

## Mental Health of Caregivers in Public Hospital Intensive Care Department: A Multicentric Cross-Sectional Study

**Authors :** Lamia Bouzgarrou, Amira Omrane, Naima Bouatay, Chaima Harrathi, Samia Machroughl, Ahmed Mhalla

**Abstract :** Background and Aims: Professionals of health care sector are exposed to psychosocial constraints like stress, harassment, violence, which can lead to many mental health problems such as, depression, addictive behavior, and burn-out. Moreover, it's well established that caregivers affected to intensive care units are more likely to experience such constraints and mental health problems. For these caregivers, the mental health state may affect care quality and patient's safety. This study aims either to identify occupational psychosocial constraints and their mental health consequences among paramedical and medical caregivers affected to intensive units in Tunisian public hospital. Methods: An exhaustive three months cross-sectional study conducted among medical and paramedical staffs of intensive care units in three Tunisian university hospitals. After informed consent collection, we evaluated work-related stress, workplace harassment, depression, anxious troubles, addictive behavior, and self-esteem through an anonymous self-completed inquiry form. Five validated questionnaires and scales were included in this form: Karasek's Job Content Questionnaire, Negative Acts Questionnaire, Rosenberg, Beck depression inventory and Hamilton Anxiety scale. Results: We included 129 intensive unit caregivers; with a mean age of  $36.1 \pm 1.1$  years and a sex ratio of 0.58. Among these caregivers, 30% were specialist or under-specialization doctors. The average seniority in the intensive care was  $6.1 \pm 1.2$  (extremes=1 to 40 years). Atypical working schedules were noted among 36.7% of the subjects with an imposed choice in 52.4% of cases. During the last 12 months preceding the survey, 51.7% of care workers were absent from work because of a health problem with stops exceeding 15 days in 11.7%. Job strain was objective among 15% of caregivers and 38.33% of them were victims of moral harassment. A low or very low self-esteem was noted among 40% of respondents. Moreover, active smoking was reported by 20% subjects, alcohol consumption by 13.3% and psychotropic substance use by 1.7% of them. According to Beck inventory and Hamilton Anxiety scale, we concluded that 61.7% of intensive care providers were depressed, with 'severe' depression in 13.3% of cases and 49.9% of them present anxious disorders. Multivariate analysis objective that, job strain was correlated with young age ( $p=0.005$ ) and shorter work seniority ( $p=0.001$ ). Workplace and moral harassment was more prevalent among females ( $p=0.009$ ), under-specialization doctor ( $p=0.021$ ), those affected to atypical schedules ( $p=0.008$ ). Concerning depression, it was more prevalent among staff in job strain situation ( $p = 0.004$ ), among smokers caregivers ( $p = 0.048$ ), and those with no leisure activity ( $p < 0.001$ ). Anxious disorders were positively correlated to chronic diseases history ( $p = 0.001$ ) and work-bullying exposure ( $p = 0.004$ ). Conclusions: Our findings reflected a high frequency of caregivers who are under stress at work and those who are victims of moral harassment. These health professionals were at increased risk for developing psychiatric illness such depressive and anxious disorders and addictive behavior. Our results suggest the necessity of preventive strategies of occupational psychosocial constraints in order to preserve professional's mental health and maximize patient safety and quality of care.

**Keywords :** health care sector, intensive care units, mental health, psychosocial constraints

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