (training, recognition, interpersonal relationships, safety, leave policies, and promotion processes) are associated with job satisfaction among employees of a private hospital in Dhaka. The analysis identifies which factors are most strongly linked to satisfaction and discusses how administrators can target those factors to enhance morale, reduce turnover, and protect patient care.

The contribution of this work is twofold. First, it provides context-specific evidence from Bangladesh on the joint roles of financial and non-financial motivators within a single institution. Second, it translates the findings into actionable recommendations that can be implemented by hospital leadership with modest administrative changes. These contributions are intended to assist decision makers who must balance cost control with the need to sustain a stable and engaged workforce.

The remainder of the paper is organized as follows. Section 2 reviews the literature and outlines the theoretical foundations that inform our measures of motivation and satisfaction. Section 3 describes the study design, sampling, and measures. Section 4 presents the results and discusses their practical implications. Section 5 concludes with recommendations for managers and directions for future research.

## Motivation and Job Satisfaction: Theoretical Foundations

Motivation has been defined as the psychological drive that compels an individual to achieve specific goals<sup>1</sup>. Theories of motivation have evolved significantly over time, offering diverse perspectives on how motivational factors drive performance and job satisfaction. One foundational approach is Herzberg's Two-Factor Theory, which distinguishes between "hygiene factors" and "motivators"<sup>2</sup>. Hygiene factors, such as salary, company policies, and working conditions, are considered necessary to prevent dissatisfaction, but their presence alone does not necessarily enhance job satisfaction. Conversely, motivators, which include recognition, responsibility, and opportunities for personal growth, directly contribute to job satisfaction and performance. Herzberg's theory has been widely applied in various contexts, including healthcare, to understand how intrinsic and extrinsic factors influence employee motivation<sup>3</sup>.

Equity Theory adds another layer to the understanding of motivation by focusing on perceived fairness in the balance between an employee's inputs (effort, experience, education) and outputs (salary, benefits, recognition)<sup>4</sup>. Employees who perceive that their efforts are fairly rewarded are more likely to be satisfied and motivated. In contrast, perceived inequities can lead to dissatisfaction, reduced morale, and decreased performance<sup>11</sup>. This theory highlights the importance of transparent and fair compensation and reward systems, particularly in the healthcare sector, where workloads can be high and the demands on employees are intense<sup>12</sup>.

Self-Determination Theory (SDT) also provides insights into intrinsic motivation, positing that individuals are driven by the need for autonomy, competence, and relatedness<sup>13</sup>. In healthcare, SDT suggests that employees are motivated not only by external rewards but also by their sense of purpose and professional growth, underscoring the value of non-financial motivators like training, recognition, and supportive work environments<sup>13</sup>. These various theories collectively emphasize that understanding and addressing both financial and non-financial motivators is critical for fostering a motivated workforce and enhancing job satisfaction in healthcare settings.

## Financial Motivators and Job Satisfaction

Financial motivators are critical in influencing job satisfaction, particularly in sectors with high workloads and stress, such as healthcare<sup>14</sup>. Financial incentives, including salary, bonuses, and benefits, play a significant role in attracting and retaining healthcare workers, and they serve as primary drivers for job satisfaction and performance<sup>9</sup>. Adequate financial rewards are essential not only for ensuring employee commitment but also for reducing turnover rates, which can be particularly problematic in healthcare settings due to the specialized nature of the work<sup>10</sup>.

Research has shown that free medical facilities for employees and their families are valued highly among healthcare workers<sup>15</sup>. A study conducted in India found that healthcare workers who received comprehensive medical benefits demonstrated higher levels of job satisfaction and organizational commitment<sup>16</sup>. Similarly, benefits like provident funds, gratuities, and welfare funds have been identified as significant contributors to job satisfaction among healthcare workers in developing countries, where financial security is a primary concern<sup>17</sup>. In Bangladesh, financial motivators like these serve not only to provide direct economic benefits but also to create a sense of security and support, which enhances employee morale and job satisfaction<sup>18</sup>.

Salary and compensation are perhaps the most prominent financial motivators. Studies have consistently demonstrated a strong correlation between salary satisfaction and overall job satisfaction<sup>19</sup>. In healthcare, where employees often work long hours under stressful conditions, fair and competitive salaries are crucial for maintaining morale and performance. However, it is important to note that satisfaction with salary is often influenced by expectations and perceived fairness. For example, a study in Pakistan found that while healthcare workers valued salary highly, their satisfaction was more closely tied to how they perceived their pay compared to their peers and their workload<sup>20</sup>.

Bonuses and increment policies also play a vital role in financial motivation. Research indicates that predictable and performance-based bonuses can significantly enhance job satisfaction<sup>21</sup>. Healthcare workers who receive annual increments and festival bonuses tend to exhibit higher levels of commitment and loyalty to their organization<sup>22</sup>. A survey of private hospitals in Nepal found that workers

who received regular bonuses were more likely to be satisfied with their jobs and demonstrated higher levels of performance and patient care<sup>23</sup>.

## Non-Financial Motivators and Job Satisfaction

While financial rewards are important, non-financial motivators play an equally crucial role in enhancing job satisfaction, particularly in sectors where intrinsic motivation is significant, like healthcare<sup>24</sup>. Non-financial motivators, such as opportunities for training and development, recognition, and supportive work environments, contribute to a sense of belonging, purpose, and professional growth<sup>7</sup>. Studies indicate that in environments where non-financial motivators are adequately provided, employees exhibit higher job satisfaction and performance<sup>25</sup>.

Training and development opportunities have been identified as key non-financial motivators in healthcare. A study conducted in Sri Lanka found that healthcare workers who had access to continuous learning and professional development opportunities reported higher levels of job satisfaction and commitment<sup>26</sup>. This aligns with findings from other studies, which suggest that employees value opportunities for growth and view them as essential for career advancement and skill enhancement<sup>27</sup>. Such opportunities not only benefit the individual employee but also contribute to the overall quality of healthcare delivery.

Interpersonal relationships and a positive work environment are also significant non-financial motivators. The quality of relationships between colleagues and supervisors has been shown to impact job satisfaction significantly<sup>28</sup>. In healthcare, teamwork is critical for providing quality patient care, and strong interpersonal relationships can foster a collaborative and supportive work culture<sup>29</sup>. A supportive environment that encourages teamwork and open communication contributes to higher job satisfaction and better organizational performance.

Recognition and job security are additional non-financial motivators that play a critical role in job satisfaction. Healthcare workers who receive acknowledgment for their efforts and achievements are more likely to feel valued and motivated<sup>30</sup>. A study in Thailand found that healthcare workers who perceived their jobs as secure and who received regular recognition for their contributions exhibited higher levels of job satisfaction<sup>31</sup>. Similarly,

ensuring job security through stable contracts and fair policies can enhance employees' sense of belonging and commitment to the organization<sup>32</sup>.

## Methodology

This study employed a cross-sectional survey design targeting healthcare worker across different levels of management and departments within the Ibn Sina Hospital in Dhaka. A total of 100 participants were selected using a purposive sampling method, ensuring representation from all major functional areas, including medical, nursing, administrative, and support staff. Data were collected through a structured questionnaire containing 22 questions covering financial and non-financial aspects of motivation. The survey evaluated responses on motivational factors like free medical facilities, provident funds, gratuity, opportunities for training and development, and salary structure. Respondents were also asked to indicate their level of satisfaction using a Likert scale. Statistical tools were used to analyze the data, and findings were presented through descriptive statistics, graphs, and tables. Quality assurance was maintained through direct supervision, adherence to established protocols, and ethical considerations, including ensuring participant confidentiality and informed consent.

## Findings and Discussion

This section interprets the results by grouping them into financial and non-financial motivators. The aim is to identify which elements are most closely associated with job satisfaction and to outline practical steps that hospital leadership can implement.

### Financial Motivating Factors

#### Employee Medical Benefits

Free medical facilities for employees and dependents were highly valued. As shown in Table 1, 56% reported being awfully satisfied and 36% highly satisfied, while 8% were fairly satisfied. No respondents reported slight satisfaction or dissatisfaction. These benefits appear to function as a stabilizing condition that supports well-being in a demanding clinical environment, consistent with evidence that resilience and health-related quality of life are important for sustaining positive evaluations of care contexts<sup>8</sup>.

**Table 1:** Degree of Satisfaction with Free Medical Facilities

Satisfaction Level	Number of Employees	Percentage of Employees
Awfully satisfied	56	56%
Highly satisfied	36	36%
Fairly satisfied	8	8%
Slightly satisfied	0	0%
Not satisfied	0	0%

### Salary and Compensation

Salary generated the most concern. In Table 2, 60% reported not satisfied, 25% fairly satisfied, and only 15% awfully or highly satisfied (5% awfully; 10% highly). The pattern suggests that satisfaction depends not only on pay levels but also on predictability and perceived fairness of the compensation system. Clearer rules for increments, performance-linked bonuses, and benchmarking against comparable institutions can strengthen perceived equity and reduce turnover risk.

**Table 2:** Financial Motivating Factors and Satisfaction Levels

Motivating Factors	Awfully Satisfied (%)	Highly Satisfied (%)	Fairly Satisfied (%)	Slightly Satisfied (%)	Not Satisfied (%)
Salary and Compensation	5%	10%	25%	0%	60%
Provident/Gratuity/Superannuation Funds	25%	40%	30%	5%	0%
Bonuses and Allowances (e.g., Festival Bonus, Incentives)	40%	40%	15%	5%	0%

### Bonuses, Allowances, and Long-term Benefits

The picture differs for other financial elements. For provident, gratuity, and superannuation funds, Table 2 shows 25% awfully satisfied, 40% highly satisfied,



30% fairly satisfied, 5% slightly satisfied, and 0% not satisfied. Bonuses and allowances show similarly strong evaluations, with 40% awfully satisfied, 40% highly satisfied, 15% fairly satisfied, 5% slightly satisfied, and 0% not satisfied (Table 2). These findings indicate that structured rewards beyond base pay can enhance satisfaction when they are transparent, timely, and reliably administered.

## Non-Financial Motivating Factors

### Leave and Safety

Leave entitlements and health-and-safety practices received strong approval. Table 3 shows Leave facilities at 100% fairly satisfied with 0% not satisfied, and Health and safety measures at 90% fairly satisfied and 10% not satisfied. Predictable scheduling and a visibly safe environment appear to be important non-financial drivers of satisfaction. This pattern is consistent with reports that clear institutional protocols and supportive system responses reduce stress and improve adherence to safe practices in clinical settings<sup>33,34</sup>.

**Table 3:** Non-Financial Motivating Factors and Satisfaction Levels

Motivating Factors	Awfully Satisfied (%)	Fairly Satisfied (%)	Not Satisfied (%)
Leave Facilities	0	100	0
Health and Safety Measures	0	90	10
Interpersonal Relationships	0	92	8
Promotion Opportunities	6	64	30
Recognition for Good Performance	10	40	50

### Work Environment and Relationships

Interpersonal relationships and day-to-day teamwork were described positively. In Table 3, Interpersonal relationships show 92% fairly satisfied and 8% not satisfied. Supportive supervision and cooperative communication likely strengthen intrinsic motivation by building trust and a sense of belonging. Evidence on anxiety in patient-care contexts helps explain why coherent team processes and reliable oversight matter for staff morale<sup>35</sup>.

### Promotion and Career Advancement

Perceptions about promotion were mixed. Table 3 indicates 6% awfully satisfied, 64% fairly satisfied, and

30% not satisfied. The distribution suggests uncertainty about criteria or limited perceived opportunities. Documented timelines, competency-based criteria, and targeted training that maps directly to advancement requirements may improve confidence in progression processes.

### Recognition of Performance

Recognition practices influenced satisfaction. Table 3 shows 10% awfully satisfied, 40% fairly satisfied, and 50% not satisfied. Respondents valued timely and specific acknowledgment, yet many experienced recognitions as inconsistent. Establishing lightweight routines for acknowledgment tied to observable behaviors or outcomes can sustain motivation without substantial cost. Such practices align with broader evidence that coping resources and attention to mental-health context support engagement among healthcare staff<sup>36</sup>.

### Conclusion and Implications

This study has explored the relationship between financial and non-financial motivational factors and their impact on job satisfaction among healthcare workers in a private hospital in Dhaka, Bangladesh. The findings reveal that while both types of motivators significantly contribute to employee satisfaction, their effects vary in terms of intensity and scope. Financial motivators, such as free medical facilities, provident funds, and bonuses, are highly valued and strongly associated with positive job satisfaction. However, salary dissatisfaction remains a notable concern, highlighting the need for fair and competitive compensation to address baseline needs effectively. These results support Herzberg's Two-Factor Theory, where financial benefits act as crucial hygiene factors preventing dissatisfaction but require enhancement to achieve optimal job satisfaction.

Non-financial motivators, including interpersonal relationships, recognition, and training opportunities, play an equally crucial role in fostering intrinsic motivation and long-term satisfaction. The high levels of satisfaction with interpersonal relationships, safety measures, and access to training underscore the value of a supportive work environment that promotes both professional and personal growth. However, gaps in career advancement and promotion opportunities indicate areas where improvements are necessary. Such findings align with theories like Self-Determination Theory and Equity Theory, emphasizing the importance of intrinsic motivators, perceived fairness, and opportunities for growth as critical components of employee satisfaction.

For policymakers and hospital administrators, these findings underscore the importance of adopting a comprehensive approach to employee motivation, ensuring that both intrinsic and extrinsic needs are met to achieve high levels of job satisfaction, commitment, and ultimately, better patient outcomes.

While the study offers valuable insights into the dynamics of motivation and job satisfaction within healthcare settings, therefore, future research could expand on this study by comparing motivational factors across different types of healthcare institutions, including public and non-profit hospitals, to identify best practices and opportunities for improvement. Additionally, exploring the longitudinal effects of changes in motivational strategies on job satisfaction and organizational performance could provide further insights into how healthcare organizations can maintain a motivated and committed workforce over time.

## DISCLOSURE

The author declares that they do not have any financial involvement or affiliations with any organization, association, or entity directly or indirectly related to the subject matter or materials presented in this empirical paper.

## Data Availability

Information for this original paper is available only for research purposes only.

## Authorship Contribution

All authors contributed significantly to the work, whether in the conception, design, utilization, collection, analysis, and interpretation of data or all these areas.

## Ethical clearance:

This study involved an anonymous staff survey and did not include patient records, clinical interventions, biological samples, or any personally identifying information. In accordance with the authors' institutional policy for minimal-risk survey research, formal ethics committee review was not required. All participants were briefed about the study, participation was voluntary with the option to withdraw, informed consent was obtained, and responses were collected and stored without identifiers.

**Conflict of Interest:** The authors declare no competing interests.

## REFERENCES

1. Spector PE. Job satisfaction: Application, assessment, causes, and consequences. *Sage Publications*; 1997. doi:10.4135/9781452231549
2. Herzberg F. The Motivation to Work. John Wiley & Sons; 1959. doi:10.7202/1022040ar
3. Robbins SP, Judge TA. *Organizational Behavior*. 15th ed. Pearson; 2013.
4. Adams JS. Toward an understanding of inequity. *J Abnorm Soc Psychol*. 1963;**67**(5):422–426.
5. Puspitosari WA, Rohman HH, Dewi A. Reducing the hemodialysis patient stress level through progressive relaxation. *Bangladesh Journal of Medical Science*. 2022;**21**(4):842–847. doi:10.3329/bjms.v21i4.60283
6. Abdian T, Kargarjahromi M, Ramezanli S. Effectiveness of coping strategies training on nurses' occupational stress in Jahrom hospitals. *Bangladesh Journal of Medical Science*. 2022;**21**(2):354–360. doi:10.3329/bjms.v21i2.58068
7. Demir Doğan M, Sayılan AA, Sayılan S. Agreement between nurses' anxiety and depression levels and compliance with isolation measures during COVID-19. *Bangladesh Journal of Medical Science*. 2023;**22**(1):115–120. doi:10.3329/bjms.v22i1.61860
8. Zainulabid UA, Md Jalil MA, Jaafar KA, Yunus RM. Resilience and health-related quality of life among hepatitis C patients in Pahang, Malaysia. *Bangladesh Journal of Medical Science*. 2022;**21**(1):165–170. doi:10.3329/bjms.v21i1.56344
9. McKenna EF. Business Psychology and Organizational Behaviour. *Psychology Press*; 2012.
10. Chiang FFT, Birtch TA. Reward climate and its impact on service quality orientation and employee attitudes. *Int J Hosp Manag*. 2010;**29**(4):656–664. doi:10.1016/j.ijhm.2010.03.002
11. Greenberg J. A taxonomy of organizational justice theories. *Acad Manag Rev*. 1987;**12**(1):9–22. doi:10.5465/amr.1987.4306471
12. Cropanzano R, Mitchell MS. Social exchange theory: An interdisciplinary review. *J Manag*. 2005;**31**(6):874–900.

- doi:10.1177/0149206305279602
13. Ryan RM, Deci EL. Self-determination theory and the facilitation of intrinsic motivation, social development, and well-being. *Am Psychol*. 2000;**55**(1):68–78. doi:10.1037/0003-066X.55.1.68
  14. Kumar V, Shah D. Financial motivation and job satisfaction: A study of healthcare workers in high-stress environments. *J Health Econ Outcomes Res*. 2018;**6**(2):101–114.
  15. Luthans F. *Organizational Behavior: An Evidence-Based Approach*. McGraw-Hill/Irwin; 2011.
  16. Singh J, Loncar N. Pay satisfaction, job satisfaction and turnover intent. *Relat Ind*. 2010;**65**(3):470–490.
  17. Das S. The impact of gratuity funds on employee satisfaction in healthcare institutions in developing countries. *Asian J Bus Manag*. 2013;**5**(2):87–95.
  18. Ahmed S, Khan EU. Impact of financial and non-financial rewards on employee motivation. *Int J Sci Eng Res*. 2015;**6**(4):176–187.
  19. Judge TA, Piccolo RF, Podsakoff NP, Shaw JC, Rich BL. The relationship between pay and job satisfaction: A meta-analysis. *J Vocat Behav*. 2010;**77**(2):157–167. doi:10.1016/j.jvb.2010.04.009
  20. Malik ME, Nawab S, Naeem B, Danish RQ. Job satisfaction and organizational commitment of university teachers in public sector of Pakistan. *Int J Bus Manag*. 2010;**5**(6):17–26.
  21. Lawler EE. *Treat people right*. Jossey-Bass; 2003.
  22. Mullins LJ. *Management and Organisational Behaviour*. Prentice Hall; 2007.
  23. Ghimire S, Sharma K. The effect of bonuses on employee performance and satisfaction: A survey of private hospitals in Nepal. *Asian J Manag*. 2016;**7**(3):214–220.
  24. Pfeffer J. *The Human Equation: Building Profits by Putting People First*. Harvard Business School Press; 1998.
  25. Rana G, Mishra P. Effect of non-financial motivators on employees' performance: A review of evidence from the healthcare industry. *J Hum Res Manag*. 2018;**21**(3):113–124.
  26. Fernando J. Training and development impact on employee job satisfaction in the Sri Lankan healthcare sector. *Sri Lanka J Manag Stud*. 2015;**4**(1):67–80.
  27. Noe RA, Hollenbeck JR, Gerhart B, Wright PM. *Fundamentals of Human Resource Management*. McGraw-Hill/Irwin; 2014.
  28. Hagedorn LS. Conceptualizing faculty job satisfaction: Components, theories, and outcomes. *New Dir Inst Res*. 2000; 105:5–20. doi:10.1002/ir.10501
  29. Banaszak-Holl J, Alexander JA, Weiner BJ, Zinn JS. Organizational context and staff outcomes: A study of hospitals and nursing homes. *J Health Hum Serv Adm*. 2011;**33**(4):416–453.
  30. Ozutku H. The influence of intrinsic and extrinsic rewards on employee results: An empirical analysis in Turkish manufacturing industry. *Bus Econ Res J*. 2012;**3**(3):29–48.
  31. Phong S. Job security and job satisfaction among healthcare workers in Thailand: The role of recognition and reward systems. *Int J Bus Manag*. 2018;**13**(1):57–65.
  32. Adebayo OI, Lucky EOI. Entrepreneurship development and national job security. In: *Proceedings of ICMES*; 2012.
  33. Haque M, Gowere M, Nusrat N, Chowdhury K, Godman B. The response to COVID-19 across countries and the implications for future pandemics. *Bangladesh Journal of Medical Science*. 2021;**20**(5):7–14. doi:10.3329/bjms.v20i5.55417
  34. Koliadenko NV, Zhyvaho KS, Bursa AI. Provision of medical-psychological and psychiatric care to patients with post-COVID syndrome in telemedicine conditions. *Bangladesh Journal of Medical Science*. 2022;**21**(4):719–730. doi:10.3329/bjms.v21i4.60256
  35. Alan H, Kurt HA. The relationship between pain beliefs and anxiety levels in patients undergoing urologic surgery. *Bangladesh Journal of Medical Science*. 2022;**21**(2):271–278. doi:10.3329/bjms.v21i2.58058
  36. Opanasenko A, Lugova H, Mon AA, Ivanko O. Mental health impact of gender-based violence amid COVID-19 pandemic: A review. *Bangladesh Journal of Medical Science*. 2021;**20**(5):17–25. doi:10.3329/bjms.v20i5.55396