

Prevalence of Burnout among Individuals Deployed in Covid-19 Pandemic

Raja Upadhyay¹, Vandana Sinha²

ABSTRACT

Background: Continuous workload can create burnout and psychological health issues to any professional. Due to COVID-19 pandemic essential service staffs may felt increase workload and change official timing. **Methods:** To assess the workload and burnout among essential professionals deployed during the COVID-19 pandemic. We conducted a questioner-based cross-sectional survey using Oldenburg Burnout Inventory and Depression, Anxiety and Stress Scale. **Results:** Result found that mean age of the participants 30.98 ± 7.52 and 62.2 % male and 37.8 % participants were female. Significant level of burnout was present among the professionals. **Conclusion:** Burnout is common in professionals due to increased workload. Most of the time individual seemed to be concern and anxious of getting the infection and infecting family members. These factors result in reduced functioning and increase in burnout during COVID-19.

Keywords: Burnout, COVID-19, essential services, professional, pandemic

INTRODUCTION

The 2019 novel corona virus (COVID-19) pandemic is a worldwide unprecedented public health emergency in modern history (WHO, 2020). Globally more than 200 countries are infected by the spread of COVID-19. This condition has directly impacted on the frontline professional's productivity and psychological health. Various frontline professionals are deployed to maintain daily living like law and order, financial activities, communication and transportation, food products and many other required things of daily life. During current COVID-19 pandemic, Honorable Prime-Minister of India announced the closing down of national and international borders, area wise lockdown in city and villages. The lockdown during COVID-19 pandemic is assumed to affect frontline professionals including their families. These might be creating burnout and negative psychological effects on the professionals. Burnout is defined as a state of emotional, physical and mental exhaustion that occurred due to continuous involvement in work situations that are emotionally demanding. It is a multidimensional syndrome comprising depersonalization, emotional exhaustion, and reduced sense of personal accomplishment (Freudenberger, 1974; Maslach, 1976; Maslach, & Jackson, 1981).

Professional's burnout can happen at any time; however, it has become more prevalent during COVID-19 pandemic. Covid-19 pandemic has created common situations like; overwhelming demands of job, lack of resources or training, contradictory job requirements and not getting proper feedback causing burnout. These common situations can also affect psychological well-being and productivity negatively. Professionals experiencing burnout are less aware of their surroundings, thus burnout can cause harmful conditions like poor functioning, lack of job satisfaction and poor psychological well-being. Burnout has been found to be driven by high job stress, workload, work pressure, and poor organizational support (Lai, 2020). Large numbers of health care professionals on the frontlines face high adversity, workloads, and stress, making them vulnerable to burnout (Chen, et al., 2020; Dugani, et al., 2020). Burnout, apart from being individually harmful, can also lead to poor functioning and care (Lai, 2020).

¹Psychiatric Social Worker, District Mental Health Unit, District Govt. Hospital (Sadar) Bhabhua, Kaimur, Bihar India-821101 Email id: rajaup92@gmail.com

²Professor & Head, Dept. of Social Work, Mahatma Gandhi Kashi Vidyapeeth, Varanasi, Uttar Pradesh, India

MATERIAL AND METHODS

Ethical permission and approval to conduct the study was taken from district Health officials of District Govt. Hospital, Kaimur, Bihar, India. Consent was obtained from the participants of the study. All the participants provided consent after selecting “yes” to indicate their willingness to participate in the online survey. A questionnaire based online survey with basic Socio-demographic data sheet and Oldenburg Burnout Inventory (Maslach, & Jackson, 1981) was carried out among the groups working as frontline in current COVID-19 pandemic. We send note along with introduction, purpose of the study, choice for voluntary participation and data confidentiality were emphasized. The questionnaire was created using Google form. We carried out a prospective, cross-sectional, online survey to evaluate burnout for professionals working as frontline. Questionnaire was send to the contacts of all the authors, using platform for data collection Facebook messenger, Whats App and Twitter from 15th April to 30 April, 2020. We included professionals who were deployed in (Health Care Professional, Police Personnel, Community Health Worker, bank employees and cleaning staff) essential services. We excluded professionals who were working from home or stayed at home. Socio Demographic Data sheet was used to assess participants’ age, gender, education, occupation and domicile. For assessing burnout we used Oldenburg Burnout Inventory (Maslach, & Jackson, 1981). The OLBI consists of 16 items, eight of which assess the exhaustion dimension of burnout and eight measuring disengagement dimension of burnout. Both subscales included four positive and four negative worded items. Items were scored from 1 (strongly agree) to 4 (strongly disagree) so that high score would refer to high level of exhaustion and disengagement. Exhaustion (Cronbach’s $\alpha=.87$) and Disengagement (Cronbach’s $\alpha=.81$) subscales were reliable.

RESULTS

Table 1: Socio-demographic finding of participants (683)

Variables		Frequency (%)
Age	Mean \pm SD	30.98 \pm 7.53
Gender	Male	425(62.2)
	Female	258(37.8)
Education	Primary	30(4.4)
	Secondary	21(3.1)
	Higher-Secondary	105(15.4)
	Graduation	261(38.2)
	PG & Above	266(38.9)
Occupation	Health Professionals	187(27.4)
	Community Health Worker	147(21.5)
	Police Personnel	174(25.5)
	Banking Sector	67(9.8)
	Cleaning Staff	48(7.0)
	Security Guard	60(8.8)
Marital Status	Married	319(46.7)
	Unmarried	352(51.5)
	Separated	13(1.9)
Domicile	Urban	389(57.0)
	Semi-urban	222(32.5)
	Rural	72(10.5)

Table 1 present the mean age of the participants were 30.98 ± 7.53 . In present study 62.2 % participants were male, 38.9 % having degree of post-graduation and above. More than half, 51.5% participants were unmarried, majority of participants belonged to urban area.

Table 2: Distribution of Oldenburg Burnout Inventory (N=683)

Variables	Low	Medium	High
Exhaustion	24(3.5)	615(90.0)	44(6.4)
Disengagement	9(1.3)	662(96.9)	12(1.8)

Table 2 shows the burnout finding among all the participants. 90 % participants had exhaustion and 97% had disengagement at median level.

Table 3: Burnout Findings on OBI scale (N=683)

Variables	Low	Medium	High
Health Professionals	0	175	12
Community Health Workers	0	138	9
Police Personnel	0	145	14
Banking Sector	0	67	0
Cleaning Staff	0	39	9
Other Essential Staff	9	51	0

Table 3 shows that level of burnout was faced among the professionals. Majority of the participants faced median level of burnout.

DISCUSSION

The COVID-19 pandemic had created a number of factors that contributed to a higher risk for mental health of the frontline professionals. The main aim of the study was to evaluate burnout prevalence among the professionals working as frontline and essential duties during Covid-19 pandemic.

Results of the cross-sectional online survey found high level of burnout in professionals from police, health care, banking, community health services, and cleaning services who were engaged on duty during COVID-19 pandemic. Most of the participants were young with mean age of 30.98 years, followed by 62.2% male and 37.8% female participants. Professionals selected for the study were the staffs, officially deployed during COVID-19 duty. Total 77% participants had education up to graduate and above, serving various professions like; 27.4% Health Professionals, 21.5% Community Health Workers, 25.5% Police personnel, 9.8% Banking Professionals, 7% Cleaning Staff working in COVID-19 wards, and 8.8% Security Guards that continues rotation duty of testing centers and COVID-19 wards. Gender, Job Category, current responsibility, and place of posting contribute to the level of burnout that professionals experienced.

Due to high contagious nature of covid-19, occupational exposures have been related with more emotional impact in professionals who work on the frontline (Elbay, et al., 2020). Current study found 90% exhaustion faced at median level among all the participants and 6.4 % were found higher level of burden. Studies suggested that substantial variation in the prevalence of burnout across regions need for attention and care for professionals (Sasangohar, et al., 2020). Covid-19 pandemic and the lockdown duration, have created psychological pressure on the personnel working day or night shift and increased work load

(Aziz, et al., 2020). Govt. of India had issued guidelines time to time for controlling spread of disease and professionals do their duties according to continuously changing official orders.

Our study found a high prevalence of burnout during the current covid-19 pandemic. It was found that score of pandemic-related burnout in the professionals engaged in Covid-19 duty were having significantly moderate and high level of burnout. Burnout can impact individuals not only physically but also can associate with mental health. A systematic review found that burnout was a predictor for various conditions like; musculoskeletal pain, headache, gastrointestinal, prolonged fatigue and respiratory issues (Salvagioni, et al., 2017). One study found that some factors such as increased workload hours, inadequate PPEs or not having adequate guidelines, contributed to higher rates of infection in family members can create psychological pressure and poor performance at work (Wang, et al., 2020).

Professional experienced high level of workload, the fear of being infected and poor support that may influence burnout and associated psychosocial health outcome (Hossain, et al., 2020). Professional deployed at frontline are sometimes stigmatized as possible carriers of the virus by members of the community, NEWS and Media reported several time all over the world, increasing stress and hastening burnout (Rios, 2020; Semple, 2020).

CONCLUSION

Professionals fulfilling their role and responsibilities as frontline or essential services during lockdown to cease the spread of COVID-19 disease have to experience the real psychological burnout and epidemiological burden. Most of the time individual seemed to be concern of being infected and infecting family members. These all are the basic factors reduce functioning and increasing burnout. We found that all the participants who were deployed in COVID-19 duty at various setups faced some degree of burnout.

Declaration of Conflicting of Interests

The author(s) declared no potential conflicts of interest concerning the research, authorship, and/or publication of this article.

Funding

The author(s) received no financial support for the research.

REFERENCES

- Aziz, S., Arabi, Y. M., Alhazzani, W., Evans, L., Citerio, G., Fischkoff, K., ... & Christian, M. D. (2020). Managing ICU surge during the COVID-19 crisis: rapid guidelines. *Intensive care medicine*, 46, 1303-1325. 5 <https://doi.org/10.1007/s00134-020-06092-5>
- Chen, Q., Liang, M., Li, Y., Guo, J., Fei, D., Wang, L., ... & Zhang, Z. (2020). Mental health care for medical staff in China during the COVID-19 outbreak. *The Lancet Psychiatry*, 7(4), e15-e16. [https://doi.org/10.1016/S2215-0366\(20\)30078-X](https://doi.org/10.1016/S2215-0366(20)30078-X)
- Dugani, S., Afari, H., Hirschhorn, L. R., Ratcliffe, H., Veillard, J., Martin, G., ... & Bitton, A. (2018). Prevalence and factors associated with burnout among frontline primary health care providers in low-and middle-income countries: a systematic review. *Gates open research*, 2:4. <https://doi.org/10.12688/gatesopenres.12779.3>
- Elbay, R. Y., Kurtulmuş, A., Arpacioğlu, S., & Karadere, E. (2020). Depression, anxiety, stress levels of physicians and associated factors in Covid-19 pandemics. *Psychiatry research*, 290, 113130. <https://doi.org/10.1016/j.psychres.2020.113130>

- Freudenberger, H. J. (1974). Staff burn-out. *Journal of social issues*, 30(1), 159-165. <https://doi.org/10.1111/j.1540-4560.1974.tb00706.x>
- Hossain, M. M., Sultana, A., & Purohit, N. (2020). Mental health outcomes of quarantine and isolation for infection prevention: a systematic umbrella review of the global evidence. *Epidemiology and health*, 42: e2020038 <https://doi.org/10.2139/ssrn.3561265>.
- Lai, J., Ma, S., Wang, Y., Cai, Z., Hu, J., Wei, N., ... & Hu, S. (2020). Factors associated with mental health outcomes among health care workers exposed to coronavirus disease 2019. *JAMA network open*, 3(3), e203976-e203976. <https://doi.org/10.1001/jamanetworkopen.2020.3976>
- Maslach, C. (1976). Burned-out. *Human behavior*, 5(9), 16-22.
- Maslach, C., & Jackson, S. E. (1981). The measurement of experienced burnout. *Journal of organizational behavior*, 2(2), 99-113. <https://doi.org/10.1002/job.4030020205>
- Rios L. Mexican doctors attacked with bleach over coronavirus fears. *Time*. 2020 Apr 25. Retrieved from: <https://time.com/5827496/mexico-doctors-coronavirus-attacks/>
- Salvagioni, D. A. J., Melanda, F. N., Mesas, A. E., González, A. D., Gabani, F. L., & Andrade, S. M. D. (2017). Physical, psychological and occupational consequences of job burnout: A systematic review of prospective studies. *PloS one*, 12(10), e0185781. <https://doi.org/10.1371/journal.pone.0185781>
- Sasangohar, F., Jones, S. L., Masud, F. N., Vahidy, F. S., & Kash, B. A. (2020). Provider burnout and fatigue during the COVID-19 pandemic: lessons learned from a high-volume intensive care unit. *Anesthesia and analgesia*. <https://doi.org/10.1213/ane.0000000000004866>.
- Semple K. 'Afraid to be a nurse': Health workers under attack during coronavirus pandemic. *New York Times*. 2020 Apr 27. Retrieved from: <https://www.nytimes.com/2020/04/27/world/americas/coronavirus-health-workers-attacked.html>
- Wang, J., Zhou, M., & Liu, F. (2020). Exploring the reasons for healthcare workers infected with novel coronavirus disease 2019 (COVID-19) in China. *J Hosp infect*, 105(1), 100-1. <https://doi.org/10.1016/j.jhin.2020.03.002>
- World Health Organization. (2020). Novel coronavirus (2019-nCoV) situation reports. Geneva: World Health Organization.

How to Cite this Article: Upadhyay, R., & Sinha, V. (2020). Prevalence of Burnout among Individuals Deployed in Covid-19 Pandemic. *National Journal of Professional Social Work*, 23(1), 44-48. <https://doi.org/10.51333/njpsw.2022.v22.i1.493>