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Research Article

Covid-19 Pandemic Impact on Psychological Wellbeing of Nurses Working at Windhoek Central Hospital, Windhoek Namibia

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Abstract

This study aimed to reveal the prevalence and associated factors of the psychological impact among nurses working at the Windhoek Central Hospital (WCH), Windhoek, Khomas region. The Covid-19 pandemic has posed great threat to public health around the world. Nurses as the forefronts in fighting this pandemic have endured great physical and psychological distress. This psychological impact was mostly described as symptoms of anxiety, stress at work, inadequate or sleep disturbance and inability to cope with the flow of patients during the pandemic. A cross-sectional study was used, with quantitative descriptive research design. A questionnaire was used to collect data from nurses working at WCH. The total of 36 respondents took part in this study. The researcher used a convenience sampling method to select the respondents and manual descriptive analysis was used to analyse the data obtained from the study. Of the 36 nurses, 61% (n=22) were identified as having experienced anxiety while 78% (n=28) have become stress at work during the pandemic. The study further noted that nurses had concern with their family back home, as they fear of infecting them with the virus. Hospital management's lack of support and lack of necessary equipments to fight the pandemic were the contributing associated factors to psychological impact. The study demonstrated that Covid-19 had a significant psychological impact on nurses.

This study highlighted that the nurses were suffering from different psychological distress, which needed early screening and supportive intervention for preventing more severe psychological impact on nurses.

Key words: COVID – 19; psychological; pandemic; nurses

Introduction And Background

The covid-19 outbreak was first reported in December 2019 from Wuhan, in the Hubei province of China. This novel corona virus disease has since spread rapidly across the world. Namibia reported its first confirmed covid-19 cases on 13 March 2020 and the ministry of health and social services declared the covid-19 outbreak on 14 March 2020 (MoHSS, 2020). Coronavirus disease 2019 (Covid-19) is a virus caused by a novel coronavirus (SARS-COV-2) that came from the seafood and poultry of Wuhan in 2019 (Mekon, Shetie, Muluneh, 2020). Furthermore, together with the growing number of cases in Namibia, healthcare workers are being infected, this include nurses, who are the fore front liners in fighting this pandemic. As of May 2021, a total number of 1350 health care workers have been infected by covid-19, of which six [6] of them have been succumbed to the virus (MoHSS, 2021).

The psychosocial consequences of the coronavirus pandemic are serious for health professionals including nurses because of a higher level of exposure. Nurses often face huge psychological pressure as a result of workload, long hours, and working in a high-risk environment. This study aimed to assess the prevalence and associated factors of anxiety, depression, and stress among nurses working in Windhoek Central Hospital. Nurses are usually the forefront in fighting this pandemic and they a vulnerable population with an increased risk of infection, stress, depression and fear (Ofori, Osarfo, Agbeno, Manu & Amoah, 2021). The International Council of Nurses (ICN) reported that more than 600 nurses around the world have died from COVID-19 until 3 June 2020. Estimating the psychological impact of the COVID-19 outbreak on nurses is important for health authorities to develop preventive strategies and effective treatment modalities to alleviate its negative outcome. Despite this fact, no studies on the epidemiology of depression, anxiety, and stress in nurses have been conducted in the study area. Therefore, this study is intended to assess the prevalence and associated factors of depression, anxiety, and stress among nurses working in the Windhoek Central Hospital. Nurses who directly work with covid-19 patients have reported to have higher risk of anxiety, stress and depression, although this cannot be substantiated by any local statistics. Factors such as lack of personal protective equipment's, lack of covid-19 beds, lack of oxygen, lack of hand-washing equipment's were noted to affect nurse's psychological well-being.

This study was to assess the psychological impact on nurses working in Windhoek Central Hospital during this covid-19 epidemic. The researcher had focused on assessing the psychological impact and came up with possible recommendations to assist the well-being of nurses.

Problem Statement

During COVID - 19 pandemic nurses have demonstrated high risk of anxiety, depression and stress with 69,9%, 55,3% and 20,5% respectively (Mekonen, Shetie & Muluneh, 2020). The researcher has observed during his work in the hospital, that nurses were in fear of treating or coming into contact with covid-19 suspected and diagnosed patients due to the lack of treatment guideline, fear of contracting infection and infecting their family members back home. Fear was also due to the fact that nurses acknowledged lack of training, knowledge and skills about the novel corona virus (COVID - 19). This problem high anxiety is likely to be common among nurses in Namibia. If no measures are taken to address it, nurse's psychological wellbeing will be significantly affected, and can affect the quality of healthcare patients are receiving at facilities. Therefore, this study was to assess the epidemiology of psychological impact of covid-19 outbreak among nurses working at WCH.

Research Methodology

The researcher used a cross-sectional study, descriptive research design in nature. The main reason for the researcher to select this design was for the researcher to collect all variables at one point and suitable for descriptive analysis. Data was presented in numerical form and analysed via the use of statistics (Brink, *et al.*, 2018). It was descriptive in nature to provide authentic information about phenomenon under study and define it theoretically and operationally for the purpose of the study (Brink, *et al.*, 2018).

Results And Discussions

Prevalence and demography:

Most of the respondents who took part in this study were of the age range of 25-35 years, with a frequency of 58,3% (n=21) respondents out of 100% (n=36) respondents who participated in this, which was the highest percentages of the total population who participated, this showed that this is an active workforce age range thus is being represented by large number of respondents. This can be indicated in the figure 1.



Figure 1: Respondents' ages (n=36)



Figure 2: Respondents' those experienced cold-like symptom (n=36)

The finding is similar to the study conducted in Wuhan, China on nurses, which showed that 71% of the participants suffered from cold-like symptom or related Covid-19 symptom (Cai et al.,2020). Furthermore, majority of the respondents 81,5% (n=22) who indicated that they have experienced a cold-like symptom were home isolate. The results could be attributed by the severity of Covid-19 pandemic. However, the results are contrary to (Cai et al., 2020) in Wuhan, which indicated that only 39% of the participants were home isolate.

The study further demonstrated that most respondents had family member with cold-like symptoms with 64% (n=23) during the Covid-19 pandemic.

This illustrated to the researcher that nurses have an influence to the wellbeing of their family members back home after work, as they may spread the symptoms to the closest family members.

Evidence in this study showed that majority of the respondents 84% (n=30) were tested for Covid-19 with only 17% (n=6) who were not tested for Covid-19. The high level of those tested for Covid-19 could attributed by the efforts from the government to have all healthcare workers including nurses to get tested against the virus as they were the frontline in fighting the pandemic. This can be indicated in figure 3.



Figure 3: Respondents' information on Covid-19 test (n=36)

The findings support that of (Murat, Kose & Savaser, 2021) on depression and burnout levels of front lines nurses during Covid-19 pandemic in Turkey, which indicated that majority of the respondents 58,4% were tested for Covid-19. On the other hand, only 45% of the respondents were tested for Covid-19 on an E-survey on nurses on impact of Covid-19 outbreak in Italy (Felice, Tanna, Zanus & Grossi, 2020). The differences in study findings may be due to different country's laws and regulation when it comes to Covid-19 testing and due to personal beliefs and myths against Covid-19.

The study findings demonstrated that the respondents who were tested for Covid-19, majority of their results 57% (n=17) were negative while only 43% (n=13) of the respondent's results were positive. This indicated to the researcher that most of the nurses were taking up necessary precautions to

protect themselves from contracting the virus, thus the majority of them were negative.

Moreover, majority of the respondents 58% (n=21) in this study were vaccinated against Covid-19 while 42% (n=15) were not vaccinated against Covid-19. The results may be due to voluntarily decision on individual to get vaccinated against Covid-19, as it was not compulsory for every nurse to get vaccinated against Covid-19.

The results of the study revealed that most of the respondents 61% (n=22) have experienced anxiety during Covid-19 pandemic, with only 39% (n=14) of the respondents who have not experienced anxiety. This can be indicated in figure 4.



Figure 4: Respondents' information on anxiety during Covid-19 pandemic (n=36)

The results could mean that most of the respondents had fear of losing their life and those of their family members due to virus. Study findings are consistent with a study on psychological impact of Covid-19 on healthcare workers in Ghana (Ofori et al., 2021) which noted that 72,2% of the respondents have experienced anxiety during the pandemic. Furthermore, respondents who indicated that they have experienced anxiety during Covid-19 motivated that with various reasons with most of the respondents 31% (n=7) have fear because of people dying, 18% (n=3) had fear of death after

seeing patients dying during Covid-19. Other study on analysis of depression level among frontline healthcare worker working at care centre during Covid-19 at central India, noted that 39% of the respondents were worried about themselves or their family members being infected by Covid-19 (Vijay, Ritesh, Aanand & Singh, 2022).

The study also found that majority of the respondents 81% (n=29) have not experienced any difficulty in sleeping, while 19% (n=7) of the respondents have experienced difficulty in in sleeping during the pandemic. This can be indicated in figure 5.



Figure 5: Respondents' experienced difficulty in sleeping (n=36)

This could indicate to the researcher that fatigue due to long working hours and lack of proper rest could attribute to sleeping, as when nurses knock off, they tend to fall asleep upon arrival at home. No literature that is similar to the study findings were established.

In addition, the 19% (n=7) of the respondents who have indicated that they had difficulty in sleeping were further requested to motivate their choice, whereby 29% (n=2) indicated that they experience difficulty in breathing at times and thinking about patients in the ward respectively. While others noted that pressure due to long working hours and severe generalized body pains. Other study by (Zhan et al., 2020) on factors associated with insomnia among Chinese frontline nurses fighting against Covid-19 in Wuhan noted that 52,8% had a degree of fear of Covid-19, fatigue and perceived stress, that is why finding it difficult to sleep. This could indicate the associated negative adverse results and pressure that Covid-19 has brought about to the nurses around the world.

Evidence in this study showed that most of the respondents 78% (n=28) have become stressed at work during Covid-19 pandemic, while only 22% (n=8) of the respondents indicated that they have never been stressed at work. However, a study by (Mekonen et al., 2020) on the psychological impact of Covid-19 outbreak on nurses working in the northwest of Amhara regional hospital in the northwest Ethiopia, indicated that 20,5% of the respondents have experienced stress at work during the pandemic. The differences in results may be due to how different countries and government are responding to the pandemic and how well they are taking care of their nurses.

To this end, most respondents who indicated that they have experienced stress during the pandemic have motivated their reasons as to how and why they were stressed. Most respondents 36% (n=10) indicated that too much workload and poor management decision were the contributing factors. Lack of support from the management, lack of resources at work, lack of oxygen for patients, shortage of staff, long working hours, overcrowding of the hospital and most staff testing positive for Covid-19 were many of various factors that contributed to their stress at work during the pandemic. This results could mean that nurses were undergoing severe stress at work, due to poor support both from the management and government. The study findings support that of (Arnetz, Goetz, Arnetz & Arble, 2020) on nurse reports of stressful situations during the Covid-19 pandemic in USA, which indicated that 65,5% of the respondents noted with concern that poor support from

leadership, significant fear and lack of trust in the workplace, lack of personal protective equipments (PPEs) and shortage of staff were the contributing factors to stress. No other established literatures found to the contrary of this study. The results could indicate to the researcher the dire need for improvement to the wellbeing of the nurses and poor management decisions could worsen up the situation.

Conclusion

In conclusion, the purpose of this study was to assess the epidemiology of psychological impact of Covid-19 outbreak among nurses working at Windhoek central hospital. The prevalence of Covid-19 infection among the nurses at Windhoek central hospital were noted with great concern, although majority of the respondents were tested for Covid-19, most of them showed less interest in getting vaccinated against the pandemic which could curb the spread of the disease. On the other hand, Covid-19 associated with psychological impact negatively affected majority of the nurses as majority of the respondent's experienced anxiety and stress due to fear of unknown or fear of dying and poor management decision. This could mean that most of the nurses need psychological support both from the hospital management and government.

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