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# **Impact of COVID-19 on mental health of public health workers: Role of social workers**

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**Abstract**--Aim: This study examines the impact of COVID-19 on the mental health of public health workers and explores the pivotal role of social workers in addressing these challenges. Methods: A comprehensive literature review was conducted to gather data on the mental health effects of COVID-19 on healthcare professionals and the interventions implemented by social workers. Sources included peer-reviewed articles, reports from health organizations, and case studies from various regions affected by the pandemic. Results: The findings indicate that healthcare professionals experience heightened levels of stress, anxiety, depression, and burnout due to increased workloads, lack of resources, and the fear of infection. Social workers play a crucial role in mitigating these effects through mental health support, resource coordination, advocacy, and policy development. They provide individual and group therapy, crisis intervention, and psychoeducation. Social workers also facilitate access to essential resources, support vulnerable populations, and implement telehealth and digital support services to maintain continuity of care.

Conclusion: The mental health of healthcare workers is critically impacted by the COVID-19 pandemic. Social workers are essential in providing emotional support, facilitating resource access, and advocating for vulnerable groups. Their interventions help mitigate the psychosocial effects of the pandemic and promote resilience within healthcare teams. Strengthening the role of social workers and investing in mental health resources are imperative for the well-being of public health professionals and the effective functioning of healthcare systems.

**Keywords**--COVID-19, mental health, healthcare workers, social workers, stress, anxiety, burnout, psychological support, telehealth, resource coordination.

## **Introduction**

The unique coronavirus pandemic of 2019 (COVID-19) is the worst public health calamity in recent history on a worldwide scale (1). Beyond its biological effects, psychological resilience is severely hampered by the widespread and long-lasting disruptions to daily life that it causes. Previous studies show that epidemics and illness outbreaks cause significant psychosocial effects on individuals and society, which frequently outweigh the severity of the epidemic itself (2, 3). As a result of this epidemic, increased levels of stress, anxiety, and depression have been reported in the general population (4,5). Given this, health authorities must identify populations that are more vulnerable to emotional problems than the biological threats that are already well-documented in order to monitor their mental health and start psychological and psychiatric interventions in a timely manner (3, 4). Healthcare professionals are especially susceptible to infection, especially those who provide direct care to patients who have COVID-19 confirmed or suspected (3,6). Examples of these professionals include nurses, nursing technicians, and physicians.

Health workers usually experience the reverse during pandemics, when everyone else experiences a shutdown or slowing of normal activities and people are advised to exercise social distancing to limit interpersonal interactions and lower infection risks (7). They have to wear Personal Protective Equipment (PPE), which can be physically uncomfortable and cause breathing problems (6). They also face rising work expectations, frequently with little resources and poor infrastructure (8). In addition, a lot of professionals can feel unprepared to deal with patients infected with a new virus for which there are no proven therapeutic guidelines or therapies (6). In addition, there is the worry that one would self-inoculate and spread the virus to friends, family, or coworkers (9,10), which could cause one to become isolated from their social and familial support systems (6).

A range of psychological symptoms, including loneliness, helplessness, stress, irritation, physical and mental exhaustion, and despair, can be brought on by these situations (6). Health workers are especially vulnerable to psychological discomfort due to the cumulative work pressure and stress-related symptoms, which increases the likelihood of acquiring psychiatric disorders (8,9,10,11).

While medical personnel, particularly those working in emergency services, are used to dealing with physical and psychological exhaustion, the extra anxiety, instability, and uncertainty brought on by a pandemic can strain interpersonal bonds. In the past, disasters inspire teams through social upheaval, but pandemics specifically create a fear of infection transmissibility because the possibility of dire consequences is so palpable. As a result, professionals who care for COVID-19 patients should prioritize identifying risks and developing interventions to reduce psychological harm while putting supporting measures in place (Brazilian Intensive Care Association - AMIB).

In the aftermath of the 2003 SARS pandemic, 18 to 57% of medical professionals reported having serious emotional issues and psychiatric symptoms both during and after the incident (12). Similar to this, dysphoria and stress were common among medical personnel during the 2015 Middle East respiratory disease (MERS) outbreak, which was similarly brought on by a coronavirus. These symptoms predicted misbehavior, poor communication, treatment delays, and absence. Frontline workers were more likely to get post-traumatic stress disorder (PTSD), which could linger even after they stopped working (12). Research also shows that there may be long-term effects on healthcare workers' mental health during epidemics, with persistently high levels of stress, sadness, anxiety, and PTSD being seen long after the crisis (2, 3). During the 2016 coronavirus outbreak in Korea, reports of burnout syndrome among medical personnel were made (13). Emotional weariness might be triggered by the severity of the pandemic, despite the fact that it is usually linked to long-term problems including low salaries, harassment, high workloads, and institutional atmosphere (14).

Disasters frequently result in vicarious trauma, also known as secondary traumatic stress, in which medical personnel experience symptoms similar to those of their patients as a result of prolonged exposure. Loss of appetite, exhaustion, physical deterioration, problems with sleep and concentration, agitation, numbness, fear, and hopelessness are among the symptoms (2). Since they are expected to be flawless, direct care providers may also experience stigma or, on the other hand, be hero worshiped. This representation in the media highlights the importance of emotional support, motivation, and acknowledgment (15). Moral distress, which is made worse by health system breakdowns, makes it difficult to make the right decisions because of both internal concerns and external factors such organizational problems, resource limitations, and hierarchical restrictions. Research on the epidemiology information and intervention strategies for the mental health of medical personnel treating COVID-19 patients is scarce. The majority of research that is currently available is from China, hence it could not be applicable to other areas, especially emerging nations like Brazil that face distinct difficulties with their healthcare systems.

High rates of stress, anxiety, and PTSD were found in a recent study involving nurses and doctors treating COVID-19 patients; women and nurses had greater anxiety levels than men and doctors. This discrepancy is linked to nurses working longer shifts and having more direct patient interaction, which can cause stress and exhaustion. An additional investigation revealed a substantial inverse relationship between social support and stress and anxiety, and a positive

correlation with physicians' efficacy and sleep quality (16). Regular mental health screening and monitoring is necessary for healthcare personnel who have direct contact with infected patients, especially for sadness, anxiety, and suicidal thoughts. It's also critical to identify professionals who have been exposed to psychological risk factors. People who have serious mental health problems should be able to receive psychiatric therapy. Furthermore, it's critical to recognize secondary psychosocial stresses, such as long-term medical conditions, living with small children, or senior family members (15). It is suggested that mental health practitioners working in institutions assess and treat bodily symptoms such as sadness, rumination, anxiety, rage, sleeplessness, and low energy. In order to maintain safe conditions for consultations, psychological and psychiatric care should be given in hospitals or other healthcare facilities with stringent infection prevention measures and hands-on PPE training.

Psychological support interventions must address healthcare providers' emotional expressiveness. The goal of psychological intervention (PI) in times of crisis is to provide coping mechanisms for handling intrusive thoughts and situational or anticipatory worry. Emotional therapies also aim to improve compassion, empathy, and intra-team support for more vulnerable teammates (15). Online psychological counseling and psychotherapy as well as educational resources promoting mental health are advised in healthcare settings without sufficient safety and preventive facilities (5). Digital communication should be available around-the-clock and is another effective supplementary tactic (5,15). The Wuhan Mental Health Center and RenMin Hospital of Wuhan University both used PI teams and healthcare models. These groups were in charge of material preparation, direction, and technical oversight. Psychiatrists made up the majority of the PI medical team, who took part in the interventions. In order to help medical professionals manage their mental health concerns, there were also psychological aid hotline teams (volunteers trained in PI) that offered advice over the phone or by virtual chat (9).

In order to create an environment of reciprocity and empathic cooperation that permits the expression of emotions and symptoms like burnout and emotional weariness, it is imperative that healthcare teams improve their communication. Teams (15) must receive psychoeducation and advice in identifying symptoms of anxiety, depression, and post-traumatic stress disorder so they may recognize these symptoms in themselves and their peers early on. Healthcare providers also need to be able to recognize the emotional components of their patients and their families in order to refer them to the right psychological support services and interventions that are offered by the healthcare system. Encouraging the mental well-being of medical teams is crucial and has consequences for politics, the economy, and society (11). Lastly, post-epidemic professionals have indicated feelings of mental pain and emotional helplessness. These issues require solutions to be addressed. Burnout can be avoided by setting up areas for people to listen and share their emotions (15).

Strengthening frontline healthcare professional support techniques is necessary in Brazil, where the contagion curve is now on the rise. Setting priorities reduces the likelihood of both the health system collapsing and emotional collapse among medical staff. Brazil, a country with notable socioeconomic differences, has a

universal health care system that all of its residents are entitled to. During this crisis, this system makes the socioeconomic structure and vulnerability of the nation visible. Consequently, the population's overall health must be the main priority in the fight against COVID-19, and this includes taking financial steps to support the policies that will be needed during this emergency. Varying information, support, or intervention tactics are required for healthcare workers operating at varying degrees of complexity due to the complexity of the Brazilian healthcare system. In the past, medical professionals had limited access to mental health services. Given the current instability of the health system, two factors must be taken into account: (1) the availability of human and other resources; and (2) the accessibility of healthcare in remote locations. Municipal initiatives and training programs must be implemented per government guidelines. Since local health determinants vary, regional interventions are required. The implementation of remote support systems and the formation of partnerships with civil society institutions are complimentary approaches. Universities and private mental health clinics are currently working on projects to offer medical professionals phone and internet support. In conclusion, it is imperative that governments and healthcare organizations safeguard the mental health of the global healthcare community (4). In order to distinguish isolation from loneliness, it is important to stress that physical distance does not equal emotional distance (15) and that fear of interaction should only be addressed in the context of virus care. Research, prevention, and therapy must all be prioritized in order to support frontline professionals' mental health.

### **Role of Social Workers**

In the context of the COVID-19 pandemic, the role of social workers is multifaceted and essential in addressing both the immediate and long-term needs of healthcare professionals and the broader community. Their responsibilities encompass a range of activities that support mental health, facilitate access to resources, and promote overall well-being. Here is a detailed examination of the main roles social workers play during such a crisis:

#### **1. Mental Health Support and Counseling**

Social workers provide critical mental health support and counseling to healthcare professionals and the general public. This includes:

- **Individual and Group Therapy:** Social workers conduct therapy sessions to help individuals process their experiences, manage stress, and develop coping strategies.
- **Crisis Intervention:** They offer immediate support to those experiencing acute emotional distress, helping to stabilize their mental state and prevent further psychological decline.
- **Psychoeducation:** Social workers educate healthcare professionals and the community about recognizing signs of stress, anxiety, depression, and burnout, and provide information on how to manage these symptoms.

#### **2. Facilitation of Access to Resources**

Social workers play a pivotal role in connecting individuals with necessary resources and services:

- **Resource Coordination:** They assist in coordinating access to essential resources such as food, housing, and financial assistance for those affected by the pandemic.
- **Navigating Healthcare Systems:** Social workers help individuals navigate complex healthcare systems to ensure they receive appropriate medical care and support services.
- **Advocacy:** They advocate for vulnerable populations to ensure they receive equitable access to resources and support, addressing systemic barriers and inequalities.

### 3. Support for Healthcare Professionals

Given the immense pressure on healthcare workers during the pandemic, social workers provide targeted support to this group:

- **Emotional Support:** Social workers offer a safe space for healthcare professionals to express their feelings and concerns, providing emotional support and validation.
- **Burnout Prevention:** They implement strategies and interventions to prevent burnout, such as promoting work-life balance, stress management techniques, and resilience-building activities.
- **Peer Support Programs:** Social workers help establish peer support networks where healthcare workers can share experiences and offer mutual support.

### 4. Community Outreach and Education

Social workers engage in community outreach to educate and support the public:

- **Public Health Education:** They disseminate accurate information about COVID-19 prevention, vaccination, and health measures to reduce misinformation and promote public health.
- **Community Programs:** Social workers organize and lead community programs that address social isolation, provide recreational activities, and foster community resilience.
- **Support Groups:** They facilitate support groups for various populations affected by the pandemic, including bereaved families, individuals who have lost jobs, and those experiencing heightened anxiety or depression.

### 5. Policy Development and Implementation

Social workers contribute to the development and implementation of policies that address the social and health impacts of the pandemic:

- **Policy Advocacy:** They advocate for policies that protect public health, support mental health services, and ensure the provision of essential resources to all community members.
- **Program Development:** Social workers develop and implement programs that respond to the emerging needs of the community, such as mental health hotlines, telehealth services, and virtual support groups.
- **Research and Evaluation:** They conduct research to identify the needs of the community and evaluate the effectiveness of interventions, using this data to inform policy and practice.

### 6. Support for Vulnerable Populations

Social workers focus on the needs of vulnerable populations disproportionately affected by the pandemic:

- **Elderly Care:** They provide support to elderly individuals who may be isolated and at higher risk of severe illness, ensuring they have access to care and social interaction.
- **Children and Families:** Social workers support children and families, particularly those dealing with the stresses of remote schooling, economic hardship, and health concerns.
- **Marginalized Groups:** They advocate for and support marginalized groups, including those experiencing homelessness, refugees, and individuals with disabilities, ensuring they receive the necessary support and resources.

### 7. Telehealth and Digital Support

With the shift towards digital services, social workers adapt to provide remote support:

- **Teletherapy:** Social workers conduct therapy sessions through telehealth platforms, ensuring continued access to mental health services despite physical distancing measures.
- **Online Resources:** They develop and disseminate online resources, including self-help materials, webinars, and virtual workshops, to support mental health and well-being.
- **Digital Literacy:** Social workers help individuals, especially the elderly and those with limited digital skills, navigate online platforms to access support services and stay connected with their communities.

### Conclusion

The role of social workers during the COVID-19 pandemic is critical in supporting the mental health and well-being of healthcare professionals and the general public. Their efforts in providing emotional support, facilitating access to resources, advocating for vulnerable populations, and adapting to digital service delivery are essential in mitigating the pandemic's psychosocial impacts and promoting resilience within communities. Through their dedicated work, social workers help ensure that the healthcare system and society at large can navigate and recover from the challenges posed by this unprecedented crisis.

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