

# Challenges for Women Health-Care Workers During the COVID-19 Pandemic

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## ABSTRACT:

**Objective:** Coronavirus disease (COVID-19) pandemic has spread globally. Malaysia is not spared from the impact of this health catastrophe; and has its own share of morbidity and mortality from the disease with the world population. As of 15th December 2020, Malaysia has recorded 86,618 cases of COVID-19 and had up to 422 deaths. Frontline healthcare workers (HCWs) faced a substantially higher risk of infection due to risk of COVID-19 exposure. In addition to that, juggling work and motherhood responsibilities is always a challenge for women healthcare workers. This case series illustrates some factors that contribute to the psychological distress of women HCWs during the pandemic.

**Keywords:** Women Healthcare Workers, Depression, Anxiety, Stress, COVID-19.

## Introduction

In Malaysia, women predominate in most categories of healthcare providers. Nurses, for example, are almost entirely women<sup>1</sup>. Prior to the pandemic, there were already plenty of struggles faced by women healthcare workers (HCW) - shift work, long and odd hours of working and understaffing - are known challenges in the medical service. In addition to that, unfortunately, women are generally more vulnerable for psychological breakdown as compared to men.

The pandemic had resulted in additional workload among HCW, without exception to Hospital Angkatan Tentera Tuanku Mizan (HAT TM). In addition to COVID-19 screening exercise, HAT TM is also designated to receive backlog patients from other Covid-gazetted institutions. Fear of contracting the virus or infecting family members, uncertainties, frequent changing of standard operational procedure, sudden shortage of staff due to mass quarantine and stigma could cause a wide range of psychological problems among HCW<sup>2</sup>.

Anticipating this, the Psychological First Aids (PFA) team was set-up at HAT TM to provide psychological support to all staff during this challenging situation. Various approaches such as regular mental health screening, scheduled psychological intervention sessions and psycho-education were carried out. The mental health screening was done via an online survey using Depression Anxiety Stress Scale-21 (DASS-21) questionnaires (Malay Version) were provided to the staff via each department. Walk-in avenues were also made available for the HCW who experience burnout or having difficulty coping with stress. From this survey, among 436 respondents, a total of 160 staff required

psychological intervention. The main stressors were underlying chronic stress, communication issues, conflict at the workplace and lack of self-care especially among women healthcare workers.

This case series illustrates the common psychosocial challenges faced by women HCW at HAT TM during the pandemic. Three female nurses, at mid age, had to juggle work and personal responsibilities, complicated by COVID-19 pandemic situation. These issues required prompt attention and interventions in order to maintain the morale and performance of the staff.

## Case 1

A 39-year-old female staff nurse, married, with 4 children, scored 'extremely severe' on the online DASS-21 screening. She complained of irritability and difficulty sleeping for a few days. Her husband is an army personnel stationed in East Malaysia. She was staying with her children in Kuala Lumpur. She had difficulty managing her children during the pandemic. The school and childcare center were closed, and she had to juggle her work and her children's care. She was given a few sessions of counselling on how to handle stress and sleep hygiene. She was given some flexibility in terms of her working schedule by her ward sister. After a month, she was able to adjust and cope well with her stress.

## Case 2

A 29-year-old female staff nurse, married, with a 3-year-old daughter, scored 'severe' on the online DASS-21 screening. Her husband works as a mechanic in Kelantan and her daughter is staying with her parents in Terengganu. Restricted Movement Control Order (RMCO), hectic work schedule with increment of workload greatly affected her schedule which included her regular visits to her child. She reported excessive crying spells, difficulty in concentration, poor sleep, and easily stressed up. She was given supportive psychotherapy, group therapy, and psychoeducation on stress management and sleep hygiene. After a few months, she was able to visit her family due to the lifting of the ban on interstate travel. She has been coping well since then.

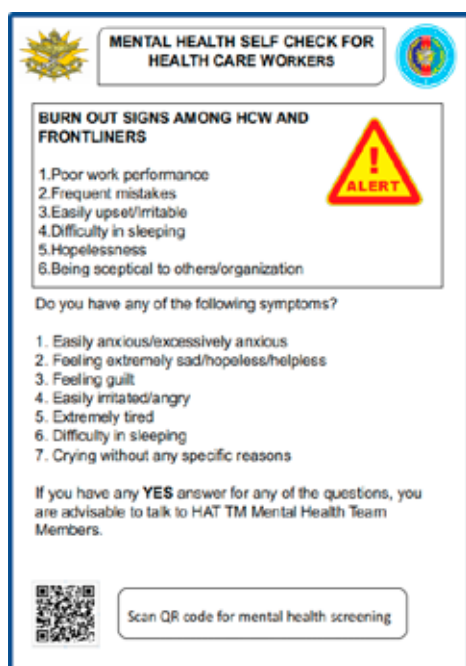
## Case 3

A 30-year-old female army staff nurse, married, with 4 children, complained of depressive symptoms such as low mood, poor concentration, difficulty to sleep, irritability for the past few weeks. The symptoms worsen during the pandemic. She was struggling with her unsupportive husband who seemed not able to accommodate her nature of work (night shift, dealing with male patients, unable to accept his call during her duty) since early in their marriage. She has been coping well with distraction

and venting to her close friends and families. However, since the pandemic, she felt so much overwhelmed as her husband started working from home while having babysitting issues and an increase in workload. There was no suicidal or homicidal ideation. She was subsequently referred to a psychiatrist for future evaluation and management.

## Discussion

The subject of highlight in this case series is the importance of psychological support during crises. During the pandemic, the conservative approach to the patient needs modification, and the use of technology is imperative in order to reduce the risk of the infection and make healthcare more accessible <sup>3,4</sup>. Hence, HAT TM PFA Team used the online screening platform and tele-consultation via phone, video conference, and e-material for psychoeducation to deliver its services. The example of service promotion is shown in Figure 1. Any healthcare worker who scored 'moderate' to 'very severe' on the screening questionnaire was offered some form of psychological intervention.



**Figure 1: The e-Poster of Mental Health Self Check for Health Care Workers**

A systematic review done by Spoorthy (2020) showed that some of the factors specific to COVID-19 which were responsible for mental health problems among the healthcare worker were rapidity of spread, the speculations about its mode of transmission, and lack of definitive treatment protocols or vaccine <sup>5</sup>. During the SARS pandemic, extensive media coverage and widespread global connectivity led to panic reactions among the public and healthcare workers <sup>6</sup>.

Most common psychosocial situations faced by healthcare workers at HAT TM were childcare issues, conflicts in the workplace, etc. The pandemic had precipitated and aggravated mental health problems among staff. These are unavoidable, therefore, the leaders need to be proactive in taking measures to prevent mental health issues among their staff <sup>7</sup>. The staff could

be supported by providing regular avenues to check on their well-being and discuss interpersonal issues <sup>8</sup>. Most people find the support from the immediate superior and colleague protects their mental health <sup>9</sup>. Additionally, senior supervisors should check on their junior supervisor's mental health status, which reflects on their work performance. If not detected or treated early, the mental health of the staff will deteriorate subsequently resulting in impairment of work performance.

Another point to be highlighted is that mental health training is essential for all staff at each level - especially focusing on self-care, seeking help behaviours, and basic skill in providing psychological first aid in order to mitigate the impact of this difficult time. Furthermore, a clear standard operating procedure (SOP) dealing with COVID-19 is important as the uncertainty of the SOP can aggravate the feeling of anxiety among staff.

In conclusion, work-related and psychosocial stress need to be given due attention in order to maintain the morale and performance of the staff. In the future, it might be necessary to consider a new policy on part time work, flexi working hours and child care arrangements for the staff.

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