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Fear, anxiety and sadness: main feelings of health professionals in the COVID-19 pandemic

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Miedo, ansiedad y tristeza: principales sentimientos de los profesionales de la salud en la pandemia del COVID-19

Medo, ansiedade e tristeza: principais sentimentos de profissionais da saúde na pandemia de COVID-19

ABSTRACT
Objective: To describe the sociodemographic factors and feelings experienced of health professionals in the face of the Covid-19 pandemic. Method: Descriptive cross-sectional study carried out with 979 professionals between June and July 2020 with data collected by digital platforms. Results: Participants were predominantly between 30 and 49 years old, female, heterosexual, most of them from nursing. The most cited feelings were fear, anxiety, sadness, anguish and insecurity. Conclusion: Researching the feelings experienced by health professionals in the face of the Covid-19 pandemic is to give a voice to the central characters of this plot. It is necessary to take care of these caregivers and offer better working conditions, remuneration and security so that they can develop a coherent and resolute work.
DESCRIPTORS: Emotions; Coronavirus infections; Patient care team; COVID-19; Mental Health.

RESUMEN
Objetivo: Describir los factores sociodemográficos y sentimientos de los profesionales de la salud ante la pandemia Covid-19. Método: Estudio descriptivo transversal realizado con 979 profesionales entre junio y julio de 2020 con datos recolectados por plataformas digitales. Resultados: Los participantes tenían predominantemente entre 30 y 49 años, mujeres, heterosexuales, la mayoría de ellos de enfermería. Los sentimientos más citados fueron el miedo, la ansiedad y la tristeza. Conclusión: Investigar los sentimientos vividos por los profesionales de la salud ante la pandemia Covid-19 es dar voz a los personajes centrales de esta trama. Es necesario cuidar a estos cuidadores y ofrecer mejores condiciones de trabajo, remuneración y seguridad para que puedan desarrollar un trabajo coherente y decidido.
DESCRIPTORES: Emociones. Infecciones por coronavírus. Grupo de atención al paciente. Personal de salud; COVID-19; Salud Mental.

RESUMO
Objetivo: Descrever os fatores sociodemográficos e os sentimentos vivenciados pelos profissionais de saúde diante da pandemia da Covid-19. Método: Estudo transversal descritivo com abordagem qualitativa realizado com 979 profissionais entre junho e julho de 2020 com dados coletados por plataformas digitais. Resultados: Os participantes tinham predominantemente entre 30 e 49 anos, do sexo feminino, heterossexuais, sendo a maioria da equipe de enfermagem. Os sentimentos mais citados foram medo, ansiedade, tristeza, angústia e insegurança. Conclusão: Pesquisar os sentimentos vivenciados por profissionais de saúde diante da pandemia da Covid-19 é dar voz aos personagens centrais deste enredo. É preciso cuidar destes cuidadores e oferecer melhores condições de trabalho, remuneração e segurança para que possam desenvolver um trabalho coerente e resolutivo.
DESCRITORES: Emoções; Infecções por coronavírus; Pessoal de saúde; COVID-19; Saúde Mental.

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INTRODUCTION

Since December 2019, all countries have experienced the effects of the Covid-19 pandemic to a greater or lesser extent. The rising incidence and geometric growth of pneumonia cases caused by a new type of virus that has begun to infect humans in Wuhan, China, has caught the attention of the World Health Organization and Chinese health authorities. This infection quickly spread and, on January 30, 2020, was declared a public health emergency of international importance. [1]

In May 2020, South America became the epicenter of the disease caused by the new coronavirus, with the main emphasis on Brazil. [2] Thus, according to data available on August 2nd, 2020, 213 countries and regions around the world reported 18.056.296 million confirmed cases, with a death toll that already exceeded 689.590.000 and are in wide evolution. [3]

Pandemic periods are particularly critical for the mental health of the population. Fear, which is an instinctive and fundamental reaction for human beings, often becomes chronic or disproportionate, contributing to increased stress, anguish, anxiety, sadness, among other psychological disorders. Despite the known data in the general population,

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studies on prevalence and causal factors in specific groups, such as health professionals, are still scarce. [4-5]

Factors such as high workload, overload, lack of professional valuation, direct contact with the suffering of others, stress, pressure resulting from the high number of care for serious cases, double employment relationships, precarious relationship in employment contracts, high responsibility, problems with sleep and rest, inadequate infrastructure, unavailability of personal protective equipment in sufficient quantity and quality, imminent risk of being infected and transmitting to family members and others, can contribute to the increase in anxiety, during these periods, and nevertheless, the dimension of working conditions, contribute to psychosomatic symptoms in health professionals. [6-8]

In this sense, considering the psychological burden to which health professionals are exposed in the Covid-19 pandemic, the study started from the following guiding question: What are the main emotions related to Covid-19 in health professionals? To answer this research problem, the study aimed to describe the sociodemographic factors and the feelings of health professionals facing the Covid-19 pandemic.

The study was justified by the need to clarify the emotions experienced by health

professionals, individuals who are so pressured and demanded at such a difficult time in the history of humanity and modern society. It is believed that with these results, it is possible to plan interventions not only to take care of these professional caregivers, but also to predict future needs in the event of new global epidemics such as the one that is taking place today.

METHOD

This is a descriptive cross-sectional study with a quantitative approach carried out between June and July 2020 with the population of health professionals from the five Brazilian macro-regions (North, Northeast, Southeast, South and Midwest). This research is part of a larger study entitled: "Tolerance in friendly relationships in the context of the COVID-19 pandemic".

Individuals from different professions in the health area, over 18 years old, with access to the internet through subscription to digital social networking platforms or messages were included. Participants who did not complete the questions in the research instrument were excluded. Based on these criteria, the non-probabilistic convenience sample consisted of 979 professionals, including all Brazilian macro-regions.

For data collection, a self-applicable digital instrument of the Google® Form type was sent through the social platforms Facebook®, Twitter®, Whatsapp® and Instragram® that contained questions about the sociodemographic profile and a guiding question that addressed feelings related to the pandemic of Covid-19. Such questions could only be answered after digital confirmation of acceptance to participate in the study, by reading the Informed Consent Form (FICF).

The questionnaire, constructed by the authors, involved the following variables: date of birth, gender, sexual orientation, race, education, monthly income, region of residence and who you live with (whether alone or not), emotions about the pandemic of Co-

vid-19 (How do you feel about the Covid-19 pandemic?).

For data organization and analysis, a database was built using the Statistical Package for Social Science (SPSS), version 25.0. Quantitative variables were presented in absolute values (n) and percentages (%). To present the variable emotions about the Covid-19 pandemic, the Wordle system, available at www.wordle.net, was used to build a word cloud. This technique consists of using different font sizes and fonts to represent the frequency and diversity of words that occurred in the analyzed text based on the qualitative research analysis proposed by Minayo. [9]

The study was submitted to the Brazil platform for consideration by the Research Ethics Committee, being approved under opinion number 4.113.127 and CAAE number 33896920.7.0000.5554.

The Guidelines and Regulatory Norms for Research Involving Human Subjects described by Resolution 466/2012 of the National Health Council were followed, as well as Resolution 510/2016, of the same council, which provides for the norms applicable to research in Human and Social Sciences, in addition to compliance with best practices for research in virtual environments.

RESULTS

Of the 1003 people who were invited to participate in the study, 24 refused to participate, which led to an access population of 979 health professionals from the five macro-regions, whose sociodemographic profile is shown in table 1.

There is a predominance of participants aged between 30 and 49 years

Table 1. Sociodemographic characterization of health professionals from the five Brazilian macro-regions (n=979). Brazil, 2020.			
VARIABLES	**DE DESCRIPTION SCRIÇÃO**	**N**	**%**
Age group	18 to 29 years	415	42,4%
	30 to 49 years	438	44,7%
	50 to 59 years	47	4,8%
	≥60 years		
	8,1%		
Total		979	100,0%
Sex	Female	837	85,5%
	Male	139	14,2%
	Other	3	0,3%
Total		979	100,0%
Sexual Orientation	Heterossexual	810	82,7%
	Homossexual	75	7,7%
	Bissexual	70	7,2%
	Others	18	1,8%
	Did not respond	6	0,6%
Total		979	100,0%
Education	Elementary School	4	0,4%
	High School	119	12,2%
	Graduation	359	36,7%
	Post Graduation	384	39,2%
	Master's degree	91	9,3%

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	PhD	22	2,2%
Total		979	100,0%
Lives alone	Yes	116	11,8%
	No	863	88,2%
Total		979	100,0%
Ethnicity	Yellow	32	3,3%
	White	413	42,2%
	Indigenous	6	0,6%
	Brown	413	42,2%
	Black	106	10,8%
	Other	9	0,9%
Total		979	100,0%
Monthly Income	20 or more minimum wages	25	2,6%
	Between 10 and 20 minimum wages	132	13,5%
	Between 4 and 10 minimum wages	341	34,7%
	Between 2 and 4 minimum wages	305	31,2%
	Up to 2 minimum wages	176	18,0%
Total		979	100,0%
Housing Region	Midwest	29	3,0%
	South	269	27,5%
	Southeast	425	43,4%
	Northeast	205	20,9%
	North	48	4,9%
	Out of Brazil	3	0,3%
Total		979	100,0%
	Nurse	402	41,1%
Occupation	Nursing Technician	143	14,6%
	Nutritionist	36	3,7%
	Psychologist	93	9,5%
	Physician	19	1,9%
	Physiotherapist	55	5,6%
	Pharmaceutical	45	4,6%
	Dentist	60	6,1%
	Speech therapist	12	1,2%
	Others	114	11,6%
Total		979	100,0%

(44,7%), female (85,5%), heterosexual (82,7%), white (42,2%) and brown (42,2%), who receive between 4 and 10 minimum wages (34,8%). They have graduate degrees (39,2%), are residents of the Southeast (43,4%) and predominantly nurses (41,1%).

Figure 1 shows the emotions about the Covid-19 pandemic reported by the participants.

It can be seen, above, that the feelings most frequently reported by health professionals were: fear (n=121), anxiety (n=91) and sadness (n=74), followed by anguish (n=53) and insecurity (n=36). In addition, participants less frequently reported other feelings such as: despair, worry, uncertainty and hope.

DISCUSSION

It was found, in a study that investigated the historical process of female work, that this is the largest workforce in the health sector, [10] representing more than 70% of the entire contingent. This is due to the fact that women prefer to allocate themselves to certain activities, especially those related to organization and care. [11]

Furthermore, there was also a predominance of white and mixed race people, findings that are in accordance with the data from the National Household Sample Survey conducted in 2019, which found that 42,7% of Brazilians declared themselves white and 46,8% like browns. [12]

In relation to income and average salary, there was a monthly income between four and ten minimum wages, in contrast to this study, an investigation detected the professionals' monthly income ranging between one and ten salaries, where the majority (69,7%) have remuneration up to three minimum wages. [13] This can be explained by the fact that the participants in this study are predominantly from the south and southeast regions (70,9%), which are the most developed regions with the highest income in Brazil. [14]

As for education, most had a postgraduate course, similar results were evidenced in a survey conducted in the State of São Paulo, which showed that 57,4% of the participants were specialists. This aspect is of fundamental importance as it demonstrates that professionals are in full advancement of knowledge and associated with changes in the profession

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Figure 1. Word cloud obtained for the question: Define in one word your feeling towards the COVID-19 pandemic (n=979). Brazil, 2020.

itself, [15] which may result in better professional performance.

Regarding the health areas, the results showed that the professionals were mostly from the nursing team (55%), who did not live alone (88,2%). Converging with these findings, a study carried out in the interior of Paraná, Brazil, showed that 66% of professionals were nurses and nursing technicians [16] and the survey "Nursing Profile in Brazil" showed that more than half of the country's nurses (53,9%), nursing technicians and assistants (56,1%) are concentrated in the Southeast region [11] in line with the results found.

This research showed that the feelings and emotions experienced by health professionals during the pandemic were most frequently: fear, anxiety, sadness, anguish and insecurity and with less mention: despair, worry, uncertainty and hope. Coincidentally, a study carried out with health professionals who work with confirmed or suspected patients of Covid-19 reported feeling fear, anxiety, worry about death, sadness, discrimination, isolation, prejudice, uncertainty and doubts about the future. [16]

In another survey conducted in the state of Amapá that assessed the profile of health professionals affected by Covid-19, of 544 workers evaluated, 58%

Among the group that suffered most were women, nurses, people living in Wuhan and health professionals involved in the diagnosis, treatment or n ursing care of patients with suspected or confirmed Covid-19.

were nurses and nursing technicians, which probably emanated feelings similar to those highlighted in this investigation. [17]

The risk of exposures in the workplace, insufficient equipment and supplies needed to provide adequate care to critically ill patients, in addition to limited access to health services to treat psychological distress, [16] they are also contributing factors to such feelings.

Nevertheless, a cross-sectional study carried out in different regions of China, interviewing 1.257 health professionals in 34 hospitals that provide care to patients with Covid-19, showed symptoms of depression, anxiety, insomnia and anxiety. Among the group that suffered most were women, nurses, people living in Wuhan and health professionals involved in the diagnosis, treatment or nursing care of patients with suspected or confirmed Covid-19. [19]

In this context, several factors contribute to the psychological suffering of health professionals who work directly with suspected or confirmed patients with Covid-19. As, for example, emotional tension and physical exhaustion when caring for a growing number of patients of different age groups and with the potential to deteriorate quickly, caring for co-workers whose clinical condition can deteriorate and die, insufficient amount of personal protection materials, fear of contaminating family members and living alone, further amplifies these problems. [18]

It is of fundamental importance to develop actions for the promotion, monitoring and recovery of these workers, ensuring the effectiveness of the principles and actions recommended by the National Policy on Workers' and Workers' Health and other labor policies and legislation, as well as creating, reformulating and implementing effective measures in the field of occupational health and safety. [20]

As limitations of the study, the fact that it does not equitably portray all the bonds of health professionals at

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different levels of care and the feelings experienced by them in these different work environments stand out. On the other hand, there are not many studies with this approach in the scientific literature, which expanded the discussion and debate on the subject. In this sense, it is suggested to carry out other national studies, with stratified proportional sampling, in order to analyze and compare the feelings experienced by health professionals in different contexts during the care of the suspected and/or confirmed patient with Covid-19.

CONCLUSION

Researching the feelings experienced by health professionals in the face of the Covid-19 pandemic is to give voice to the central characters of this plot, which apparently is far from reaching a conclusion, given the virus's own characteristics and the difficulties of coping, both material and /or instrumental, professional training, or focused on emotional and psychological issues of workers, generating feelings, as observed, of fear, anxiety, sadness, anguish and insecurity, especially on the part of nurses and nursing technicians, the largest contingent professionals and who spend more time with patients and family members. Therefore, it is necessary to take care of these caregivers and offer better working conditions, remuneration and security so that they can develop coherent and resolute work. ■

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