The Mental Health Impact On Healthcare Workers During Covid-19 Pandemic in Albania

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Abstract

Background: Covid-19 pandemic affected all the groups in our society, but one of the most affected group were the healthcare workers.

Aim: The aim of our study is to determine the mental health of Albanian healthcare workers in Tirana during COVID-19 pandemic.

Study design: This is a cross-sectional study carried out among healthcare workers living and working in Tirana, Albania.

Methods: This cross-sectional study was carried out among healthcare workers in Tirana, Albania between September 1st and October 2nd, 2021, using General Health Questionnaire-12. The GHQ-12 is a screening questionnaire used to data collection. The data was collected via Google

survey. The four-point Likert scale was adopted, with items ranging 0-3, with the score ranging from 0 to 36. The mean score of the GHQ-12 was 16,5 (p=3,01), higher than the cutoff point;12. When the participants scored more than 12, they were considered as cases. The data was analayzed using SPSS 25.

Results: Total 450 healthcare workers participated to the study. Most of the participants (84,2%) were female. Of the 450 participants 63.3% worked at the government institution. Based on the cutoff point most of the partcipantes (96.9%) were cases.

Conclusion: The COVID-19 negatively affected all the healthcare workers in our study. The

findings show that most of the participans (96.9%) were cases.

Keywords: Albania, COVID-19 pandemic, GHQ-12, Healthcare workers, Mental Health

INTRODUCTION

According to World Health Organization (WHO) a pandemic is an epidemic occurring worldwide, or over a very wide area, crossing international boundaries and usually affecting a large number of people. Covid 19 pandemic caught everyone unprepared by the beginning of 2020. The isolation of countries, cancellation of flights, the fear for the unknown, social distancing, home quarantine made the 2020 year and the months to come one of the most difficult periods of all time for the world. Everything stopped, except for the hospitals, which were busier than ever. Healthcare workers were one of the most affected groups. The increased working hours and working load caused not only physical fatigue but also an impaired mental health. (1)

Long working hours, heavy workload, and exposure to traumatic situations made them experience high levels of stress and burnout. Healthcare workers not only had to treat the patient from this very unknown infection at the time, but had also to face the fear of bringing it home to their families and beloved ones. These caused anger, frustration and guilt. The stressing environment with the very strict and isolated social life, non-adequate staffing levels at the beginning of pandemic, caused healthcare workers to experience burnout syndrome, depression and sleep deprivation. (2)

There has been an increased prevalence of depression and anxiety disorders, suicide risk, post- traumatic stress symptoms (PTSS), and insomnia among healthcare workers around the world. There are still not enough sources and studies about the effects of pandemic on population and there are still yet to learn, but we can detect some of the consequences in the mental health. (3)

The difficulties in coping with stress and problems with mental health during the pandemic are global issues. Still, our study brought into focus the Albanian Healthcare workers, as not so many studies on the pandemic in Albania can be found in the literature review. Our study aims to determine the mental health of Albanian healthcare workers in Tirana during the COVID-19 pandemic.

MATERIALS AND METHOD

The cross-sectional study was carried out among healthcare workers in Tirana, the capital city of Albania.

The questionnaire was held from September 1, 2021, to October 2, and it was sent to the participants through Google survey after it was translated from the original language (English) to Albanian. Participants who were included were the ones that actively worked during the pandemic in hospitals or clinics. We interviewed only healthcare workers who worked in Tirana during the COVID-19 pandemic.

The survey consists of two parts; demographic questions (7 questions; including gender, age, marital status, education background, profession, working place, and whether they worked in the pandemic frontline or not), and the second part was the general health questionnaire-12 (GHQ-

12). The GHQ-12 screening questionnaire helps assess participants' mental well-being (4). GHQ-12 provides a more general assessment of mental health.

We also asked whether the participants ever thought of resigning from their job or not. GHQ-12 questionnaire includes 12 positively worded questions and seven negatively worded questions. The four-point Likert scale was adopted, with items ranging from 0-3, with a score of 0-36. 0

indicated 'Not at all,' one indicated 'Seldom,' two indicated 'Usual,' and 3 indicated More than usual for the negatively worded questions (table 1). And it was the reverse for the positively worded questions. The cutoff point was 12, with results higher than this value considered cases.

The ethical approval was obtained from Ankara Yıldırım Beyazıt University Ethics Committee, and the respective Albanian health institutions confirmed it.

Table 1. General Health Questionnaire-12 Responses (n=450)

GHQ-12 items	Mean	SD	Response frequencies				
			0	1	2	3	
1. Able to	1,75	0,870	22,40	36,20	35,30	6	
concentrate							
2. Lost much	1,48	0,977	21,60	22,70	42,20	13,60	
sleep							
3. Playing a	2,41	0,759	54,90	33,80	8,70	2,70	
useful part							
4. Capable of	1,91	0,795	22,90	49,30	23,30	4,40	
making decisions							
5. Under stress	1,77	0,893	12,40	16,70	52,40	18,40	
6. Could not	1,19	0,915	28,70	28,70	37,30	5,30	
overcome							
difficulties							
7. Enjoy your	0,65	0,752	3,10	7,60	40,90	48,40	
day-to-day							
activities							
8. Face up to	1,56	0,714	6,20	50	36,90	6,90	
problems							
9. Feeling	1,53	0,951	19,10	22	45,30	13,60	
unhappy and							
depressed							
10. Losing	0,64	0,903	61,80	16,20	18,40	3,60	
confidence							
11. Thinking of	0,28	0,693	83,30	6,90	7,80	2	
self as worthless							
12. Feeling	1,41	0,788	6,90	39,10	42	12	
reasonably happy							

RESULTS

A total of 450 healthcare workers participated in the study. Most of the participants (84,2%) were female. Of the 450 participants, 63.3% worked at a government institution. Two third (66,4%) of them were married. Two hundred eighty participants (62,2%) were university graduates, 164 were postgraduate, and 6 were high school graduates (table 2).

Table 2. Sociodemographic characteristics of healthcare workers included in the study

Variables	HEALTHY		CASES			
	N	%	N	%	p value	
Gender						
Male	3	4,20	68	95,80	0,556	
Female	11	2,90	368	97,10	0,550	
Age						
20-29	5	3,80	125	96,20		
30-39	4	2,80	139	97,20	0,93	
40-49	3	3,30	89	96,70	0,73	
50 and above	2	2,40	83	97,60		
Marrital status	•					
Married	9	3	290	97	0,862	
Single	5	3,30	146	96,70	0,002	
Education						
University	10	3,60	270	96,40		
Post university studies	4	2,40	160	97,60	0,51	
Profession						
Doctor	4	2,10	183	97,90	0,399	
Nurse	4	4,20	91	95,80		
Dentists	0	0	11	100		
Physiotherapists	0	0	11	100		

Laborants	2	11,10	16	88,90		
Pharmacists	4	3,70	105	96,30		
Others	0	0	21	100		
Workplace						
Private	5	3	160	97,70	0,94	
Government	9	3,20	276	96,80	0,24	
First line in covid						
yes	7	2,30	293	97,70	0,179	
no	7	4,70	143	95,30	0,179	
Thoughts of resign						
Yes	3	3,30	88	96,70	0,909	
No	11	3,10	348	96,90	0,202	

Most participants were doctors (41,6%), followed by nurses (21,1%).

Most of our study's healthcare workers (66,7%) worked in the COVID-19 first line. The majority (79,8%) of the participants did not think of resigning during the pandemic.

The mean score of the GHQ-12 was 16,5 (p=3,01), higher than the cutoff point; of 12.

The mean score of question three was 2,41, the highest compared to the other items, indicating social dysfunction.

According to the results of GHQ-12, 96,9% of the participants were affected by the pandemic, and just 3,1% were healthy during this period.

Among people being affected by the Covid-19 pandemic, more females were considered as cases (97,1%) compared to males (95,8%) (p>0,556) (table 3).

Table 3. Incidence of mental health problems among healthcare workers participanting in the study

Variables	HEALTHY		CASES			
	N	%	N	%	p value	
Gender						
Male	3	4,20	68	95,80	0,556	
Female	11	2,90	368	97,10	0,550	
Age						
20-29	5	3,80	125	96,20	0,93	
30-39	4	2,80	139	97,20		
40-49	3	3,30	89	96,70	0,93	
50 and above	2	2,40	83	97,60		
Marrital status	I					
Married	9	3	290	97	0.962	
Single	5	3,30	146	96,70	0,862	
Education						
University	10	3,60	270	96,40		
Post					0.51	
university	4	2,40	160	97,60	0,51	
studies						
Profession						
Doctor	4	2,10	183	97,90		
Nurse	4	4,20	91	95,80		
Dentists	0	0	11	100		
Physiotherapists	0	0	11	100	0,399	
Laborants	2	11,10	16	88,90		
Pharmacists	4	3,70	105	96,30		
Others	0	0	21	100		
Workplace						
Private	5	3	160	97,70	0,94	
Government	9	3,20	276	96,80		
First line in covid	<u> </u> !					
yes	7	2,30	293	97,70	0.170	
no	7	4,70	143	95,30	0,179	
Thoughts of resigning						
Yes	3	3,30	88	96,70	0,909	
No	11	3,10	348	96,90		

97% of the married people and 96,7% of single participants were affected by the pandemic (p>0,05). Similarly, 96,7% of participants having postgraduate studies were cases in our study (p>0,05). Among professionals, doctors, physiotherapists, and dentists were the most affected by the pandemic (respectively, 97,8%, 100%, 100%) (p>0,05). Almost all the participants working in private and government hospitals were affected mentally during the pandemic (respectively, 97,7% and 96,8%). Also, virtually all the health workers working in the first line (97,7%) and thinking of resigning (96,7%) were cases during the Covid-19 pandemic (p>0,05). Statistically, there weren't significant between all sociodemographic variables and mental health scores among the healthcare workers in the study.

DISCUSSION

Health-related problems, work-related stress, and fear of losing relatives or family members are critical factors affecting mental issues during the latest pandemic. Studies related to the mental health problems of HCWs are not very common in the literature. While many studies suggest an increase in mental disorder incidence, other studies show a lowering of depression and anxiety (5). Simirlarly, Lin CY et al. (6) found out that 47.8% of the hospital staff members showed psychiatric symptoms one month after the end of SARS outbreak. Also, HCW Covid survivors had a six-fold higher risk for psychiatric symptoms than non-HCW survivors (7). Also Denning et al.

(8) reported that 67% of the HCWs were at high risk of burnout. Doctors had a rate of 31.5% of burnout risk in the UK (9). These high rates of burnout among healthcare workers show the adverse effects of the COVID pandemic or the changes resulting from the pandemic. Also, clinical roles have a higher burnout risk than nonclinical roles (8). J. Alonso et al. (10) detected a mental disorder incidence of 1 in 5 among HCWs in Spain. According to Ricci Cabello et al. (11), HCW reported an anxiety prevalence of 45%, 38% depression, and 31% distress during the Covid-19 pandemic. Krausse et al., in their study on Sleep, deprived human brain, claimed that the main factors of psychological distress are sleep factors and insomnia (12). All these factors together made it harder for healthcare workers to stay mentally healthy with all the negativelyaffecting factors. 96,90% of the healthcare workers included in our study were affected by the COVID-19 pandemic.

These studies are critical to support and encourage the healthcare workers who worked the most and the hardest during the pandemic and were at a higher risk of mental breakdown. The study was only carried out in Tirana, the capital of Albania, so the findings may not represent all the healthcare workers during the pandemic in the country.

According to the fact that healthcare workers are on the front line of pandemics, they may experience difficulties in managing the needs and expectations of their patients and their families. WHO, in their pandemic situation report has

stated that, it might be normal, due to the circumstances, for healthcare workers to feel the psychological consequences of the pandemic (13).

CONCLUSION

This study included 450 healthcare workers in Tirana, Albania. The pandemic negatively affected the mental health of our study's healthcare workers (96.9%). People should be aware of the importance of mental health and its effect on life quality. Also, the authorities should take precautions to relieve the long stressful working hours and help the patients and the HCW.

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Conflict of Interest Statement: The authors declare that they have no conflict of interest.

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