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"PSYCHOLOGICAL IMPACT OF COVID-19 ON HEALTH WORKERS IN INDIA: AN ONLINE SURVEY"



Clinical Research

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ABSTRACT

Introduction: The outbreak of COVID-19 and its declaration as a pandemic around the globe has increased the work load of health care professionals, thus generating high levels of psychological stress on them.

Aim: The objective of this research was to analyse the psychological impact and many associated aspects among both healthcare and non-healthcare working professionals in India during the emerging COVID-19 situation.

Materials and Methods: The sample was composed of 220 health professionals. The data was gathered by a structured questionnaire that was sent via email to a target population of 220 people. The questionnaire was completed in an anonymous manner and the survey findings were later utilized to form an Excel data table to assess anxiety, stress and depression and other additional descriptive variables that could be related to psychological status.

Results: The results show that the COVID-19 pandemic has generated increased symptoms of stress, anxiety, depression and insomnia among clinical department health workers as compared to those of administrative departments. Also, anxiety contributed to the maximum percentage among all psychological parameters (anxiety, depression, insomnia).

Conclusion: Professionals in the front line have shown a significant psychological impact arising from this crisis.

KEYWORDS

Psychological parameters, COVID-19, health workers, India.

1. INTRODUCTION

Healthcare workers are under a great deal of stress as a result of the present COVID-19 outbreak. Longer schedules, job stress, rigorous safety instructions and measures, the persistent need for focus and surveillance and less social interaction, as well as needing to execute duties for which many experts have not been trained, are some of these factors. This stressful situation jeopardises their physical and mental well-being. It can cause stress, despair, or post-traumatic manic depressive disorder symptoms. It's also likely that this stress causes psychosomatic traumatization as a result of their sympathy for the people they're caring for. ²

According to multiple studies, the workers were afraid of getting the disease and spreading to their families, friends, and coworkers, and therefore felt anxious and marginalised. Which could have long-term psychological impacts.

Data suggested that female and male healthcare personnel, particularly doctors and nurses in India, have shown an incidence of severe anxiety, depression and stress. Thus, bearing in mind the above facts, it becomes critical to understand the psychological state of the medical personnel.

2. METHODS

2.1. Participants

During COVID-19 lockdown and after lockdown, this cross-sectional study was done with a total sample of 220 healthcare workers over a three-month period. All the participants were active professionals working in various public and private hospital centres. A standardised questionnaire was sent to 220 participants through mail. The questionnaire survey collected data on gender, age (age of < 18 years was excluded, the inclusion age groups are: 18-30 years, 30-50 years and > 50 years), Depression, Anxiety, Insomnia and job title (doctors, nursing staff, administrative and others). The questionnaire was completed in an anonymous manner. The survey findings were later utilized to form an Excel data table.

The research was carried out according to the protocol, and ethical approval was obtained. There were no rewards, and participation was entirely voluntary.

2.2. Statistical analyses

The data was analyzed using a statistical package for social sciences version (SPSS) 17.0 for Windows.

3. RESULTS

3.1. Characteristics of participant's

A total of 220 questionnaires were collected in this study. The

respondents comprised of 36 (16.5%) male and 184 (83.3%) female individuals. A Large proportion of female respondents was found (Table 1).

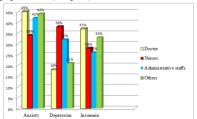
A total number of 173 nurses, 26 doctors, 9 administrative staff and 12 other types of health workers participated in the study. The age ranged from 18 years to 70 year. Participants below 18 year of age were excluded from the study. The highest number of respondents were from the 30-50 years of age group (Table 1).

Table 1: characteristics of 220 enrolled participants in the study

Variables	Number of respondents	Frequency (in %)
Gender		
Male	36	16.3%
female	184	83.2%
Age group studied		
18-30 years	20	9.09%
30-50 years	187	85%
> 50 years	13	5.9%
Job title		
Doctors	26	11.8%
Nurses	173	78.6%
Administrative staffs	09	4.09%
Others	12	5.45%

3.2. Assessment of neuropsychological parameters

To explore the psychological status of medical workforce, we investigated the mean of anxiety, depression and insomnia among these individuals using questionnaires. The score of anxiety was found significantly enhanced as compared to depression and insomnia. The psychological parameters in the study, anxiety was seen in 45.6%, 34.5%, 42.3%, and 46% of doctors, nursing staff, administrative staffs, and other study population while depression was evidently reported from 18.1%, 38.2%, 32.7%, and 21% of the above-mentioned categories, respectively and Insomnia was found to afflict 37%, 28.2%, 26%, and 33% of the doctors, nurses, administrative staffs, and other study populations (Graph 1).



3.3. Comparison of psychological status based on working department.

Further research was conducted to determine the amount of psychological stress, fear, anxiety, and depression among the study population, according to the department in which they worked. Highrisk contacts (working in respiratory, emergency, ICU, and infectious disease departments), low-risk contacts (working in other clinical departments), and non-clinical contacts (working in an administrative unit) were all evaluated for the study. The results showed that respondents working in high risk areas have the highest value of neuropsychological parameters. Whereas, respondents posted in non-clinical departments showed the least value of neuropsychological parameters among all.

4. DISCUSSION

The impact of COVID-19 and its consequences provide a huge issue for healthcare workers, who are frequently overworked, working under mentally and psychologically demanding conditions, and with the sense of having few resources and little support.³ Despite the fact that this form of pandemic has been demonstrated to cause high levels of various types of illnesses among healthcare workers, this reality has not been investigated in our nation. In this study, when comparing the average values of fear, anxiety, and depression between two groups using data analysis, medical personnel revealed more fear, anxiety, and depression than administrative employees.

During the COVID-19 epidemic, Que et al. (2020) performed a cross-sectional online survey among healthcare professionals (which included-medical practitioners, residents, nursing staff, technical staff, and public health workers). The result obtained was that the prevalence of anxiety, depression, insomnia, and other psychological problems was found to be 46.04%, 44.37%, 28.75%, and 56.87%, respectively, among healthcare professionals, whereas the prevalence of psychological problems was found to be 60.35%, 50.82%, 62.02%, 57.54%, and 62.4%, respectively, among the general public. Frontline employees were discovered to have an increased chance of getting anxiety, sleeplessness, and other psychological issues.

Huang and Zhao (2020) had reported similar presence of psychological symptoms of anxiety, insomnia, and depression. ⁵Lai *et al.* (2020) also reported the incidence of stress in addition to anxiety, depression, and insomnia. ⁶

Because of these consistent findings, Ornell et al. (2020) proposed in their study that healthcare practitioners should receive psychological and psychiatric care.⁷

During the COVID-19 outbreak, the WHO Department of Mental Health and Substance Use has issued messages and information to support mental and psychological wellbeing in several target groups. This epidemic seems to have an impact on both physical and mental health. As a result, it has already been assumed that more psychiatric treatment is needed for all those suffering from the pandemic's psychological sequelae. As a result, diverse psychosocial illnesses must be addressed by various proposed methods such as telepsychiatric consultations, online patient counselling, and the availability of mental health education through online available reading materials.

5. CONCLUSION

The management of psychological problems faced by medical and non-medical individuals has a significant impact on the control of COVID-19 disease. The coronavirus-19 pandemic (COVID-19) has had a significant impact on India. The resulting uncertainty has been progressively putting the general public as well as healthcare professionals' mental wellbeing to the test. While the major focus is on laboratory testing, finding a cure for the disease, and preventing transmission, everyone is dealing with a variety of psychological issues as they adjust to their new lifestyles and sickness fears. The goal of the current study is to determine the influence of the pandemic situation on the mental and emotional well-being of healthcare and non-healthcare professionals. Our findings were identical to those reported by several other researchers around the world.

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Conflict of interests

There are no conflicts of interest.

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