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Research Article

PSYCHOLOGICAL STATE OF BANK EMPLOYEES PROVIDING ESSENTIAL SERVICES DURING COVID-19 PANDEMIC

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Abstract: *To prevent the spread of COVID-19 the Government of India imposed lock down resulting into number of physical restrictions. But to keep the life of citizens' smooth, several services including banking were declared as essential services. The Government released various welfare funds through banks causing fear among employees due to probability of getting infection from customers who turned up into several hundred for banking. Providing services during lock down mounted a serious physical and psychological challenge before Bank employees. This study is carried out to explore psychological state of their mind while providing banking services under threat of COVID-19.The result showed that though negative emotions like fear, anxiety, depression etc. has increased, opportunity to help the people has also developed positive emotions which motivated employees to provide customer service at the time of distress. The management need to go beyond their routine support to enable them to continue to provide the customer service with pride and help the nation like any other corona warriors.*

Key words: COVID-19 (Corona virus disease- 19), lock-down, emotions; cognitive assessment, discrimination, quarantine, PPE (Personal Protective Equipment), SARS-2003, WHO (World Health Organization)

Introduction

With the increase in the number of patient of COVID-19, The Prime Minister of India had to appear on television to put forth the stark realities before the nation and appealed to give a sense of the national purpose. He asked the people to follow the 'Janata curfew' on 22nd March, 2020 and acknowledge and support the job role of front-line warrior like doctors, paramedical staff and cleaning staff etc. who are fighting with the deadly COVID-19 virus.

On 24th March, 2020, the Prime Minister of India again appeared on television and announced the decision of 21 days lock down to control the spread of COVID-19 outbreak in India by implementing provisions of the Disaster Management Act, 2005, according to which all people of India were expected to remain where they are and stay inside their houses. Declaration of Janta curfew followed by lock down triggered off widespread panic and people mainly those of middle class formed a queue in front of shops to buy groceries, vegetables and fruits etc. that led to inflated cost and short supply of food items. But the magnitude of uncertainty and fear got reduced after the assurance of the Prime Minister that essential services like hospitals, pharmacies, groceries shops, banks, petrol pumps and other essential services shall continue to provide their services uninterruptedly and all efforts will be made to ensure that supply is maintained.

Since, the essential services were required to be provided and banking being as one of the essential service, bank employees were required to move from one place to another, without support of the public transport (as public transport were suspended due to lock-down) to provide the banking services to customers while keeping themselves safe from infection of COVID-19. Lock down implemented on account of COVID-19 has not only restricted the mobility of employees providing banking services but also caused a large number of socio and psychological impact upon employees due to fear of getting infected while providing banking services.

The Government of India allotted Rs. 1.70 lakhs crores (US$24 billion) budget under *Gareeb Kalyan Yojan* to provide relief to migrant workers, poor people, farmers etc. and the Finance Minister of India declared the Government plan to release the stimulus package and to provide credit in the accounts of farmers, marginalized workers and women having PMJDY accounts etc. The aim of the package was to provide food security measures for poor through direct benefit transfer (cash transfer). Similarly, various State Government too opened their treasury for various state sponsored welfare schemes for citizens like payment of pending MANREGA (Mahatma Gandhi National Rural Employment Guarantee Act) works, old age pension, widow pension etc. attracting customers in hundreds at the gate of public sector banks of India making the concept of social distancing next to impossible.

Though COVID-19 epidemic is new and is of different kind but looking to its negative impact upon the humanity, number of studies have been carried out. Most of these studies are directly related to medical field focusing either upon patient or health workers but no significant study could be noticed with reference to its impact upon other workers who are also providing essential services like police personnel, home delivery boys, banking personnel etc. who are providing services at the time when most of the people are inside their houses to save themselves from the pandemic. The literature revealed that health care workers' who work in hospitals, isolation wards, intensive care units have a greater risk (Naushad et al., 2019, p. 637) as they are more exposed to infection in comparison to people involved in other essential services but at the same time health workers are equipped with PPE or high quality safety equipment. But the condition of other workers especially providing essential services like banking is quite different as they are required to come in close contact with number of customers and unknown people without knowing their medical conditions and also exchange cheques, drafts, currency notes etc. through which spread of corona virus is quite possible and therefore, are prone to accidental infection despite taking basic precautions like use of mask, washing of hands with soap and use of sanitizer etc.

COVID-19 is a unique pandemic. Bank authorities have no prior experience of handling such situation and are learning by common sense or from the experiences of others. Bank authorities are trying their best to protect their employees while maintaining their obligation to provide service to the society and have taken several steps like:

- Providing basic facilities to their employees like soap, water, mask, tissue papers and other protective gloves etc. and carrying out routine sanitation of the branches/ offices.

- Providing nominal monetary benefits to meet the additional cost of travel and purchase of essential items like mask, sanitizer etc.
- Screening of the customers at the doorstep of the branch to prevent entry of such customers who are having symptoms like fever or cough etc.
- Employees with chronic diseases like diabetes mellitus, chronic renal failure, cardio cerebrovascular, physically challenged employees etc. are being allowed to either work from home or work from the nearby branches as they are more prone to infection.
- Facility of doctor on call to provide on line advice in case any of the employee gets any medical problem.
- Though it is difficult to complete banking job from remote locations but still two teams (team-A and team-B) have been formed especially in administrative offices/ big branches and thus allowing one team to work from office and the other from home to minimise exposure of their employees.
- Conducting meeting through skype/ Microsoft team/ video calling etc.
- Providing reimbursement of cost of testing and treatment, if found positive of COVID-19 or if had to undergo examination for COVID-19.
- Those who are stranded due to lock-down in different location, are allowed to join duty temporarily at the place where they got stuck up.

Statement of the problem and Objectives of the Study

While providing essential services, in addition to protect themselves, banking people also face challenge of travelling by own vehicles as public transport remains suspended and providing customer service while ensuring norms of the social distancing. Inspite of the notification to allow bankers to travel for duty, incidence of stoppage on the way/ not allowing them to go out of their houses by the administrative authorities are reported commonly and even sometimes manhandling by the police are not exception even after showing their identity cards specially in initial days of lock-down. At work place, these employees also have to manage social distancing and no doubt the police and administrative authorities have been supportive in general but it was also reported that in many cases law enforcement authorities also issued show cause notices to Branch Managers for their failure to control the crowd outside their branches without understanding that bank employees don't have expertise to discipline the crowd. Even in a few cases, unfortunate incidents of detention/ arrest of Branch Managers have also taken place, demoralising the whole community as news of such incident spread like a fire through social media in much aggravated way. In view of the above background, this research is carried out to understand the impacts of providing banking services on physical and mental health of bank employees during the lock-down to control Covid-19 and to assist the policy makers to prepare an actionable plan to enable them to provide uninterrupted essential banking services while keeping the morale of their army as high. Accordingly, this study is carried out on three public sector banks with following objectives:-

(1) To study the challenges faced by bank employees providing essential services during lock-down.
(2) To study the psychological state of bank employees who are providing essential services during COVID-19 epidemic.

Review of Literature

Novel Coronavirus (nCoV) 2019 belongs to the genus Coronavirus with its fast mutation rate in the Coronaviridae. In December 2019, COVID-19 emerged as a public health problem in the market of Huanan Seafood of China where livestock of animals are traded and Wuhan State of Hubei Province in China became the focus of attention due to global pneumonia epidemic due to unknown virus. This virus was named as COVID-19 by WHO in February, 2020 (Sahin, 2020, p. 2)

In the 21 centuries, the world faced three pandemic i.e. SARAS in 2003 and Ebola in 2014 and now COVID-19. In a research pertaining to outbreak of Ebola epidemic which occurred in 2014, it was discovered that an intense and wide range of psychological impact of outbreaks contagious disease could inflict health of the people. In addition to physical health problems, people also precipitated new psychiatric symptoms too at the individual level inspite of having healthy mind otherwise. It got further aggravated in such persons suffering with minor pre-existing mental illness. The family member and caregivers too noticed distress in long run. (Hall, Hall, & Chapman, 2008, p. 447) But the COVID-19 is quite unique in comparison to SARS outbreak of 2004 and Ebola outbreak of 2014 which were limited to certain part of the globe as invisible devil of Novel Coronavirus (nCoV) 2019 has now reached to all parts of the world due to its method of spread and large number of travels ("WHO Coronavirus Disease (COVID-19) Dashboard", 2020) and was declared a public health emergency on 30th January 2020 when the total number of COVID-19 crossed the total count of Severe Acute Respiratory Syndrome-2003 (SARS- 2003). (Ho, Chee, & Reger Cm, 2020)According to World Health Organization as on 12th May, 2020, it has already infected 4,058,252 persons causing death of 2,81,736 persons all over the world ("WHO Coronavirus Disease (COVID-19) Dashboard", 2020).

The psychological fear of COVID-19 is more intensified in comparison to SARS pandemic, which had occurred 17 years ago because of the increased air travel and better global connectivity. Extensive media coverage also influenced the physical and psychological response of the public to the threat of the infectious disease (Ho, Chee, & Reger Cm, 2020) but the focal point of public authorities and media continued to revolve around the physical and biological repercussion of the contagious disease with poor attention on mental health issues (Ying et al., 2020, p. 18). At community level, distrust towards other individuals could be developed in general and government and health care workers in special because of their probability to contain virus (Ho, Chee, & Reger Cm, 2020). Strict quarantine and compulsory contact tracing policy might cause societal rejection, discrimination, stigmatization and financial loss (Brooks et al., 2020, p. 919).

The limited knowledge of COVID-19 and unlimited sources of news causes anxiety and fear among the public (Bao, Sun, Meng, Shi, & Lu, 2020) as extensive media coverage influence the people's physical and psychological reaction to the contagious threat which may naturally amplify their worry prompting them to take preventive measures. (Tang, Bie, Park, & Zhi, 2018, p. 968). In a study on Active Weibo Users Li et.al. (2020) observed that scores of negative emotions (i.e. anxiety, depression) and sensitivity of the people towards social risks

increased. However, the positive emotions like life satisfaction and happiness decreased. People were more concerned about health of self and their family and less about their colleagues and friends (S. Li, Wang, Xue, Zhao, & Zhu, 2020b, p. 2034). Therefore, the National Health Commission of China and various other mental health associations and organization have prepared and compiled health educational articles and videos for the general public so that they get online mental health education in addition to providing on-site services and their admission, if needed (S. Li, Wang, Xue, Zhao, & Zhu, 2020a, p. 7).

Due to its ability of large scale infection in short span, health workers are under physical and psychological pressure (Elizarrarás-Rivas et al., 2010, p. 31). More than 3000 health workers got infected and 22 were died in China. Health workers accept the risk of infection as their professional hazard but they often exhibit concern about transmission to their family members especially who are old aged, suffering from chronic disease and having compromised immunity (Adams & Walls, 2020, p. 1439). Regardless of exposure, person might experience anxiety and fear of falling ill or deteriorating health condition, illusion of dying and helplessness and start blaming others who are sick, thus triggering off a psychological surrender and mental breakdown. Psychiatric morbidities tendencies vary from anxiety, depression, panic attacks, somatic symptoms and symptoms of psychological stress disorder to dementia and suicidal tendencies (Hall et al., 2008, p. 447). Isolation further complicates the problem as they may suffer from anxiety owing to uncertainty of health status and may develop obsessive-compulsive symptoms like checking temperature repeatedly, sterilization etc. (Shigemura, Ursano, Morganstein, Kurosawa, & Benedek, 2020, p. 281). Xiang claimed that the mental health needs of person with suspected/ confirmed cases of COVID-19 and their family members who are quarantined have been poorly handled (Xia, 2020). In an on-line cross sectional study carried out in designated hospital of Ningbo, China provides evidence of high prevalence general anxiety and depressive symptoms in the family members of health care and other workers providing services and therefore, mental health status of their family members need urgent attention (Elizarrarás-Rivas et al., 2010, p. 31) and conversations with health workers may reduce anxiety (Adams & Walls, 2020, p. 1439).

Research Methodology

Quantitative approach is used for the study. Since COVID-19 is one of the biggest epidemic of the century and being totally new in concept, hardly any secondary data is available and hence, research is mainly based upon the **primary data** obtained through questionnaire uploaded on google survey and circulated through e-mail/ WhatsApp to employees of three

public sector banks which was responded by 204 employees. The questionnaire was uploaded through google survey and responses were obtained from employees of three public sector banks. Name of these banks are marked as A, B and C to maintain confidentiality. Upon receiving the data, it was processed through SPSS 15.0 for analysis by using statistical tools like regression analysis and correlation analysis.

Analysis of data and hypothesis testing:

Table (I): Demographic Details

Gender details	Male	Female	Total			
	135	69	204			
Marital Status	Unmarried	Married	Total			
	29	174	204			
Living with Family or not	Living with family	Not living with family	Total			
	161	43	204			
Working as Branch Head or as line functionary	Brach Head/ In-charge of th office	Line Managers/ clerical/ subordina cadre	Total			
	96	108	204			
Area in which working	Rural / Semi-urban are	Urban/ Metro area	Total			
	32	172	204			
Bank wise participation	Bank A	Bank B	Bank C	Total		
	38	134	32	204		
Cadre of Employees	Subordinate Staff	Clerical cadre	Junior/ Middle Management cadre	Senior Manageme nt cadre	Total	
	06	25	152	21	204	
Age group of respondents	Below 30 year	31 to 40 years	41 to 50 years	51 to 55 yea	Above 55 years	Total
	60	85	26	13	20	204

Hypothesis-I

$H1_0$: Knowledge of the disease has no relation with precaution to be taken.

$H1_a$: Knowledge of the disease has relation with precaution to be taken.

To test the hypothesis, regression analysis was carried out for following factors:

Dependent Factor: Precautions to be taken to safeguard from COVID-19.

Independent Factors: Knowledge of employees about COVID-19.

The Anova table below shows that significance value is 0.000 (<0.005) at R squares is 0.384 and mean square 50.548 which signifies that null hypothesis is rejected. Histogram (Figure-I) shows positive relation. Means precaution to be taken against COVID-19 has direct relation with knowledge of employee about COVID-19.

Table (I) (A): Model Summary

Model	R	R Square	Adjusted R Square	Std. Error Of The Estimate
1	.620(A)	.384	.381	.63378

A. Predictors: (Constant), Knowledge of Disease
B. Dependent Variable: Precautions

Table (I) (B):Anova

Model		SS	Df	MS	F	Sig.
1	Regression	50.548	1	50.548	125.845	.000(A)
	Residual	81.138	202	.402		
	Total	131.686	203			

A. Predictors: (Constant), Knowledge of Disease
B .Dependent Variable: Precautions

Table (I) (C): Coefficients

Model		Unstandardized Coefficients		Standardized Coefficients	T	Sig.
		B	Std. Error	Beta	B	Std. Error
1	(Constant)	1.203	.198		6.063	.000
	Knowledge of Disease	.651	.058	.620	11.218	.000

Dependent Variable: Precautions

Table (I) (D): Residuals Statistics

	Minimum	Maximum	Mean	Std. Deviation	N
Predicted Value	1.8539	4.4573	3.3725	.49901	204
Residual	-2.80644	1.84440	.00000	.63221	204
Std. Predicted Value	-3.043	2.174	.000	1.000	204
Std. Residual	-4.428	2.910	.000	.998	204

Dependent Variable: Precautions

Hypothesis-II

$H2_0$: Numbers of days office attended by an employee does not depend upon gender of employee.

$H2_1$: Numbers of days office attended by an employee depend upon gender of employee.

To test the hypothesis whether availability of employee for work during lock-down depends upon sex of employee or not, regression analysis was carried out for following factors:

Dependent Factor: Number of day office attended within first two weeks.

Independent Factors: Sex of employees (whether male or female).

Distribution of sample:

Table (II) (A): Employees attended duty- Sex wise

No. of Days office attended	Male	Female
Less than 5 days	8	5
6 to 10 days	14	3
More than 10 days	113	60

The Anova table below shows that significance value is 0.675 (>0.005) at R squares is 0.001 and mean square 0.562 which signifies that null hypothesis is accepted. Such a situation means that the numbers of day office attended by an employee is dependent upon sex of employees. Histogram (Figure-II) Supports the same.

Table (II) (B): Model Summary

Model	R	R Square	Adjusted R Square	Std. Error of the Estimate
1	.030(a)	.001	-.004	.54448

a. Predictors: (Constant), Gender
b. Dependent Variable: Number of day office attended

Table (II) (C): ANOVA

Model		Sum of Squares	df	Mean Square	F	Sig.
1	Regression	.052	1	.052	.176	.675(a)
	Residual	59.884	202	.296		
	Total	59.936	203			

a. Predictors: (Constant), Gender
b. Dependent Variable: Number of day office attended

Table (II) (D): Residuals Statistics

	Minimum	Maximum	Mean	Std. Deviation	N
Predicted Value	2.7778	2.8116	2.7892	.01604	204
Residual	-1.81159	.22222	.00000	.54313	204
Std. Predicted Value	-.713	1.395	.000	1.000	204
Std. Residual	-3.327	.408	.000	.998	204

a. Dependent Variable: Number of day office attended

Hypothesis III:

$H3_0$: Mechanism for developing social distance does not depends upon the knowledge and support of the police and public.

$H3_a$: Mechanism for developing social distance depends upon the knowledge and support of the police and public.

To test hypothesis whether developing mechanism for maintaining social distance depends upon the knowledge of employees and support of the police/ administrative authority and public cooperation, regression analysis was carried out for following factors:

Dependent Factor: Mechanism to develop Social Distance.

Independent Factors:

Knowledge of employee about COVID-19;
Knowledge of employee about precautions to be taken to safeguard from COVID-19;
Support provided by the police and administrative authorities in social distancing; and
Cooperation of the public (customers) in implementation of social distance.

The Anova table below shows that significance value is 0.000 (<0.005) at sum of squares is 62.649 and mean square 15.662 which signifies that null hypothesis is rejected and hence, alternate hypothesis is accepted. Histogram (Figure-III) shows positive relations. This means, mechanism to develop social distance at work place depend upon the knowledge of employee about Covid-19 and support from the police authorities and public cooperation.

Table (III) (A): ANOVA

Model		Sum of Squares	Df	Mean Square	F	Sig.
1	Regression	62.649	4	15.662	12.162	.000(a)
	Residual	256.272	199	1.288		
	Total	318.922	203			

a. Predictors: (Constant), Police Support, Knowledge of disease, Public support, Precautions
b. Dependent Variable: Social Development Mechanism

Table (III) (B): Coefficients

Model		Unstandardized Coefficients		Standardized Coefficients	T	Sig.
		B	Std. Error	Beta	B	Std. Error
1	(Constant)	2.066	.480		4.306	.000
	Public Support	.358	.066	.380	5.421	.000
	Knowledge Of Disease	-.001	.136	-.001	-.008	.994
	Precautions	.011	.129	.007	.086	.932
	Police Support	.139	.077	.126	1.812	.071

Dependent Variable: Social development mechanism

Table (III) (C): Residuals Statistics

	Minimum	Maximum	Mean	Std. Deviation	N
Predicted Value	2.5806	4.6031	3.8137	.55553	204
Residual	-3.59101	2.41728	.00000	1.12358	204
Std. Predicted Value	-2.220	1.421	.000	1.000	204
Std. Residual	-3.164	2.130	.000	.990	204

A. Dependent variable: Social development mechanism

Hypothesis-IV:

$H4_0$: Listening of employees view point and providing necessary support by the employer does not create a sense of pride for service.

$H4_a$: Listening of employees view point and providing necessary support by the employer create a sense of pride for service.

Regression analysis was carried out for following factors:

Dependent Factor: Pride for service.

Independent Factors: Listening to employees' view point and providing necessary support by the employer.

The Anova table below shows that significance value is 0.000 (<0.005) at R squares of 0.136 and mean square 13.136 which signifies that null hypothesis is rejected. Histogram (Figure-IV) shows positive relations, meaning thereby that listening and understanding difficulties faced by employees and providing necessary support to employees by the employer create a sense of pride for service among employees.

Table (IV) (A): Model Summary

Model	R	R Square	Adjusted R Square	Std. Error of the Estimate
1	.369(a)	.136	.128	.90943

Predictors: (Constant), Listening employees, Employers supportive action
Dependent Variable: Pride for service

Table (IV) (B): ANOVA

Model		SS	df	MS	F	Sig.
1	Regression	26.272	2	13.136	15.883	.000(a)
	Residual	166.238	201	.827		
	Total	192.510	203			

a. Predictors: (Constant), Listening employees, Employers supportive action
b. Dependent Variable: Pride for service.

Table (IV) (C): Coefficients

Model		Unstandardized Coefficients		Standardized Coefficients	t	Sig.
		B	Std. Error	Beta	B	Std. Error
1	(Constant)	3.191	.193		16.517	.000
	Employers Supportive Action	.140	.056	.200	2.483	.014
	Listening Employees	.159	.059	.216	2.690	.008

Dependent Variable: Pride for service.

Table (IV) (D): Residuals Statistics

	Minimum	Maximum	Mean	Std. Deviation	N
Predicted Value	3.4899	4.6856	4.2157	.35974	204
Residual	-3.08775	1.51010	.00000	.90494	204
Std. Predicted Value	-2.017	1.306	.000	1.000	204
Std. Residual	-3.395	1.660	.000	.995	204

Dependent Variable: Pride for service

Hypothesis-V:

$H5_0$: Opportunity to provide service does not create a feeling of service to the Nation.
H5a: Opportunity to provide service create a feeling of service to the Nation.
To examine the hypothesis whether opportunity to provide service create a feeling of service to the Nation or not, correlation was carried between two factors namely opportunity to provide service and their feeling of pride for the nations. The result shows as under:

Table (V) (A): Correlations

		Service opportunity	Proud for the nation
Service opportunity	Pearson Correlation	1	.783(**)
	Sig. (2-tailed)		.000
	N	204	204
Proud for the nation	Pearson Correlation	.783(**)	1
	Sig. (2-tailed)	.000	
	N	204	204

** Correlation is significant at the 0.01 level (2-tailed).

Upon analysis of the below table, it can be observed that Pearson correlation is 0.783 at two tailed significance value is below 0.005 and hence, null hypothesis is rejected and alternate hypothesis is proved, i.e. opportunity to provide service creates a sense of pride for the nation.

Analysis of result and discussion

Increased personal, family and social risks led to many fold increase in negative type cognitive assessment due to potential threat of getting disease. Employees develop an avoidant behaviour to contact with people in general and specially with people suffering from normal cough, sneezing etc. which is just reverse to normal behaviour which he/ she was behaving in the normal circumstances. Such negative emotions help the employee to keep away from potential pathogens but long-term negative emotions may create negative effects and likely to reduce the immunity and some time the employee may commit mistakes unintentionally causing loss to the bank or overreact in his behaviour which may be the reason of complaints against such employee.

Upon survey conducted among 204 employees of three banks, it was found that providing customer service during COVID-19 epidemic and lock down has created a fear psychosis to the extent of moderate or severe level among 76% of the respondent and low level impact upon 24% of the respondent. Further, 88% of the respondent feel that their family members have fear psychosis to the extent of moderate or high level because their bread earners need to go out for providing service during epidemic, this creates additional psychological pressure upon employees leading to feeling of anxiety and depression among 61% respondent to the extent of moderate and severe level that can be seen from the following table:

Table (VI)

Level	Have a fearful feeling		Concerned because of COVID-19		Family having fear about the bread earner		Feeling anxiety / depression	
	No.	%	No.	%	No.	%	No.	%
Severe	121	59.31	101	49.50	163	79.90	76	37.25
Moderate	33	16.17	52	25.49	18	8.82	48	23.52
Low	50	24.50	51	25.0	23	11.27	80	39.21

In this battle of fighting against this pandemic and preventing COVID-19, banks have provided remarkable support and made significant achievements through their role of providing essential services to the society and work for the nation at the time of one of the biggest human crisis of the century which has been appreciated even by the Prime Minister and Finance Minister too but the study reveals that officers and support staff have started observing heightened stress, emotional weakness, increased levels of depression, traumatized due to fear of getting infected and transmitting to their children and loved ones. Stray but widely circulated cases of abuse of powers by the police and other administrative authorities' demoralise the financial soldiers. The balance between professional obligation and personal protection often causes conflict and dissonance. Though negative part of the result showed that due to fear of getting infected and passing the infection to their families, employees pass through negative emotions but opportunity to work and help the farmers, poor, downtrodden, migrant workers and citizens of the country create positive emotions like life satisfaction, happiness and pride feeling towards the organization and nation which fortunately has been

in positive balance in the present study which can be seen from the following table:

TABLE (VII)

Level	Positive feeling towards providing service		Proud feeling towards the nation	
	No.	%	No.	%
High	163	79.90	174	85.29
Moderate	31	15.19	23	11.27
Low	10	4.90	07	3.43

But positive emotional balance can't be sustained in long term and therefore, it is necessary to understand the challenges faced by employees and their potential psychological behaviour and provide support so that deposit of positive emotions always remain greater than the cumulative effect of negative emotions and employees are able to continue to provide service till long term. The following suggestive measures in this regard could help in this regard:

- Direct support to fight against risk of infecting self: Front line employees are working under constant challenge as they are not aware of health status of customers whom they are coming into contact. Employees are also not aware of the health status of their own colleague and remain under psychological pressure of getting infected. Severe situation of the COVID-19 is causing mental health problems like anxiety, stress and depressive symptoms (Elizarrarás-Rivas et al., 2010, p. 31) and therefore, the employer should provide all necessary support like:
  - Creating awareness through on line training (to do/ not to do) on the topic like how to prevent themselves from infection and how to handle such situation and continue to remain motivated.
  - Changing sitting layout of branches as the present set up was made with an intention to provide service to customer with close proximity for improving customer satisfaction.
  - Overload of work causes physical exhaustion and emotional disturbance, fear and insomnia leading to reduction in immunity and hence, the bank should consider providing additional off in mid-week in addition to off on Sunday so that they can get better opportunity to take proper rest and give quality time to their family and loved ones at the time of crisis.
  - On one hand the Bank should take liberal views about treating absences of employees caused due to illness or their inability to attend office due to restrictive movement. On the other hand, those who are attending duty putting their life at risk for providing essential services should be rewarded.
  - The study also shows that number of day office attended has correlation with sex of the employee mainly because of absence of public transport facility and other social reasons and hence, female employees should be facilitated additionally like providing transport facility etc. to enable them to attend office.
- Psychological and emotional support: Psychological challenges are more dangerous than the physical challenges faced by employees and therefore, interventions need to be comprehensive covering psychological issues, mental health before the crisis, potential life threatening circumstances to self and fear of contagion and spread of virus to their (Elizarrarás-Rivas et al., 2010, p. 31) family, like:
  - Providing enhanced insurance coverage to employees.

- Higher health satisfaction has direct correlation with lower psychological stress and therefore for positive reframing of the mind-set, relaxation techniques and stress management through social media, video clips etc. may be used to disseminate employees.
- Management should ensure that employees are aware of how and where they can access physical and psychosocial support. Managers and departmental heads should work like friend, philosopher and guide to interact with subordinates to monitor stress and those who are having psychological distress or in the stage of burnout should be provided professional support and reinforce safety procedure to come out of anxiety, stress and fear.
- Psychological intervention team may be set-up at each bigger centre. Psychological counsellor may provide on-line counselling over video conference/ skype etc.

- Support, if an employee gets infected:
  - Public health facilities are under tremendous pressure during COVID-19 and therefore, banks should make corporate tie up with private hospitals for providing treatment of COVID-19.
  - Suspected and confirmed cases of COVID-19 may experience fear of several health issues and the contagion. Quarantine of such people may experience loneliness, anxiety, depression, insomnia, denial and despair which may reduce immunity and lower the effect of treatment. In a few cases, it may lead to increased risk of aggression and sometimes suicide too (Shigemura et al., 2020, p. 281). Hence, light duties may be allotted to such employee which he can perform from home without diluting the concept of quarantine and adverse effect on his health and period of quarantine should be treated as on duty or special leave. During this period, he may also be advised to complete on-line courses initiated by their banks so that the period could be utilised for up-gradation of knowledge.
  - Studies have confirmed that persons who experienced public health emergencies should not be ignored even after they get cured and discharged from hospital as they experienced severe stress disorder even after the incident is over (Fan, Long, Zhou, Zheng, & Liu, 2015, p. 2887) and therefore, counsellor should be appointed to monitor them and provide psychological support.
- Issues arising on account of travel restriction and social distancing:
  - Non-availability of public transport and traffic restriction causes difficulties for employees to reach to office and back leading to mental relapse due to uncertainty and uncontrollable behaviours like hyperactivity, agitation and quarrel with administrative authorities. The administrative authorities should authorise the employer to register their organization for issuance of limited number of on-line lock-down passes/ curfew passes directly to their employees so that people providing essential services are able to make movement during lock-down. Employer should be accountable for misuse of curfew passes, if issued to unwarranted persons.
- Fighting with fake news:
  - Lauren et al. conducted a review of use of social media and identified many gaps in positive use of current knowledge and identified opportunities to integrate social media to control outbreak of epidemic (Lauren E. Charles-Smith et al., 2015). Employees should be educated to minimize watching unauthenticated source of information like WhatsApp etc. and rely upon reliable sources of news like newspaper, government sponsored TV channel etc. In the

present study, it was observed that about 24% of the respondents mainly rely upon WhatsApp, You-tube and other unreliable sources of information for updation of their knowledge.

- To minimize the detrimental effect of "fake news", at organizational level the authorised representative should monitor social platforms and issue clarification.
- Weekly bulletin may be issued by the bank to provide healthy communication and updated and accurate information.
- Management should amplify hopeful and positive stories and images especially of those who have developed innovative way of social distancing or provided customer service in innovative ways etc.

- After effect of epidemic: Even after epidemic is over, the battle will not be over and employees will need to overcome difficulties faced by the Bank on economic front, mainly increase in non-performing assets and other areas which could not be focussed during the period of emergency and redouble their energy and hence, lean period should be used as opportunity to update housekeeping.

Limitations of the study and scope for further research

As rightly said "Nothing is perfect in this world". This research too has following limitations:

- Research is limited to three PSU bank covering 204 respondents due to various limitation of the researcher like limited resources and time constraint.
- This study is carried out within the period of lock-down 1.0 (23rd March 2020 to 14th April 2020) and results are based upon the initial effect of COVID-19 and long term effect may differ.

Conclusion

The COVID-19 pandemic has caused nationwide attention. The Government tried to issue clear directions/ orders based upon professional advice but still incident of poor coordination between authorities and banks took place which will definitely be minimised with the passage of time and experience. Mutual respect, cooperation and coordination between staff posted in branches, administrative offices and police authorities to promote trust among each other could definitely improve the position and all stake holders should work together as a team in fight against COVID-19.

There is a cultural shift as the concept of high level of hand hygiene and social distancing is a 'U' turn from cultural norms of bank employees which they learnt as part of courtesy in meeting with customers and carrying various outdoor duties. Like health workers, bank employees too are under insurmountable psychological pressure that may lead to several psychological issues like anxiety, fear, insomnia and depression and the management need to play a pivotal role through physical and psychological intervention to keep their morale high. Lock down is not a permanent solution to prevent the spread of the disease. Government and societies have to realise compulsion of life to live the life with COVID-19 and banks have to move further to contribute their part in the economy. Till now Banks have been providing limited service during lock down and soon employees will be required to provide all kinds of banking and financial services as were being provided before lock-down for which bankers will be required to move out in field for carrying out pre-sanction/ post-sanction and meet

customers at their work place/ residence etc. The management of Banks need to look from the broader prospective and develop innovative ways and assertively assist the employees to keep their morale high and employees too need to understand the requirement of the time and instead of relying upon unreliable sources of information should come forward as financial solider of the country to help the farmers, poor, downtrodden and society at large while taking all prevention to safe-guard themselves from COVID-19.

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