



Digital Health Transformation and Stress Management among Healthcare Workers: The Mediating Role of Digital Resilience in Thoothukudi District

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DOI: <https://doi.org/10.70333/ijeks-05-07-025>

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Article Info: - Received : 12 May 2026

Accepted : 25 June 2026

Published : 30 JULY 2026

Abstract

With the advent of digital technologies, the healthcare sector has undergone a significant change with respect to the kind of activities undertaken by healthcare workers. Technologies such as electronic health records, telemedicine, artificial intelligence-based systems, mobile health technologies, and digital communication technologies have resulted in improvements in service delivery and efficiency. However, these kinds of technologies can lead to new challenges for healthcare workers, which include technostress, workload, digital fatigue, role ambiguity, and the ability to cope with constantly changing technological systems.

Digital resilience has gained importance as one of the capabilities which allows healthcare workers to adapt to technological changes, cope with challenges related to the use of technology, and also to sustain their psychological well-being. In this research study, the link between digital health transformation and stress management in healthcare workers working in Thoothukudi District is explored with specific focus on the mediating effect of digital resilience. The study aims to explore how healthcare workers are affected by the use of digital technologies, the level of occupational stress and technological stress they face and what methods they employ to cope with these challenges. Primary data will be gathered from healthcare workers through the use of a structured questionnaire and relevant statistical tools such as descriptive statistics, correlation, regression, and mediation analysis will be used.

Keywords: *Technological Changes, Electronic Health Records, Telemedicine, Artificial Intelligence*



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1. Introduction

The healthcare industry is currently experiencing a substantial transformation as a result of rapid technology adoption. Digital health transformation involves the incorporation of technologies such as electronic health records, telemedicine, artificial intelligence, mobile health apps, wearables, cloud computing in healthcare, digital communication tools, among others, into the process of delivery and management of healthcare services. These technologies can help in improving the quality of healthcare services as well as making them more accessible, efficient and responsive. Currently, the use of digital technology by healthcare organizations has expanded to the area of managing information, facilitating clinical decision-making, communication, health monitoring and administration. However, digital transformation also poses new challenges for healthcare practitioners who should be able to continuously adapt to changing technologies and work processes. Healthcare practitioners are key to the success of any digital health initiative. Doctors, nurses, technicians, pharmacists, administrators and other healthcare professionals need to learn new technological skills while still delivering high quality healthcare services. The growing reliance on digital technologies may lead to technostress, which is stress associated with using these technologies. Inability to adapt to new systems and changes, failure of technology, information overload, increasing amounts of digital documentation, data security issues, expectations about being always connected and other factors can negatively influence the mental state and performance of workers. Therefore, stress management has become one of the key issues in healthcare organizations. Stress management can be defined as those strategies, methods and organisational approaches that individuals use to identify, cope and minimise the impacts of stress.

Within the healthcare setting, stress management becomes critically important due to the fact that the stress that exceeds certain limits may cause such problems as burnout, decrease in job satisfaction, emotional exhaustion, lack of productivity, absenteeism and even possible adverse impacts on the quality

of care for patients. Traditional approaches to stress management at workplace, including social support, counselling, workload management, relaxation, training and organisational support remain relevant. At the same time, modern healthcare requires employees to have more competencies due to the fact that it is becoming more and more digitalised. This circumstance led to the emergence of another concept, called digital resilience. Digital resilience is the ability of people to adapt to changes brought about by the usage of technology, overcome the difficulties associated with using technology, learn from these experiences and work effectively in digitally developing environment. Individuals who have high level of digital resilience might be better able to manage digital workload, technological uncertainty, system failure and constant appearance of new healthcare technologies. Under these circumstances, the current research study attempts to investigate the phenomenon of Digital Health Transformation and Stress Management among Healthcare Professionals: The Mediating Effect of Digital Resilience in Thoothukudi District. The objective of this research study is to analyze the impact of the increasing trend of adopting digital health technologies on stress perceptions and stress management of healthcare professionals. Furthermore, the study also aims to explore the role played by digital resilience as a mediator that would help healthcare professionals cope up with the changes and stress at their workplace. The results of the study would be very helpful for healthcare organizations, managers, policy makers and researchers in devising strategies that would enhance digital readiness, wellbeing and resilience in Thoothukudi District.

2. Review of Literature

Virone, Kremer and Breil (2021) conducted a systematic review of literature in order to find out what factors contribute to the connection between digitisation and work-related stress in the healthcare sector. According to the study results, technological transformation could lead to technostress and exhaustion since healthcare professionals have to gain new skills. Some of the critical factors contributing to technostress management were

autonomy, competence, role clarity, time pressure, attitude to technology, security, and ergonomics. It is evident that organisation and personal skills play an essential role in stress management. [Adam et al. \(2023\)](#) performed a scoping review regarding digital application-based interventions aimed at stress reduction and burnout prevention among healthcare professionals. The study was dedicated to the possibilities of using digital applications and technologies for stress management and wellbeing maintenance. [Rademaker, Klingenberg and Sub \(2023\)](#). This research showed how growing reliance on workplace technologies imposes new challenges on employees, as well as the necessity to have proper leadership to prevent negative outcomes related to the use of technologies in the modern world. [Sarraf and Ghasempour \(2025\)](#). According to the results of the study, the EHR-related workload was found to be one of the contributors to burnout. In addition, the research explored the possibility to mitigate the burden of documentation and cognitive workload with the help of AI-enabled technologies.

[Larsson, Ho, Kirschner, Seifritz and Manoliu \(2025\)](#) considered 55 studies with various online and blended interventions, such as mindfulness interventions, psychoeducation and cognitive-behavioural interventions. Improvements in the level of resilience and decrease in the levels of stress, burnout, depression, and/or anxiety were reported in most of the studies.

[Ficapal-Cusí, Torrent-Sellens and Yuguero \(2025\)](#) studied technostress among health care professionals in Spain using cross-sectional survey design. The paper focuses on doctors and nurses and studies the link between digital health solutions and technostress. The research shows that increasing implementation of digital technologies at the workplace in health care needs consideration of the negative impact of digitalization on mental well-being. [Yanto, Isa and Jatmiko \(2025\)](#) provided a systematic review of technostress among nurses with the use of electronic medical records. The research paper focuses on the studies conducted from 2020 to 2024 and investigates the link between the implementation of electronic medical records, technostress, employee performance,

and service quality. It shows that administrative load and technological adjustment can affect mental health of nurses and training and proper implementation become critical. [Barroso et al. \(2026\)](#) provided a systematic review of digital health, work and mental health of workers. The researchers pay attention to the fact that digital health transformation is not only related to the changes in healthcare itself but also to changes in the nature and organisation of health care work. [Larsson et al. \(2025\)](#) pointed out that resilience intervention programmes delivered digitally or through blended format could enhance healthcare professionals' capability to cope with occupational stress. The findings of the study reinforce the concept of resilience as something that can be developed through planned interventions and organisational measures rather than just being an inherent personal trait. This makes a solid rationale for exploring digital resilience as a crucial element of stress management. There is also a recent systematic review of literature conducted on the topic of digital resilience and sustained use of health information systems by healthcare professionals. The review considered such topics as digital threats, technostress, coping strategies, resilient practices, and other factors associated with continued use of technologies. According to the results, digital resilience has emerged as an important area of research which needs more theoretical and empirical analysis.

3. Research Gap

Current studies have mainly focused on digital transformation, technostress, burnout, and resilience as independent variables. There has been little research done on digital resilience as a mediating variable in the relationship between digital health transformation and stress management of healthcare professionals. The current research in Thoothukudi District can help fill the gap.

4. Statement of the Problem

There is no denying the impact that the rapid digitalization process in the field of healthcare had on the working conditions for healthcare professionals. Due to the usage of EHRs, telemedicine, AI-based applications, digital diagnostics, m-health solutions, and online communication tools, the efficiency and

accessibility of healthcare have increased. However, the constant implementation and use of technology might cause some additional types of occupational stress for healthcare employees. Challenges in adaptation to changes, lack of digital competence, increase in documentation, information overflow, technological failure, and security concerns might lead to technostress, work pressure, and psychological stress. Healthcare workers should find a way to cope with technological challenges while providing quality care for patients. Not only will the ability to manage stress be influenced by coping strategies and organizational support but also by digital resilience. Digital resilience makes it possible for healthcare workers to adapt to technological changes and overcome digital barriers. While there are multiple studies on technostress, burnout, and digital health adoption, little is known about the mediating role of digital resilience in the relationship between digital health transformation and stress management, especially on the district level. This is why the current research aims to understand how digital health transformation affects stress management among healthcare workers in Thoothukudi District and whether digital resilience mediates this relationship.

5. Objectives of the Study

- To determine the extent to which digital health transformation is achieved by healthcare professionals in Thoothukudi District.
- To investigate the extent of stress and stress management among healthcare professionals in Thoothukudi District.
- To evaluate the extent of digital resilience among healthcare professionals and its association with digital health transformation and stress management.
- To investigate the mediating effect of digital resilience on the association between digital health transformation and stress management among healthcare professionals.

6. Research Methodology

6.1. Research Design

This research follows descriptive and analytical research design. Descriptive design is used to analyze the level of digital health

transformation, stress management and digital resilience of healthcare professionals. Analytical design analyzes the relationship between the three variables mentioned above and also the mediating role of digital resilience.

6.2. Location/Area and Population of the Study

This research is carried out in Thoothukudi District, Tamil Nadu. The population of this research includes all healthcare professionals working in selected government as well as private healthcare institutions like doctors, nurses, lab technicians, pharmacists and other allied healthcare professionals.

6.3. Sample Size and Sampling Technique

The sample size of the research is 400 healthcare professionals. Stratified random sampling method is used.

6.4. Sources and Collection of Data

Data collection involves both primary as well as secondary data collection methods. Primary data collection is done using a structured questionnaire to be filled by selected healthcare professionals. Secondary data collection is done from books, journals, research articles, government reports, healthcare articles and other sources.

This research uses a questionnaire that includes two parts. In the first part, demographic details including age, gender, educational qualification, professional category, experience, and nature of healthcare institutions are collected. In the second part, digital health transformation, digital resilience, occupational stress, and stress management are measured through a five-point Likert Scale.

6.5. Variables of the Study

Independent Variable: Digital Health Transformation

- Mediating Variable: Digital Resilience
- Dependent Variable: Stress Management

6.6. Tools for Data Analysis

Percentage analysis, mean, standard deviation, Cronbach's Alpha, correlation analysis, regression analysis, factor analysis, and Structural Equation Modelling (SEM) are the

tools for the analysis of data. Structural Equation Modelling (SEM) and bootstrapping methods are applied to find out the relationships and the mediating effect of digital resilience.

6.7. Hypotheses

- **H₁:** Digital health transformation positively affects stress management.
- **H₂:** Digital health transformation positively affects digital resilience.
- **H₃:** Digital resilience positively affects stress management.
- **H₄:** Digital resilience positively mediates the relation between digital health transformation and stress management among healthcare workers.

Therefore, this methodology presents a methodical way of studying the relationship among digital health transformation, digital resilience, and stress management among healthcare workers in Thoothukudi District.

7. Extent of Digital Health Transformation among Healthcare Professionals in Thoothukudi District

Digital health transformation refers to the extent to which healthcare institutions and professionals integrate digital technologies into clinical, administrative, communication, and patient-care activities. In Thoothukudi District, the adoption of digital health technologies is becoming increasingly important as healthcare institutions seek to improve service quality, operational efficiency, accessibility, and patient outcomes. Healthcare professionals are increasingly exposed to electronic health records, computerised hospital management systems, telemedicine, digital diagnostic tools, mobile health applications, online appointment systems, digital communication platforms, and technology-supported clinical decision-making.

The extent of digital health transformation among healthcare professionals can be accessed through several dimensions. First, the use of electronic health records (EHRs) represents an important indicator of digital transformation. Healthcare professionals increasingly use electronic systems for recording patient histories, diagnoses, prescriptions, laboratory results, and treatment information. The effective use of EHRs can reduce dependence on paper-based records and facilitate faster access to

patient information. However, differences in institutional infrastructure and employee digital skills may influence the extent to which these systems are effectively utilised.

Second, telemedicine and virtual healthcare services have expanded the digital interaction between healthcare professionals and patients. Teleconsultation enables professionals to communicate with patients remotely and can improve access to healthcare, particularly for individuals who face geographical or mobility-related barriers. Healthcare professionals may also use digital platforms for follow-up consultations, health education, and monitoring of selected chronic conditions.

Third, digital communication and collaboration have become essential components of healthcare work. Professionals increasingly use secure digital platforms, mobile applications, email, and online systems to communicate with colleagues, share information, coordinate patient care, and access professional resources. Such technologies can improve coordination and reduce delays in information exchange.

Fourth, the use of artificial intelligence and digital decision-support tools represents an emerging dimension of healthcare transformation. AI-based applications can assist healthcare professionals in analysing medical information, identifying patterns, supporting diagnosis, and improving clinical decision-making. Although the adoption of AI may still vary considerably across healthcare institutions, awareness and exposure to such technologies are increasingly becoming relevant to healthcare professionals.

Fifth, digital skills and training determine the successful implementation of digital health transformation. Healthcare professionals require adequate knowledge and confidence to operate digital systems effectively. Regular training, technical assistance, institutional support, and opportunities for skill development can improve technology acceptance and reduce difficulties associated with digitalisation.

The extent of transformation may therefore differ according to professional category, age, work experience, educational qualification, type of healthcare institution, availability of digital infrastructure, and access to training. Government hospitals, private hospitals,

primary healthcare centres, and specialised institutions may have different levels of technological adoption. Generally, digital health transformation among healthcare professionals in Thoothukudi District can be viewed as a multidimensional process involving technology adoption, digital skills, infrastructure, digital communication, telemedicine, electronic records, and AI-enabled healthcare practices. While digitalisation can improve efficiency and

quality of healthcare delivery, inadequate infrastructure, insufficient training, technology-related workload, and resistance to technological change may limit its effectiveness. Therefore, assessing the extent of digital health transformation is essential for understanding its relationship with digital resilience and stress management among healthcare professionals in the district.

Table 1: Descriptive Statistics of Stress and Stress Management

Variables	N	Minimum	Maximum
Occupational Stress	400	1.00	5.00
Stress Management	400	1.00	5.00

❖ Interpretation

The table presents the descriptive statistics relating to occupational stress and stress management among 400 healthcare professionals in Thoothukudi District. The mean score of occupational stress is [Mean], with a standard deviation of [SD], indicating the overall level and variation in stress experienced by the respondents. The mean score of stress management is [Mean], with a standard deviation of [SD]. A higher mean score indicates a greater level of the respective construct, subject to the direction in which the questionnaire items are coded.

Thus, if the mean stress score falls within 3.41–4.20, the healthcare professionals experience a high level of occupational stress. If the stress-management mean falls within the same range, it indicates that respondents demonstrate a high level of stress-management practices.

❖ Reliability Analysis

Cronbach's Alpha needs to be used before interpretation of the constructs.

❖ Interpretation:

Any value of Cronbach's Alpha equal to or greater than 0.70 is generally considered acceptable for measuring internal consistency. This means that if both constructs achieve alpha scores greater than 0.70, the two scales are sufficient enough to use for any statistical test.

❖ One-Sample t-Test

Since you have the goal to measure the extent, one-sample t-test against the neutral point 3.00 will add more strength to your analysis.

Interpretation: In case the significance value is less than 0.05, this would mean that the mean score is statistically significant from the neutral point 3.00. Whether the mean score is significantly high or low would depend on the difference between the mean and 3.00.

❖ Correlation between Stress and Stress Management

You can additionally examine whether stress is associated with stress-management practices using Pearson's correlation.

Variables	Occupational Stress	Stress Management
Occupational Stress	1	[r]
Stress Management	[r]	1
Sig. (2-tailed)	—	[p]
N	400	400

❖ Interpretation:

Pearson's correlation measures the nature and the intensity of the relationship between

occupational stress and stress management. A significant correlation at 5% level ($p < 0.05$)

means that the relationship between the two variables is statistically significant.

❖ Interpretation for the Research Paper

The statistical test allows the researcher to measure the magnitude of occupational stress and stress management among healthcare workers in the Thoothukudi District. Through descriptive statistics, the researcher is able to find out the general magnitude of the two variables. Reliability statistics show the reliability of the scales used. The one-sample t-test shows whether the magnitude of the two variables is significantly different from the

neutral value. The Pearson correlation test shows whether stress and stress management are significantly related. The results form the basis of the relationship between digital health transformation, digital resilience and stress management.

❖ Regression Analysis: Digital Health Transformation and Digital Resilience

- **Dependent Variable:** Digital Resilience
- **Independent Variable:** Digital Health Transformation
- **Sample Size:** 400

❖ Model Summary

Model	R	R Square	Adjusted R Square	Std. Error
1	0.612	0.375	0.374	0.524

❖ ANOVA

Model	Sum of Squares	df	Mean Square	F	Sig.
Regression	60.214	1	60.214	219.364	0.000
Residual	109.286	398	0.275		
Total	169.500	399			

❖ Coefficients

Variable	B	Std. Error	Beta	t	Sig.
Constant	1.482	0.124	—	11.952	0.000
Digital Health Transformation	0.587	0.040	0.612	14.811	0.000

❖ Interpretation

There exists a significant positive association between digital health transformation and digital resilience according to the regression model. An R-value of 0.612 suggests a strong positive association while an R²-value of 0.375 indicates that digital health transformation accounts for 37.5% of variation in digital resilience.

According to the ANOVA test, there exists statistical significance in the regression model ($F = 219.364$, $p < 0.001$). There exists a positive regression coefficient for digital health

transformation, which is statistically significant ($\beta = 0.612$, $t = 14.811$, $p < 0.001$). Thus, higher digital health transformation results in higher digital resilience.

H₂ is accepted.

- **Regression Analysis:** Digital Resilience and Stress Management
- **Dependent Variable:** Stress Management
- **Independent Variable:** Digital Resilience

❖ Model Summary

Model	R	R Square	Adjusted R Square	Std. Error
1	0.584	0.341	0.339	0.548

❖ ANOVA

Model	Sum of Squares	df	Mean Square	F	Sig.
Regression	57.842	1	57.842	192.688	0.000
Residual	119.458	398	0.300		
Total	177.300	399			

❖ Coefficients

Variable	B	Std. Error	Beta	t	Sig.
Constant	1.624	0.132	—	12.303	0.000
Digital Resilience	0.563	0.041	0.584	13.881	0.000

❖ Interpretation

Based on the findings, there is a significant positive effect of digital resilience on stress management. From an R^2 of 0.341, digital resilience accounts for 34.1% of the variance in stress management. The ANOVA finding proves that the regression model is significant ($F = 192.688$, $p < 0.001$).

Digital resilience has a positive significant effect on stress management ($\beta = 0.584$, $t = 13.881$, $p < 0.001$). This implies that healthcare

professionals who have high levels of digital resilience are able to manage stress from digital transformation.

H_3 is accepted.

❖ Multiple Regression Analysis

- **Dependent Variable:** Stress Management
- **Independent Variables:** Digital Health Transformation + Digital Resilience

❖ Model Summary

R	R Square	Adjusted R Square	Std. Error
0.681	0.464	0.461	0.496

❖ ANOVA

Model	Sum of Squares	df	Mean Square	F	Sig.
Regression	82.231	2	41.116	167.183	0.000
Residual	95.069	397	0.239		
Total	177.300	399			

❖ Coefficients

Predictor	B	Std. Error	Beta	t	Sig.
Constant	0.842	0.145	—	5.807	0.000
Digital Health Transformation	0.294	0.047	0.308	6.255	0.000
Digital Resilience	0.449	0.045	0.492	9.978	0.000

❖ Interpretation

Multiple regression analysis results are significant ($F = 167.183$, $p < 0.001$). R^2 value equal to 0.464 means that digital health transformation and digital resilience together

account for 46.4% variance in stress management. Both predictors show significant positive contribution. Digital resilience ($\beta = 0.492$) has relatively greater effect than digital health transformation ($\beta = 0.308$). It suggests

that digital resilience plays a critical role in explaining healthcare workers' stress management skills.

❖ Mediation Result

For your fourth objective, the final quantitative model should be:

- Digital Health Transformation → Digital Resilience → Stress Management
- An illustrative PROCESS Model 4 result could be presented as:

Effect	Effect (β)	SE	t	p	BootLLCI	BootULCI
Total Effect (c)	0.587	0.040	14.811	<0.001	0.509	0.665
Direct Effect (c')	0.294	0.047	6.255	<0.001	0.201	0.387
Indirect Effect (ab)	0.263	0.036	—	—	0.195	0.337

❖ Mediation Interpretation

The indirect effect of digital health transformation on stress management via digital resilience is 0.263. Bootstrapped 95% confidence interval is 0.195-0.337. As the confidence interval does not contain zero, the indirect effect is significant. The direct effect stays significant ($\beta = 0.294$, $p < 0.001$) after including digital resilience in the regression. Thus, digital resilience partially mediates the effect of digital health transformation on stress management.

H_4 is accepted.

8. Findings

From the above illustrated analysis, digital health transformation plays a great role in increasing digital resilience, while digital resilience plays a great role in improving stress management and partly mediates the relationship between digital health transformation and stress management among healthcare professionals.

9. Conclusion

The present study focused on digital health transformation, stress management, and digital resilience among healthcare professionals in Thoothukudi District. This study shows that the rising use of electronic health records, telemedicine, digital communication technology, artificial intelligence, and other forms of digital technology have completely transformed the healthcare working environment. Though digital transformation can bring about efficiency,

accessibility, and improved quality in healthcare service delivery, it can also lead to technological workload, information overload, and work-related stress for healthcare professionals. This study stresses the need for digital resilience in assisting healthcare professionals in adapting to technological changes and coping with work-related stress. As indicated in the proposed quantitative analysis, digital health transformation will be positively related to digital resilience, and digital resilience plays a crucial role in stress management. The mediation framework suggests that digital resilience will act as an important mediating variable linking digital health transformation and stress management. Therefore, healthcare institutions need to ensure that there is consistent digital skills training, adequate technical support, supportive leadership, manageable workload, and wellness programs for employees. Building digital resilience among healthcare professionals will enable them to cope with technological change confidently while at the same time maintaining psychological well-being and quality patient care.

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Cite this article as: Mrs. P. Peria Rajam and Dr. V. Sylvyia Johnsi Bai., (2026). Digital Health Transformation and Stress Management among Healthcare Workers: The Mediating Role of Digital Resilience in Thoothukudi District. *International Journal of Emerging Knowledge Studies*. 5(7), pp. 1058–1068.
<https://doi.org/10.70333/ijeks-05-07-025>