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ANXIETY, HOPE AND BURNOUT IN CAREGIVERS OF ELDERLY PSYCHOTIC PATIENTS DURING THE COVID-19 PANDEMIC

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Introduction

The assessment and management of patients suffering from serious physical or psychological pathologies require an integrated diagnostic and therapeutic pathway. The Covid-19 pandemic has increased the workload of healthcare workers (HCWs). Working under stressful conditions has become harder for HCWs who take care of people affected by serious and chronic physical and psychic pathologies. Psychiatric pathologies in patients who are over 65 years old are responsible for important consequences on their healthcare workers' psychic and physical health (anxiety, hopelessness, burnout)[1].

Method

In our observational study, an exploratory design, fifty-seven (57) HCWs were included in the study (31F; 26M; mean 43.63 years). The HCWs were selected from a larger group of health workers (n. 57/124: 45.97%) in psychiatric rehabilitation centers (Table 1 – Demographic data HCWs).

An inclusion criterion for HCWs was the care to patients ≥ 65 ys with primary psychosis. All selected patients had a total score on the B.P.R.S. ≥ 35. The HCWs were scheduled in two times (T0 and T1). T0 (September - October 2020) vs T1 (July - September 2021).

All caregivers (HCWs) (Clinicians / Psychiatrists; HealthCare Assistant; HealthCare Workers, Health Educator; Nurses; Psychiatric Rehabilitation Technicians; Psychologists; Social Care Worker) were administered the following diagnostic assessment scales in times T0 and T1:

- ProQoL (Professional Quality of Life)
- CBI (Caregiver Burden Inventory)
- SAVE (SAVE-9 scale - Stress and Anxiety to Viral Epidemics- 9 items)
- BHS (Beck Hopelessness Scale)

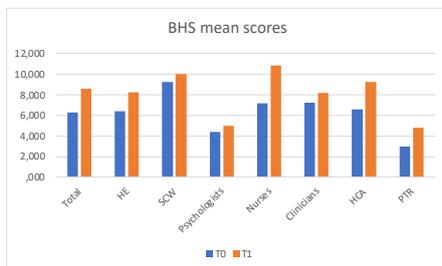
The data obtained were analyzed using the EZAnalyze 3.1 statistical analysis program, Microsoft Excel platform and p ≤ 0.05 was considered statistically significant

Table 1. Demographic data HCWs

Variable	n.	%
Gender	No.	(%)
Women	31	54.39
Men	26	45.61
Non-binary gender	0	0
Education level (degree)		
Diploma (Three years)	27	47.38
(Five years)	17	29.82
Bachelor's	7	12.28
Major degree	6	10.52
Working time in SIR		
< 1 year	5	8.77
1-5 years	13	22.80
5-10 years	12	21.05
10-20 years	11	19.29
> 20 years	16	28.09

Marital status						
	Married	%	Single	%	Widows	%
Total	34	59.65	21	36.84	2	3.51
Women	17	54.84	12	38.71	2	6.45
Man	17	65.38	9	34.62	0	0

Graphic 1 - Mean total data BHS (T0 vs T1)



Aim

To evaluate the effects of work-related stress, hope on a group of HCWs who take care of psychiatric patients residing in psychiatric rehabilitation centers.

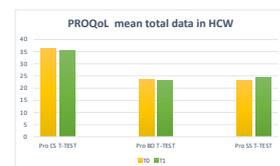
Results

The results obtained during a one-year evaluation period, in Covid-19 pandemic, showed a significant increase in stress, burnout, and anxiety in all of the examined HCWs. Instead, it was observed a decrease in work-related satisfaction. The analysis of the subgroup showed an increase in BO subscale (Burnout) in moderate-to-high values, especially in the nurses' group (T0 vs t1: 50% vs 68.75%). After one year, it was observed an overall reduction of hope (See Tables and Graphics).

Table 2 - PROQoL Percentage Subscales HCWs

		PROQOL CS		PROQOL BO		PROQOL ST	
		(%)	(%)	(%)	(%)	(%)	(%)
SCW	Low	25.0	25.0	50.0	50.0	25.0	25.0
	Moderate	50.0	50.0	50.0	50.0	75.0	50.0
	High	25.0	25.0	0	0	0	25.0
HCA	Low	12.5	0	12.5	25.0	12.5	12.5
	Moderate	62.5	87.5	87.5	75.0	75.0	50.0
	High	25.0	12.5	0	0	0	37.5
Nurses	Low	6.25	43.75	50.0	31.5	43.75	37.5
	Moderate	68.75	37.5	50.0	62.5	66.25	43.75
	High	25.0	18.75	0	6.25	0	18.75
Clinicians	Low	0	0	0	0	20.0	0
	Moderate	100	100	100.0	80.0	66.25	80.0
	High	0	0	0	20.0	0	20.0
HCA	Low	7.14	28.57	37.7	37.7	35.71	42.9
	Moderate	71.43	57.14	64.3	57.2	64.29	35.7
	High	21.43	14.28	0	7.1	0	21.4
Psychologists	Low	0	20.0	40.0	40.0	40.0	20.0
	Moderate	60.0	60.0	60.0	60.0	60.0	80.0
	High	40.0	20.0	0	0	0	0
TERP	Low	0	0	37.7	37.7	60.0	60.0
	Moderate	60.0	60.0	64.3	57.2	40.0	20.0
	High	40.0	40.0	0	7.1	0	20.0

Graphic 2 - Mean total data PROQoL (T0 vs T1)

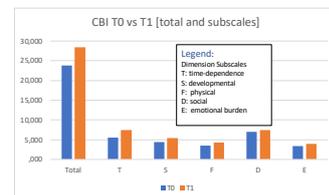


Legend:
 HCWs: HealthCare Workers; professionisti della salute
 HCA: HealthCare Assistant (in Italian: OSS: Operatore Socio Sanitario);
 HE: Health Educator (in Italian: Educatore Sanitario Professionale);
 SCW: Social Care Worker (in Italian: Assistente Sociale)
 PTR: Psychiatric Rehabilitation Technicians (in Italian: Tecnici Riabilitazione Psichiatrica)
 Nurses: (in Italian: infermieri)
 Clinicians: (in Italian: medici / psichiatri)
 PROQOL CS: Compassion Satisfaction
 PROQOL BO: BurnOut
 PROQOL ST: Secondary Trauma

Table 3- SAVE; mean total, Factor I and II HCWs

SAVE	T0	T1	p	diff T0 vs T1 significant
Total	Mean: 20.263 SD.: 7.582	20.281 6.964	.960	-
Factor I	Mean: 12.421 SD.: 5.513	13.158 5.586	.031	+
Factor II	Mean: 6.859 SD.: 3.143	7.123 2.626	.341	-

Graphic 3 - Mean total and subscales data CBI (T0 vs T1)



Conclusions

Our small observational study confirmed the results observed in our previous studies [2, 3, 4], with high levels of anxiety and stress in all HCWs. Some HCWs are more affected by the workload, such as nurses and Healthcare assistants. HCWs with a higher number of years of education were more protected from the managerial burden. However, they had an increase in hopelessness in T1. Management of elderly psychiatric patients is complex. The ability to intercept the elements of stress and the first signs of psychological distress makes it possible to implement early targeted psychological interventions. However, the limit of our study suggests a more in-depth evaluation.

References
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