MENTAL WELLBEING AND THE HEALTH CARE PROVIDER.

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ABSTRACT

Background:

Health care professionals are prone to increased mental health problems. The mental wellbeing of health care professionals plays a significant role in coping with daily stress and has been found to be suboptimal.

Body:

Health care workers around the globe suffer from high levels of work-related stress, burnout, anxiety, depression, alcohol, and substance abuse when compared to the general population and have been shown to generally have poor exercise habits, diet, and mental wellbeing. This cannot be attributed to a single cause or group of causes, but rather is an interplay between occupational, individual, socioeconomic, and inter-personal factors.

Conclusion:

Health care professionals need to make healthier lifestyle choices and health organisations need to create a mentally healthy work environment to decrease the prevalence of mental illness and improve mental wellbeing.

"These are the duties of a physician, first to heal his mind and to give help to himself before giving help to anyone else" — The epitaph of an Athenian physician 2AD.

THE RISK FOR MENTAL HEALTH PROBLEMS.

Being a health care service provider requires that the individual delivers care and services to the sick and ailing either by working directly with them as doctors and nurses or indirectly, health care assistants. Health professionals are prone to increased mental health problems despite having "protective" factors from mental illness such as a career, relative financial stability, and high social status as in the case of doctors. These protective factors interact with risk factors for mental illness which they share with the general population such as genetic predisposition to mental illness, early life psychological trauma, etc. Despite these, they are still at an increased risk for mental illness than the general population.1 The mental wellbeing of health care professionals plays a significant role in coping with daily stress, protection against illnesses, equipping them with resilience, improving physical health, mental health, interpersonal relationship and quality of life. The overall mental wellbeing has been found to be suboptimal in health care professionals, particularly in doctors.

Research has consistently shown that health care workers around the globe suffer from high levels of work-related stress, burnout, anxiety, depression, alcohol and substance abuse when compared to the general population.^{2,3} Of the health care professionals, and when compared with other professionals and the general population, doctors have been shown to have higher rates of depression, anxiety, alcohol and drug abuse, and suicide. The prevalence of mental illness in doctors varies and is often a topic of contradiction. Doctors are faced with a great number of risk factors for mental illness from their jobs - such as long hours and poor resources to work with, lifestyle, their individual lives, including past trauma, and socioenvironmental factors such as the constantly

increasing risk of litigation when trying to offer care to their patients.^{4,5}

Certain individual factors predispose health care professionals to poorer mental wellbeing and increased risk of mental illness. Health care professionals in general have poor exercise and diet. Ahmad et al.6 found that about 75% of doctors in Pakistan did not perform any form of exercise, majority of the sampled doctors worked greater than 40 hours a week and slept less than 7 hours a day. Also, health care professionals especially those from low and middle-income countries tend be overweight, eat less fruits and vegetables, consume larger food portions and have poorer exercise culture than their counterparts in higher income countries who are still below the recommended values.6 These lifestyle factors when adequate have been shown to improve mental wellbeing and prevent mental illness.

Doctors working longer hours are more vulnerable to psychological and emotional disturbances. Medical students and junior doctors (house officers and junior residents) are more likely to be formally diagnosed with a mental disorder and are less likely to access mental health care than senior doctors.7 Haoka et al.8 studied 549 first-year medical residents to determine the effect of stress-related factors on their mental health. He found that resident doctors with poor mental health as derived from mental health screening using the General Health Questionnaire (GHQ) -12 scores were more likely to have less sleep duration, more workload, more problems with personal relationships and less reward from work. A sense of coherence i.e., a person's ability to cope and deal with everyday life stressors, had a positive effect on one's mental health status. This shows that work conditions as well as attitudes towards these conditions have an impact on the mental health of doctors. Ogualili et al.9 sampled some Nigerian doctors working in public settings, private settings or both, and

found that 48% of them worked 60-89 hours a week and had a high rate of work-related problems. Although they screened high for mental health problems with higher rates for anxiety than depressive symptoms, none of them had ever sought psychological help for their psychiatric morbidity. Another sample of Nigerian female doctors were also screened for mental health problems and showed a 23.8% morbidity.¹⁰ prevalence of psychiatric Psychiatric morbidity in this group of female doctors was associated with numerous social and occupational factors such as relationship with co-workers, frustration and anger at work, age and access to maternity leave.¹⁰

It is thus obvious that the increased prevalence of mental health problems and disorders in health care professionals, particularly doctors, cannot be attributed to a single cause or group of causes, but rather is an interplay of occupational, individual, socioeconomic, and inter-personal factors which could confer risks or act as protective factors to mental illness. Another angle worth exploring in the search for the cause of increased mental health morbidity and poor mental wellbeing in doctors is the personality traits that makes a good doctor. The average doctor is chosen for certain traits which although are good for the occupation, predispose to mental illness. These traits include perfectionism, obsessiveness, competitiveness, ambition, drive, and compulsiveness.¹ Job satisfaction has also been linked with poor mental wellbeing among Time pressure, poor environment and communication, failed career and goal achievement have been linked with poor job satisfaction and as such poor mental health.¹¹ In the present circumstance of the COVID-19 pandemic, there is increased strain on health care systems. exhaustion and fatigue of health care workers is becoming a norm and with it, a drop in health care performance.¹²

OVERCOMING THE MENTAL HEALTH CHALLENGE

Despite the variable factors linked with poor mental health among health care professionals, it is of utmost importance that measures be put in place to improve the mental health of those that provide health care to the general population. Organisations can connect staff through group meetings for mindfulness training and resilience building in designated common rooms to help promote positive mental health.¹³ Resources should be allocated to the promotion of health workers' mental wellbeing to help prevent the onset of mental illness. Linking of mental health professionals to health care workers that need mental health attention should be done regularly without the fear of stigmatisation. Annual mental health screening should be incorporated mandatory health checks and healthy work hours should be advocated for.

As health care workers, while bearing in mind that we cannot change our genetics and as such our predisposition to mental illness, we can strive to promote positive mental health for ourselves and our colleagues. Adopting a lifestyle medicine approach such as, participation in recreational sports and exercise, decreasing alcohol consumption, promoting a positive work environment and decreasing hours spent working even when not at work, could help decrease work stress and burnout and as such promote mental wellbeing.

CONCLUSION

Health care professionals are generally more at risk of poor mental health and mental illness than the general population, with doctors having a higher prevalence of depression, anxiety, alcohol and substance use disorders as well as suicide. There are no clear factors responsible for this increase, rather a combination of genetic factors, personality traits, occupational factors and early life

traumatic experiences coming together without a clear formula of association and culminating in this increased risk. The onus now lies on both the health care professional to make significant healthy lifestyle choices, and the organisation to create a mentally healthy work environment to decrease the prevalence of mental illness, burnout, and fatigue in this workforce.

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