

# EMOTIONAL RESPONSES AND COPING STRATEGIES OF HEALTHCARE WORKERS IN PAMPANGA AMIDST COVID-19 PANDEMIC

Mary Raphaella Therese S. Bognot, Jaicen G. Capulong, Kyoka Doshita, Dominique Ann V. Miranda, Robert Erick D. Sapitanan,
Maria Angelica D. Wisco, <u>John Clint D. Yanga</u>, and John Edlor R. Jurado

Department of Medical Technology, College of Allied Medical Professions, Angeles University Foundation, Angeles City, Philippines

## **OBJECTIVE**

Healthcare workers, being the backbone of disease response, serve in the frontlines against the Coronavirus disease (COVID-19) by continually putting their lives at risk. Their role in this pandemic does not only takes a toll on them physically, but also psychologically. The study investigated the impact of the pandemic on the healthcare workers' mental health with regard to their emotional responses (anxiety, fear, sadness, anger) and coping strategies (problem-focused and emotion-focused).

## **METHODOLOGY**

ETHICAL CLEARANCE FROM AUF OVPRI-ERC

PARTICIPANT RECRUITMENT
THROUGH CONVENIENCE,
SNOWBALL & QUOTA SAMPLING

ASSESSMENT OF EMOTIONAL RESPONSE AND COPING STRATEGY

DATA ANALYSIS

## **RESULTS**

With a total of 372 respondents, the analyzed data showed the following results:

Table 1. Descriptive Statistics of Emotional Responses

Emotional Responses	Mean (SD)	Coping	Strategy	Sex	Type of Hospital	
		Problem- Focused (p-value)	Emotion-Focused (p-value)	(p-value)		
Anxious	3.60 (0.95)	0.005	0.063	0.001	0.46	
Fear	3.80 (0.95)	0.007	0.701	0.114	0.082	
Sadness	3.35 (1.03)	0.481	0.121	0.08	0.959	
Anger	2.75 (1.13)	0.333	0.000	0.062	0.983	

Significant if p<0.05

Some emotional responses are affected by factors such as sex (anxiety: p=0.001) while unaffected by the type of hospital. Likewise, Emotions are extremely expressed in people with specific coping strategies (anxiety: p=0.005 and fear: p=0.007 to problem-focused coping; anger: p=0.000 to emotion-focused coping)

Table 2. Descriptive statistics of coping strategies

Coping Strategy	Mean (SD)	Frequency (Percentage)	Sex (p-value)	Type of Hospital	
Problem-Focused	3.73 (0.71)	328 (88.17)	0.261	0.54	
Emotion-Focused	2.33 (0.69)	44 (11.83)	0.742	0.89	

Significant if p<0.05

Coping strategies are unaffected by sex and type of hospital

### Table 3. Correlation between emotional responses and coping strategies

	Anxious (pearson r)	Fear (pearson r)	Sadness (pearson r)	Anger (pearson r)	Focused (pearson r)	Focused (peerson r)
Anxious	1					
Fear	0.620**	1				
Sadness	0.589**	0.466**	1			
Anger	0.284**	0.220**	0.457**	1		
Problem- Focused	0.043	-0.072	0.043	0.091	1	
Emotion- Focused	0.143**	0.166**	0.262**	0.325**	-0.160**	1

Significant if \* = p<0.05, \*\* = p<0.01

There is a positive association among emotional responses (r>0, p<0.01), and emotional responses to emotion-focused coping (r>0, p<0.01). While there is a negative association between the two coping strategies (r= -0.160, p<0.01)

# **CONCLUSION AND RECOMMENDATIONS**

- •The findings also reflect how sex and the type of hospital affect the healthcare worker's well-being; with this, the healthcare system can focus on the workers who comprise the more vulnerable categories.
- •Future researchers are to consider comparing the Rural and Urban areas since this would help in comparing the degree of psychological distress between the two since healthcare workers from different places have varying levels of crises in line with the situation. Likewise, to use a wider population and greater number of respondents to make the results more accurate.