

Health Care Teams during COVID-19: Roles, Challenges, Emotional State and Perceived Preparedness to the Next Pandemic

Authors : Miriam Schiff, Hadas Rosenne, Ran Nir-Paz, Shiri Shinan Altman

Abstract : To examine (1) the level, predictors, and subjective perception of professional quality of life (P_{Ro}QL), posttraumatic growth, roles, task changes during the pandemic, and perceived preparedness for the next pandemic. These variables were added as part of an international study on social workers in healthcare stress, resilience, and perceived preparedness we took part in, along with Australia, Canada, China, Hong Kong, Singapore, and Taiwan. (2) The extent to which background variables, rate of exposure to the virus, working in COVID wards, profession, personal resilience, and resistance to organizational change predict posttraumatic growth, perceived preparedness, and P_{Ro}QL (the latter was examined among social workers only). (3) The teams' perceptions of how the pandemic impacted them at the personal, professional, and organizational levels and what assisted them. Methodologies: Mixed quantitative and qualitative methods were used. 1039 hospital healthcare workers from various professions participated in the quantitative study while 32 participated in in-depth interviews. The same methods were used in six other countries. Findings: The level of P_{Ro}QL was moderate, with higher burnout and secondary traumatization level than during routine times. Differences between countries in the level of P_{Ro}QL were found as well. Perceived preparedness for the next pandemic at the personal level was moderate and similar among the different health professions. Higher exposure to the virus was associated with lower perceived preparedness of the hospitals. Compared to other professions, doctors and nurses perceived hospitals as significantly less prepared for the next pandemic. The preparedness of the State of Israel for the next pandemic is perceived as low by all healthcare professionals. A moderate level of posttraumatic growth was found. Staff who worked at the COVID ward reported a greater level of growth. Doctors reported the lowest level of growth. The staff's resilience was high, with no differences among professions or levels of exposure. Working in the COVID ward and resilience predicted better preparedness, while resistance to organizational change predicted worse preparedness. Findings from the qualitative part of the study revealed that healthcare workers reported challenges at the personal, professional and organizational level during the different waves of the pandemic. They also report on internal and external resources they either owned or obtained during that period. Conclusion: Exposure to the COVID-19 virus is associated with secondary traumatization on one hand and personal posttraumatic growth on the other hand. Personal and professional discoveries and a sense of mission helped cope with the pandemic that was perceived as a historical event, war, or mass casualty event. Personal resilience, along with the support of colleagues, family, and direct management, were seen as significant components of coping. Hospitals should plan ahead and improve their preparedness to the next pandemic.

Keywords : covid-19, health-care, social workers, burnout, preparedness, international perspective

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