A meta-narrative review to investigate psychological distress and coping mechanisms among healthcare workers, related to the COVID-19 pandemic

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Research Question

What factors influenced the psychological distress of healthcare workers during the COVID-19 pandemic, and what are possible ways to cope with the distress?

Methodology

Inclusion criteria
- Topics related to mental health, burnout, coping mechanisms.
- Peer reviewed articles.
- Any healthcare profession.
- Surveys, clinical trials. 
- Exclusion criteria 
- Non-English papers.
- Data presented older than when the pandemic was established.

Source Selection

- Identified through database search (PUBMED) [37] (clinical laboratory scientist covid burnout)
- Records excluded after criteria: 2018-2023 (n=65).
- Articles with the referred factor that affects psychological distress.

Limitations

- Lack of pre-pandemic data for comparison.
- Sampling bias.
- Convenient sampling.
- Different scales to measure variables.

Key Findings

Factors that affect burnout according to Maslach Burnout Inventory-General Survey

Future Research

- Longitudinal survey can be applied to observe the implications of a coping mechanism, beneficial effects on healthcare workers and decrease psychological distress.
- Correlation between psychological distress and gender.
- Actively seek higher male response rates for a more representative result.
- More extensive exploration of psychological distress for technologist and technicians.

Conclusions and Implications

Because of the sudden spike of a new and unknown disease, many healthcare workers suffered from psychological distress due to being under an overwhelmed work environment with the potential to decrease the quality of patient care. Therefore, it is crucial to investigate coping mechanisms that have the potential to manage psychological distress suffered by healthcare workers during the COVID-19 pandemic. These coping mechanisms span from maintaining regular working hours, a regular sleep schedule, adequate safety protocols, emotional and social support, and encouraging a feeling of purpose to combat the psychological distress caused by emotional exhaustion, depression, anxiety, trauma, and depersonalization.

Hospitals and medical institutions should incorporate measures to offer coping services such as regular working hours, support, sense of purpose, adequate safety protocols for psychological distress of healthcare workers. This itself could provide potential benefits and improve quality of care and positive work attitude.

References


Note: *authors contributed equally and are listed in alphabetic order.