

## Effect of COVID-19 on the Psychology of Healthcare Professionals: An Organizational Case Study

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### ABSTRACT

**Aim:** The aim of the study is to understand the psychological pattern during COVID 19 pandemic. **Methodology:** Five departments of the hospital has been studied and 10 people from each department have been interviewed. A total of 50 case studies have been done to understand the pattern of nature of psychological issues during the crisis situation. **Result:** The departmental case studies have revealed that all the departments have faced psychological issues but medical and para medical department are more psychologically taxed. **Conclusion:** Safety of family and self for contacting virus, Sleep issues, anxiety related to unknown, Mood fluctuations, Irritability in day to day life, friction with others because of poor health is prevalent in all the cases.

**Keywords:** COVID-19, Healthcare Professionals

COVID 19 was a tough period for everybody. It instilled a lot of fear in different arenas of life. The aim of this study is to understand the perspective of people from different departments in a hospital setting. Everyone reacted in a different manner and developed varied coping mechanisms to deal with psychological issues. The issue that the study is interested in, is the emotional status during the period of pandemic outburst. A lot of studies have been done on corona but it is difficult to find an organizational case study wherein a lot of people were involved in taking care of corona cases. On 11 March 2020, the World Health Organisation (WHO) declared COVID-19 a pandemic outbreak. The pandemic has impacted the physical, psychological, social and economic contexts globally. By virtue of their job profile, health care workers became the frontline soldiers in the war against the COVID virus. The war was not just fighting the deadly virus, which was taking its toll on the human race, and reduce mortality and morbidity rates but it was also a challenge for HCWs to take care of their own physical, mental and social health.

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## **Effect of COVID-19 on the Psychology of Healthcare Professionals: An Organizational Case Study**

The International Council of Nurses (ICN, 2020) reported that working with patients from a high risk of infection areas could lead to mental health problems, including stress, anxiety, and depression. A number of research studies (Chew et al. 2020, Kang et al. 2020) concluded that the additional efforts to manage the high volume of COVID-19 patients during the pandemic had considerably impacted the psychological wellbeing of HCWs. All over the world, health care workers (HCWs) have been overburdened with increased workload, since the start of pandemic. Limited resources, long shifts, sleep deficit, and direct exposure to patients are some of the common factors leading to psychological illness such as PTSD, anxiety, stress and depression (Kisely et al. 2020, Pappa et al. 2020, Lai et al. 2020). Antonijevic et al., (2020) inferred in his research that anxiety and fear are the first symptoms that appear among health workers followed by depression and post-traumatic stress symptoms which can have severe long-term consequences on the mental health of medical personnel. Preti et al., (2020) stated that during any pandemic outbreak (SARS, Ebola, Covid 19), HCWs are at risk of developing PTSD with symptoms lasting after 1-3 years in 10-40% of HCWs. Stawicki et al. (2020) reported that HCWs are more prone to psychological distress due to physical and emotional exhaustion associated with managing large number of COVID-19 patients, shortage of personal protective equipment (PPE), risk of contracting nosocomial infections, and fear of transmitting the infection to family members, feelings of being rejected by others, and social isolation. Batra et al. (2020) concluded that anxiety, depression, stress, post-traumatic stress syndrome, insomnia, psychological distress, and burnout was common in HCWs. Females, nurses, and frontline responders had reported higher anxiety and depression as compared to males, doctors, and second-line healthcare workers.

The purpose of this study is to effect of COVID-19 on the mental health of healthcare professionals.

### **REVIEW OF LITERATURE**

Sun P et al (2021) conducted a systematic analysis and concluded that the COVID-19 pandemic had caused heavy psychological impact among HCWs. The prevalence of anxiety and depression are significantly higher in female HCWs than males, also in the frontline HCWs than non-frontline HCWs.

Aragonès E et al (2022) conducted a cross-sectional study and concluded that 43.7% of HCWs tested positive for a current mental disorder. Female HCWs (suffering from previous mental disorders, greater occupational exposure to patients with COVID-19, having children or dependents) were at a higher risk of current mental disorder.

Arias-Ulloa et al (2023) concluded that psychological distress has frequently occurred among HCWs and the main contributing factors were female, nursing staff, being young, living alone/being single, history of a chronic disease or psychiatric disorder.

Sultan et al. (2022) summarised that the COVID-19 pandemic has negatively impacted the mental health of HCWs wherein anxiety accounted for 32%, depression and stress 17% each.

Cabarkapa et al (2020) suggested that HCWs are at increased risk of acquiring trauma or stress-related disorders, depression and anxiety. The most common mental challenge faced was fear of the unknown or becoming infected. Nurses esp females were at greater risk

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because of the perceived stigma from family members and society which caused stress and isolation.

Ali et al. (2020) concluded in his cohort study that psychological distress was prevalent among HCWs at acute hospital settings in the South-East of Ireland.

Sari et al (2022) concluded that covid has led to anxiety, depression and negative work results in HCWs.

Selvaraj et al. (2020) inferred that 55% of doctors reported moderate depression. Among male doctors, 52% had severe anxiety and 24% had moderate anxiety, and 30% to 44% had mild and moderate levels of stress whereas among female doctors, 68% & 48% had moderate and severe anxiety, respectively and 70% to 56% reported mild and moderate levels of stress. Also, female doctors suffered from moderate insomnia.

Bahamdan (2021) reviewed the psychological impact of the COVID-19 pandemic on healthcare workers in Saudi Arabia and concluded that more than 50% of the healthcare workers had psychological impact in terms of depression, anxiety and stress during the covid 19 outbreak.

Riaz et al. (2021) concluded that significant psychological afflictions such as depression, anxiety and stress were noticed among healthcare workers.

Batra et al. (2020) concluded that anxiety, depression, stress, post-traumatic stress syndrome, insomnia, psychological distress, and burnout was common in HCWs. Females, nurses, and frontline responders had reported higher anxiety and depression as compared to males, doctors, and second-line healthcare workers.

## METHODOLOGY

**Aim:** The issue that the study is interested in is the emotional status during the period of pandemic outburst.

**Objective:** To understand how people from different departments managed trauma during covid 19.

**Research question /hypothesis:** There will be difference in psychological perspective regarding COVID among people working in different departments of the hospitals.

An interview technique has been utilized to collect the information regarding the personal and professional life.

**Sampling:** Convenient sampling

**Sample size:** 5 departmental case studies of 10 employees each department. Therefore, a total of 50 case studies have been done to understand the psychological patterns in the different department of a multi-speciality hospital.

**Exclusion criteria:** Anyone who is not working in the hospital, patients and next of kin.

**Inclusion criteria:** Employees of the hospital

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**Tool:** Interview questionnaire on the psychological issues during COVID have been framed and the data has been collected one on one to avoid any administration and subject bias. Few questions are objective and few subjective.

**Case study of five departments** i.e. OPD, Reception, HR and accounts, housekeeping, medical and paramedical have been studied.

### ***Case study of Housekeeping department***

Housekeeping department includes department that is connected to cleaning and ancillary services. It includes aayas, cleaning personnels, and guards. A total of 10 people from department has been interviewed through structured questions. 5 were married and 5 unmarried. The interview revealed that people in cleaning services are facing stress within the hospital as well as at home. They are worried all the time. Since they wear ppe kit all the time so it's uncomfortable and pose difficulty in smooth functioning. They are in continuously in contact with the clients and it's to feed themselves they need to take the PPE kit off so most of the times they are not able to have water and food. Washing hands repeatedly is stressing and hence stress, anxiety, sleep issues, irritation and OCD like symptoms have increased in a span of 1month of working in the hospital.

Security guards and even the security officers are experiencing more stress for themselves and family members and few of them are not going home to keep their family safe. They feel irritable all the time and it gets expressed in the form of aggression as well. They feel safe and secure by wearing PPE kit although it is uncomfortable. Even washing hands is not stressful and they feel a sense of safe environment. A difference in the perception of temperament of married and unmarried is also seen. Unmarried staff are less stressed and anxious but the married people are more worried about the children and old people.

### ***Case study of HR and Accounts***

In HR and accounts departments the case studies have been collected from insurance desk, ECHS desk, account desk and HR department. Although this department stays far away from the patients still more fear about the unknown is seen in the different sections. The ECHS help desk people reveals that they fear lack of oxygen in PPE kit. There is less stress and anxiety related to corona and since they are not directly connected with the patients. The insurance counter people face a lot of stress and anxiety because they are directly dealing with the visitors and patients. They are sitting in ppe kit and do not have to take care of the patients directly but looking after them in the form of receiving and resolving issues. Hence stress is there but comparatively less in comparison to the other departments. The stress of physical threat is less but insecurity about the future is more in this department during pandemic.

### ***Case study of reception***

The reception counter people face a lot of stress and anxiety because they are directly dealing with the visitors and patients. They are sitting in ppe kit and do not have to take care of the patients directly but looking after them in the form of receiving and resolving issues. Hence stress is there but comparatively less in comparison to the other departments. They are more worried about the family members, and irritable all the time. They feel a fear of unknown and threat to life for themselves and their family members. The fear of catching infection is more in reception staff and fear is experienced less within the hospital premises but increases at home. The amount of stress, anxiety, irritability exist but is less than all the departments.

***Case study of Medical and Paramedical Department***

The Doctors, nurses and other paramedical staff like nursing assistants and ambulance have also been interviewed and It is seen that stress, irritability, anxiety, panic and fear of getting infection is far more than other departments. Some are worried about their little children and some about their old parents. Not even a single medical and para medical staff has shown less level of stress. The reason for stress is PPE kit which is uncomfortable as they feel they are not able to take care of the patients in the same as they themselves are in uncomfortable position. Long working hours where they have to stand and take care of the patients is tiresome. Because of the hectic schedule they are not able to take care of their own health and sometimes not having even water for 10 hours at a stretch. They have sleep issues, OCD like symptoms, irritability, anxiety, panic and tiredness all the time. Hospital is place which makes them scared. The medical and paramedical staff in OT have also revealed that the stress and anxiety has increased over past one month because it is difficult to maintain distance and the proximity with the patient is more.

***Case study of OPD***

Out patient department is one of the area of concern because the patient comes to the physician or specialist in the OPD. 10 case studies have been done from the OPD department. Patients are sitting in the OPD for a longer duration and this is a place where the patients are being diagnosed. It reveals that medical and paramedical department of OPD who deal with clients have safety concerns for themselves and their family. It is seen that more knowledgeable or educated the person is more is the concern for safety and hence psychological concerns are more. They have developed stress, anxiety, irritability sleep issues etc.

**DISCUSSION /OBSERVATION**

5 departments and 10 people from each department have been interviewed and a cumulative case study of each department reveals that Paramedical and medical department people are more knowledgeable about the disease and the whole process hence they are more concern about safety issues. They are more concern about the physical health and contacting the virus. A repeated concern towards safety is leading to excessive irritability, anger, stress, anxiety, sleep related issues, headache and mood disorders. OCD like symptom shave also been seen because if repeated concern about safety and handwashing. Bahamdan (2021) reviewed the psychological impact of the COVID-19 pandemic on healthcare workers in Saudi Arabia and concluded that more than 50% of the healthcare workers had psychological impact in terms of depression, anxiety and stress during the covid 19 outbreak. Repeated hand washing has become a habit and is done even when it is not required. Some are worried about their little children and some about their old parents. Not even a single medical and para medical staff has shown less level of stress. Riaz et al. (2021) concluded that significant psychological afflictions such as depression, anxiety and stress were noticed among healthcare workers. One of the reason for stress is PPE kit which is uncomfortable as they feel they are not able to take care of the patients in the same as they themselves are in uncomfortable position.

*The areas of concerns are*

- Safety of family and self
- Contacting virus
- Sleep issues
- Anxiety related to unknown

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- Mood fluctuations
- Irritability in day to day life
- Friction with others because of self poor health.

These issues are obvious in every department but more prevalent in the ones who are working closely with the patients and witnessing the clinical manifestations and deaths very closely. Paramedical and house keeping department in the mortuary has become emotionally numb because of the disposal process and interaction with the next of kins, and this numbness is happening because of the concern and associating things with themselves. Hence it is seen that the although hospital is taking care of the corona cases but the psychological symptoms are more prevalent and obvious in the hospital staff especially medical and paramedical.

This organizational case study has revealed that we need to be more concerned about the hospital staff than the other department as they have the feeling of being there at the edge of life and death. Ali et al. (2020) concluded in his cohort study that psychological distress was prevalent among HCWs at acute hospital settings in the South-East of Ireland. It is like walking on the sword. People need to be more concerned rather than critical. We all are stressed even when we are sitting in our safe spaces but what about them who are fighters and losing their lives in the process of saving others lives.

### CONCLUSION

A Case study if 5 departments (10 people each department) of the hospital have been done and it is observed that people working on direct contact with the patients, people who are more knowledgeable about the disease i. medical and para medical staff and people who are spending long time with the patients are psychologically not well. Their professional life is affecting their personal life more and hence there is lack of peace and ease in their life. Safety of family and self contacting virus, Sleep issues, Anxiety related to unknown, Mood fluctuations, Irritability in day to day life, Friction with others because of self poor health. Is prevalent in all the cases.

### Recommendations

Safety measures from the side of authorities like suitable ppe kit and others should be taken care off as this pandemic can happen at any time in our life and we should be ready for anything and everything. Coping strategies needs to be worked on so that everyone can handle the negative changes in the environment.

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### ***Conflict of Interest***

The author(s) declared no conflict of interest.

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