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RESEARCH SUMMARIES



The Biopsychosocial and Mental Health Effects of the COVID-19 Pandemic on Healthcare Social Workers: A Mixed Method Study

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WHY WAS THIS RESEARCH DONE?

Healthcare social workers work in areas such as acute medical care, mental health and substance use services, long-term care environments and in the community. Frontline social workers provide direct emotional, therapeutic and practical support to patients, families, natural supports, and to their interdisciplinary team members. The healthcare social work role also includes system navigation, advocacy for services and acting as an agent for change.

Like many healthcare workers, social workers were also on the frontline during COVID-19, yet the impact of the pandemic on this group has been under researched. By utilizing a biopsychosocial model to examine effects on healthcare social workers, we hoped to capture a holistic picture of the impacts of navigating a global pandemic on social workers, and also unveil the potentially co-occurring mental health effects. The impact on healthcare social workers' mental health and functioning could also influence how they provide services, patient and family experiences receiving care, and the functioning of the healthcare system as a whole.

WHAT DID THE RESEARCHERS DO?

The researchers engaged Fraser Health Authority frontline social workers in an initial mixed methods study for the purpose of exploring and describing their biopsychosocial and mental health symptoms while working during the first 4 waves of the COVID-19 pandemic. A total of 12 Fraser Health Authority social workers participated in this study which used a concurrent mixed-methodology design. Qualitative interviews were conducted with each participant utilizing grounded theory methodology. Quantitative data consisted of one demographic survey and two self-report inventories (the Beck Anxiety Inventory and the Beck Depression Inventory). The inventories were reviewed to determine the current symptoms of depression and anxiety amongst participants. Participant statements from the qualitative interviews were then compared to the answers on the inventories.

Once the data analysis for this portion of the research was completed, a follow-up study was developed in order to provide additional data on frontline healthcare social workers' biopsychosocial experiences of working during the COVID-19 pandemic. The data from this follow-up study would also further delineate the initial study themes and enable the researchers to potentially create recommendations that identify how the mental health of frontline social workers can be maintained during a future pandemic. The survey questions, which included quantitative and open-ended questions, were developed based on the initial study's thematic analysis findings. The data from this follow-up study was then analyzed for patterns and themes. The themes identified from the follow-up survey were then analyzed for their convergence or divergence from the themes identified in the initial study. Through this triangulation of data, themes that best explain the combined findings for the initial and follow-up study were identified. From the identification of these themes, the researchers were able to provide recommendations on how the biopsychosocial health of frontline healthcare social workers can be maintained during a future pandemic.

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This summary was edited by Alia Januwalla, Knowledge Translation Specialist, [BC SUPPORT Unit Fraser Centre](#). Fraser Centre is jointly administered by Fraser Health DERS and Simon Fraser University.

Results of this research have been reported to Fraser Health.
To learn more, contact the investigators at Leighla.Cuff@fraserhealth.ca and Darcee.Cooper@fraserhealth.ca.



WHAT DID THE RESEARCHERS FIND?

The majority of participants from the initial and follow-up study (n=35), were employed in Acute Care (53%), had a Masters Degree (61%), had 11 or more years of experience working as a social worker (64%) and identified as a woman (94%).

Initial Study Results:

Beck Anxiety Inventory (BAI) Results:

- 90% of participants (n=10) endorsed symptoms of nervousness,
- 80% endorsed symptoms of stated being unable to relax, experiencing fear of the worst happening, and feeling scared
- 60% scored in the mild anxiety symptom range.

Beck Depression Inventory II (BDI II) Results:

- 89% of participants (n=9) endorsed feelings of tiredness/fatigue and a general loss of interest
- 78% endorsed increased feelings of self dislike, self criticalness, and a loss of pleasure.
- 67% of participants who completed the BDI II scored on the Mild-Moderate Depression Symptoms

Qualitative interviews (n=12) supported these mental health findings. Comments include:

"I think my mental health has definitely suffered and it's made it harder to be emotionally available to our clients and our families."

"I felt really depressed and I felt really hopeless, and I felt like things aren't going to change...I couldn't really see the light at the end of the tunnel."

Further thematic analysis of the qualitative interviews revealed that social workers' feelings of uncertainty in how to maneuver aspects of safety in the biological, social, and psychological realms while working during the COVID-19 pandemic negatively impacted their mental health. These thematic results helped inform the follow-up study questions.

Follow-up Study Results:

The follow up survey results supported the findings from the initial study.

Participants completing the online follow-up survey (n=23) expressed an impact on their mental health:

- 91% of participants indicated that stress, anxiety, and overall mental health at work worsened since the pandemic
- 87% of participants stated worsening mental health symptoms
- 74% of participants mentioned specific mental health symptoms in their qualitative responses

Comments from participants included:

"I am feeling much more anxious and mentally exhausted since working during the pandemic. Social Work... is already emotionally heavy work but to have to carry that alongside the unknowns of the pandemic has compounded...burnout."

"Increased stress and anxiety has led to increased consumption of alcohol-from 3 drinks per year prior to [COVID] to multiple days per week during the first 2 years of the pandemic. Increased fatigue and weariness, low mood, increased irritability."

"I am constantly fatigued. I do not feel that I am working at the level that I am accustomed nor that level that I professionally expect of myself."

Further thematic analysis confirmed the initial study findings that social workers' feelings of uncertainty on how to maneuver aspects of safety in the biological, psychological, and social realms while working during the pandemic negatively impacted their mental health:

(1) Biological Safety: Participants noted a lack of personal communication, constant changes with pandemic guidelines, fear for safety, and uncertainty about their physical wellbeing.

(2) Psychological Safety: Participants noted feeling loss of control, having no guidance on how to stay safe in their professional responsibilities, and not feeling valued for their skillsets by management and others in the healthcare system

(3) Social Safety: Workload and working short staffed, unable to meet patient family needs, COVID debates, being blamed or yelled at, and isolation from peers.

The quantitative and qualitative findings lead the researchers to presume that a sense of certainty around safety could have been a protective factor for social workers' mental health while working during the COVID-19 pandemic.

HOW CAN THE RESEARCH BE USED?

The results of this study will be shared with Fraser Health Social Work Leaders (Supervisors, Coordinators, and Practice Leaders) and Fraser Health Leadership (Managers and Directors).

The findings have informed a series of recommendations for leadership in the hopes that frontline healthcare social workers' mental health can be maintained during future pandemics. These recommendations will touch on

(1) Communication (2) COVID and Social Work Clinical Guidelines (3) Acknowledgement and Value (4) Social Work Environment and Perspective (5) Tailored support to social workers' unique role.

We hope that these findings will translate to targeted services and support systems that will benefit frontline healthcare social workers, and in turn impact the quality of care that is provided to patients, clients, and families.