

COVID-19 and its Effect on Psychological Wellbeing on Frontline Healthcare Workers: A Review Study

ABSTRACT

COVID-19 has wrought havoc on people's and countries' economies, social structures, and mental health. WHO justifiably labelled the COVID-19 epidemic a pandemic on March 12, 2020. Global epidemics of communicable diseases have both micro- and macro-effects on the emotional maturity of healthcare workers (HCWs). HCWs experienced higher levels of PTSD symptoms, despondency, and anxiety than non-HCWs during COVID-19 and previous global health catastrophes like SARS and MERS, and a significant percentage of HCWs who treated COVID-19 patients experienced depression, panic, sleeplessness, and discomfort. Burnout is common among physicians, according to recent research, and it has an impact on their health and that of their patients. These observations have sparked efforts to teach endurance to doctors, but they have been hampered by a scarcity of funds improper policy making.

Keywords: COVID-19, healthcare workers, burnout, psychological wellbeing

INTRODUCTION

Any country's healthcare providers are essential resources. Their security is critical not just for the patient's ongoing and safe care, but also for preventing disease spread. Due of the potential of infection with Covid-19, health workers in general were subjected to significant stress, worry, sadness, and sleeplessness with the start of Covid-19 (Liu Q et al, 2020). COVID-19 has caused significant health risks to worldwide public health and has drawn as a health crisis of global concern, it has attracted international attention. (Morawska L et al., 2020). Because of the rising incidence of this condition and the lengthening of the disease process around the world, particularly in developing countries, medical staff have been overworked, resulting in excess admission and a shortage of medical personnel in many medical centers

Front-line health workers were under a considerable lot of psychosomatic stress during the COVID-19 pandemic. COVID-19 front-line medical staff grow agitated as a result of these circumstances, mentally and psychologically weary. Fatigue is a psychological disorder that is linked to a variety of factors; severe lack of energy, a general feeling of weakness, irritation, and a lack of motivation and activity (Lee YW, 2020)). Working hours are long. Changes in tasks, as well as demanding labor, can contribute to significant weariness and weakness. Health workers in such a physically and mentally demanding environment frequently face exhaustion, burnout, and mental health issues emotional separation and exhaustion (McAlonan GM et al, 2007)

Health workers apprehended contact transmission and the fear of transmitting it to their families in the face of this new disease and its unforeseen hazards, but they rose to the challenge by taking responsibility, focusing on their jobs, and displaying a culture of unity and professionalism. Patients with COVID-19 have benefited from the dedication of health care personnel, who have endeavored to deliver the best care to patients in difficult conditions.

Extreme care were taken regarding research quality and number to gain a better understanding of the volume, source, methodological status, this study was performed as an adjunct to previous works.

A review paper's research technique should ideally be based on content analysis and description, which includes a four-step procedure that includes a collection of papers, descriptive analysis, category selection, and material evaluation. This work is primarily based on

these four processes for conducting a literature review, analysing it, and presenting it (Mayring, 2014).

METHODOLOGY

To review published research papers, we selected Medline, PsycINFO, and PubMed, Embase, Cochrane, Clinical Key, etc., with the websites of different medical organizations like Royal Society of Medicine, as well as YouGov website.

We used combinations of these database's-controlled phrases: "doctor," "wellbeing," "burnout," "COVID-19," and "SARS-CoV-2."

All searches took place were limited to the year 2020-2021, with its own set of search phrases like COVID-19, doctor, health care workers etc. Only articles written in English were selected from countries affected with pandemic

A total of 94 references were found after filtering the results to only include English-language publications. For further research, we looked at citations in both included as well discarded papers, as well as a quasi-Google Scholar search. There were 131 separate references for screening once those selections were added and duplicates were deleted.

This study is expected to give future researchers a direction so that they can conduct research using the hypothetical model proposed in this paper and present statistical results.

Because there are so many patients, the medical staff had to work extra shifts and at max potential during the COVID-19 outbreak. Furthermore, employees were concerned about falling ill and infecting their family members. All of these factors have the potential to intensify the conflict between roleplaying and personal difficulties. All health-care providers were put under increased strain as a result of the Covid-19 disease outbreak (Adams G et al, 2020). As a result of this strain, hospital personnel who are directly connected with Covid-19 patients reported a lower quality of life, as did healthcare professionals who are indirectly confronted with additional care facilities for non-Covid-19 patients (Sasangohar F et al,2020)

The current tough and stressful working conditions for medical personnel have been adjusted to some extent as a result of community empathy and unity, as well as community appreciation of medical staff through various methods, allowing them to care for patients and carry out their responsibilities with more inspiration and vitality (Hou T et al, 2020). Furthermore, services such as music therapy, counselling, prompt wage payment, and people and authorities boosting

job passion and morale can serve to improve working conditions and promote employee morale. Other organisational options, such as allocating more resources (Lee YW et al, 2013)

Healthcare practitioners should use self-management and confidence reinforcement to deal with the Covid19 problem. Health care personnel use this one-of-a-kind experience to sublimate because of Iran's cultural backdrop, which places a heavy emphasis on generosity, self-sacrifice, and other values. In the face of adversity, health care practitioners from all cultures have shown perseverance and a sense of professional sacrifice, according to studies (Liu Q et al, 2020). In the face of a range of issues. Healthcare practitioners were very resilient. They used a variety of stress-reduction techniques and support networks because they realised they had to be strong and focused on their mission to save lives. Furthermore, the Ministry of Health's efforts and support of health-care employees, such as providing enough protection and support facilities, can serve to boost staff morale and ability to a degree.

To protect their well-being, healthcare practitioners must have total support. All health-care workers must receive regular and extensive training to improve their availability and efficacy in crisis situation. Many healthcare professionals from other units are unfamiliar with the clinical aspects of nosocomial infection critical care.

Collaboration is one of the most critical tasks for delivering efficient and high-quality care. Reciprocal respect for employees, as well as open communication, the definition of personal and team roles, as well as standards, and a group identity, should all be encouraged. Hospitals must provide a comfortable working condition, appropriate safety equipment, and continual training, control, and monitoring to aid health care staff in reducing uncertainty and fear.. Their social development should be monitored regularly and they should receive expert psychiatric counselling and therapy. Improving work life quality can benefit and protect employees' mental stability (Permarupan PY, et al,2020).

RESULT

In this review, we looked at 26 studies ultimately after applying all exclusion criterion. The present literature on COVID-19's impact on HCW wellbeing revealed several patterns. Most researches looked at COVID-19's psychological effect, psychological wellbeing etc. and few investigated burnout and sleep quality. Only a small percentage of the studies used qualitative research methods. An overview of the articles is provided herewith in tabulated form.

PSYCHOLOGICAL WELLBEING

Happiness or psychological sense of well-being emerge as the most important meanings when an individual assigns distinct meaning to the conceptions of challenges faced by him in life (Bradburn & Caplovitz, 1965)

The degree to which an individual has more positive interventions than negative interventions determine his or her psychological well-being (Bradburn & Caplovitz, 1965).

Psychologists who support the hedonic viewpoint believe that happiness is a combination of both physical and mental fulfilment (Kubovy, 1999).

Diener and Lucas (1999) refined the notion, arguing that happiness cannot be limited solely to physical hedonism.

When a person's good feelings outnumber their negative emotions, they are said to be in a state of subjective well-being (Diener, 2000). Subjective well-being, such as self-perceived happiness and contentment with one's life, as well as objective well-being metrics, can be used to assess the quality of one's work life (Myers, 2013). In the years since, this larger perspective has been further investigated, and a broader definition of happiness has arisen (Ryan & Deci, 2000). When happiness is joined with other good feelings, it produces subjective well-being (Sagiv, Roccas, & Hazan, 2004).

RESEARCH GAP

The reviews conducted so far provides a platform to frame a conceptual network regarding solution to the problem health workers are facing at present but to complement the study it is advisable that empirical study be done to assess the effect of psychological well-being on doctor and other health-care employees' life satisfaction during COVID-19.

DISCUSSIONS

Because of number of patients, the medical staff had to work extra shifts and at max potential during the COVID-19 outbreak. Furthermore, employees were concerned about falling ill and infecting their family members. All of these factors have the potential to intensify the conflict between roleplaying and personal difficulties. All health-care providers were put under increased strain as a result of the Covid-19 disease outbreak (Adams G et al, 2020). As a result of this strain, hospital personnel involved in COVID care, reported a lower quality of life, as well as more concern and weariness (Sasangohar F et al,2020)

The prevailing situation improved as a result of community empathy and unity, as well as community appreciation of medical staff through various methods, allowing them to carry out responsibilities with better inspiration and vitality (Hou T et al, 2020). Furthermore, services such as counselling, prompt wage payment, and people and authorities boosting job passion and morale can serve to promote staff morale. Other organizational options, such as allocating more resources (Lee YW et al, 2013)

Healthcare practitioners should use confidence reinforcement to deal with the Covid19 problem. Health care personnel use this one-of-a-kind experience to sublimate because of cultural backdrop, which places a heavy emphasis on generosity, self-sacrifice, and other values. In the face of adversity, health care practitioners from all cultures have shown perseverance and a sense of professional sacrifice, according to studies (Liu Q et al, 2020).

To protect their well-being, healthcare practitioners must have total support. All health-care workers must receive regular and extensive training to improve their availability and efficacy in crisis situation. Many healthcare professionals from other units are unfamiliar with the clinical aspects of nosocomial infection critical care. When health-care systems are unprepared to deal with the spread of an infectious illness, training and communication adjustments are essential.

Promoting collaboration is most critical tasks for delivering efficient and high-quality care. Reciprocal respect for employees, as well as open communication, the definition of personal and team roles, as well as standards, and a group identity, should all be encouraged. Hospitals must provide a comfortable working condition, appropriate safety equipment, and continual training, control, and monitoring to aid health care staff in reducing uncertainty. Improving the quality of work life can benefit and protect employees' psychological well-being (Permarupan PY, et al,2020).

ANALYSIS

According to this study, there is a shortage of doctors while handling a number of patients infected with the coronavirus. Furthermore, the gravity of the situation with COVID-19, the issue isn't merely a lack of trained doctors to provide complete treatment to patients in isolation or intensive care units. In fact, this issue is fairly clear when it comes to different types of emergencies and disasters. Furthermore, the issue becomes apparent in everyday life (Legido-Quigley H, et al,2020).

A suggested plan for increasing COVID-19 personnel would include an appeal for all experts — senior or active doctors with necessary knowledge and dispositions to take responsibility for patient care (Valdez CD, et al,2013). Hospitals will be to admit more patients once physicians are available.

Additionally, having on board health care providers who are capable of dealing with emergencies and disasters, and devising long-term plan to manage these risks could be advantageous. Many countries' healthcare systems are currently experiencing a shortage of nursing experts in all disciplines, notably emergency and critical care nursing (Arabi YM et al,,2020). If the percentage of patients surpasses the emergency plan's capacity, it may be good to train new workers and caregivers (Sprung CLet al, 2020).

Personal protective equipment (PPE) and intensive care facilities are two more key resources that are in short supply and could put healthcare providers in danger [Gharebaghi et al, 2020]. As a result, the medical authors suggest making the right decisions during triage, making a decision which patients can be moved from critical care units to make space for critical care patients, (Suter P et al,2020).

RECOMMENDATION AND CONCLUSION

This analysis was a comprehensive review with stringent specific value of information included in the article researched since there were few works on this issue in the articles indexed to publications on this issue only commencing in 2020. As a result, additional high-quality and comprehensive reviews, such as exploratory, tentative, and peer-reviewed, may be published, which could be beneficial given that the current research does not meet the standards for systematic reviews.

A global disaster plan should be in place to guide medics before, during, and after any health-related crises, according to experts. It is also recommended that a strategy for engaging in healthcare forces be devised, as physicians make up the largest healthcare group and are incredibly significant healthcare professionals who do highly particular and critical jobs. Furthermore, we must ensure that medical personnel respond quickly to the pandemic and that all medical supplies, including such protective gear (PPE), are readily available to help keep health professionals safe. Finally, further research on caregivers' experiences is needed, as well as research on pandemic situations in general, including preparedness, responsiveness, and recovery.

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