ORIGINAL ARTICLE

Psychological Impact of Covid-19 Pandemic on Mental Health Practitioners in Selangor, Malaysia

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ABSTRACT

Introduction: The Coronavirus disease pandemic of 2019 (COVID-19) has had psychological implications and altered the public's well-being. In response to the pandemic, mental health practitioners play an essential role in mitigating the adverse psychological effects among the public. However, as the demand for mental health services increases, the responsibilities of mental health professionals are far stretched from what they can handle. Therefore, this research is aimed to explore the psychological impact of the pandemic on the mental health practitioners in Selangor and their coping strategies. **Method:** A total of 10 mental health practitioners who are clinical psychologists and counselors participated in the one-to-one interview. The collected data were analysed using thematic analysis. **Result:** The higher client loads, the transition to virtual therapy, burnout, and anxiety were found to have an impact on the mental health practitioners' well-being. Despite the challenging psychological impact, the mental health practitioners expressed a high level of satisfaction with their jobs, which they attributed to the supportive organisational culture and their intrinsic drive for selecting this profession. The mental health practitioners have reported that perceived organisational support, social support, and self-care approaches are effective coping mechanisms. Mindfulness skills such as breathing techniques and meditation are often practiced by the participants to calm the mind and body from a long day of work. **Conclusion:** The implication of the study contributes to breaking the stigmatisation of help seeking behaviour among the helping professions, as well as urging the policy makers, governments, and foundations to play a part in providing accessible and quality mental healthcare to the society.
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INTRODUCTION

Coronavirus disease 2019 (COVID-19) is an infectious disease that is transferred mostly through minute droplets, such as those produced by talking, sneezing, or coughing, among other things (1). Infection with the disease is accompanied by symptoms such as fever, cough, weariness, and breathing difficulties, which are all regularly reported. Because of the threat of impairing the human immune system and the possibility of death cases, the condition has gained international attention. (1) In addition, spreading to loved ones also causes one to think too much and causes them worry and stress. This clearly shows that it affects their daily emotions and can lead to other mental disorders (2).

The combination of well-being, quality of life, and guidelines for individuals to achieve their goals can be defined as happiness since it leads to joy (3). Positive feedback loops are created when psychological well-being improves in conjunction with physical and mental health improvements (4). The psychological well-being of the general public has been jeopardized as a result of the outbreak of the pandemic in facing the extreme measures implemented by the government to combat it (5). In fact, according to the findings of the systematic review conducted, suicide attempts in Malaysia related to underlying issues such as unemployment and financial difficulty because of the epidemic (6). According to studies, the increasing lack of social contact during the pandemic has resulted in heightened levels of sadness, anxiety, and suicide ideation (7). Moreover, untreated negative feelings such as shame and guilt might result in post-traumatic stress disorders (PTSD) (8). As a result, there has been a rise in the need for mental health services because of mental and behavioural illness (9).

The roles of mental health practitioners are pivotal in this psychosocial crisis. The duties and responsibilities of mental health practitioners include screening for those

who are in distress (10) and providing psychological first aid to the affected individuals (11). However, with a shortage of mental health professionals in Malaysia and an escalating demand for mental health services, the psychological well-being of mental health professionals is undoubtedly sabotaged (12). To accommodate the psychological burdens that arise from this pandemic, mental health practitioners are exposed to increased levels of burnout (13). Among the factors that contribute to burnout are the tremendous workload, difficult customers, performing managerial responsibilities, and a lack of qualified personnel in the field of mental health services (14). The stress of being overworked has also resulted in negative consequences such as health problems, interpersonal troubles, and psychological disorders (15).

Besides, mental health practitioners are faced with the risk of secondary traumatic stress (STS) due to direct and constant dealing with the raw experiences shared by the traumatized clients (16). Secondary traumatic stress (STS) is the stress from supporting the traumatized victims (17). As this pandemic is described as a psychological trauma (18), the wellbeing of mental health practitioners is affected with poor sleep hygiene, tense relationship, and major depressive disorder due to secondary traumatic stress (19).

The mixture of burnout and secondary traumatic stress is known as compassion fatigue (20). As empathy is essential in the mental health service, mental health practitioners are defenceless against the risk of compassion fatigue (21). Compassion fatigue exists among mental health practitioners as the physiological and psychological exhaustion dealing with day-to-day activities and the people who are not within the boundaries of therapeutic relationship (22). Compassion fatigue should not be taken lightly because it can lead to self-loathing, absenteeism, severe health issues and many other work-related pressures (21).

There has been a great deal of research about the COVID-19 pandemic, particularly into the well-being of doctors and healthcare workers (23, 24), but only a handful are concerned with the psychological well-being of those who work in the field of mental health (25). Since mental health service providers play a critical role in mobilising the broader healthcare system to combat the pandemic, it is imperative to ensure that their psychological well-being receives equal attention to the psychological well-being of the general public (12).

Therefore, this study aimed to explore the psychological impact of COVID-19 pandemic on the mental health practitioners in the state of Selangor. Furthermore, the purpose of this study was to investigate the coping strategies of mental health practitioners during the COVID-19 pandemic.

MATERIALS AND METHODS

This study utilized a qualitative research method with phenomenology approach to meet the research objectives of this study. Qualitative method takes on a person-centred and humanistic technique to find out the mental health practitioners' personal knowledge (28). Whereas the phenomenology approach is suitable to understand the stance of those who have experienced the phenomenon (29). The purpose of utilising this approach is to come out with an interpretation of the essence of the phenomenon (26). Therefore, the qualitative research method with phenomenology rationale for this study to capture the experience of mental health practitioners in Selangor, Malaysia during the COVID-19 pandemic.

Procedure
To identify possible participants, the researcher contacted acquaintances who work in the mental health profession. Through an information letter, mental health practitioners who met the inclusion criteria (21 to 60 years old Malaysian male or female who have at least one year of working experience as a mental health practitioner in the state of Selangor (27)) were informed about the study. Before participating in the study, mental health practitioners were asked to provide informed consent as well.

Semi-structured interviews consist of open-ended questions and follow up questions rather than just sticking with the fixed sets of questions used in one-to-one sessions with the participants. (30) The interview questions in this study were developed based on the previous literature from similar studies (31) and current research aims. Each of the questions is aimed to extract the mental health practitioners' perceptions and sentiments about the current pandemic scenario. The mental health practitioners were asked about their roles as mental health professionals throughout the pandemic, which was followed by another round of questioning. Researchers were able to look deeper into the problems that mental health practitioners are encountering because of the pandemic by asking these questions. The psychological well-being of mental health practitioners is therefore explored by the researchers.

The interview questions were assessed by a field expert, who had been appointed to the position. Based on constructive comments, the questions were revised. The credibility and trustworthiness of the instrument in this study were established through the process of pilot study that was conducted before the data collection process. To ensure the data saturation, the interviewer investigated the topic of interest with the respondent until there is nothing left to add. For example, this was done by using questions at the end of the interview such as 'Anything else?' or 'Do I need to know anything other than what I have asked you?' This is done to ensure that saturation has been achieved; that there is nothing else

to add to the topic of interest. Whereas for credibility, the researchers used the triangulation of sources. The mental health practitioners were interviewed at different points in time and the different perspectives were compared with others.

Data Analysis

The collected data was analysed using thematic analysis for identifying, analysing, and reporting recurring patterns within the data collecting, which were categorised as distinct themes under which the relevant portions of information belong (32). For themes to be extracted from the data, detailed information was required; the purpose of the extracted themes was to successfully answer the research questions posed in this study.

Ethical Clearance

This study was approved by Research Ethics Team, Department of Psychology, Faculty of Social Sciences and Liberal Arts, UCSI University No. 09/2021-05/IPA/2021

RESULTS

Seven female and three male mental health practitioners from Selangor, with ages ranging from 28 to 41 years old were recruited. Eight clinical psychologists and two counsellors participated in this study, with seven of them working in private practice and three working for non-profit organisations. A sample size of 5 to 25 individuals is recommended for phenomenology (26); consequently, the sample size used in this study is appropriate. The summary of the participants demographic information is shown in Table I.

This study found two themes such as psychological impact of COVID-19 pandemic on mental health practitioners and coping strategies of mental health practitioners. The description of the results is as below.

Psychological impact of COVID-19 pandemic on mental health practitioners

Based on the analysis, the increased client loads during the COVID-19 pandemic has contributed to burnout among mental health practitioners. Due to the transition from face to face therapy to virtual therapy, mental health practitioners tend to take up more clients as compared to pre-pandemic due to the convenience of virtual platforms. As a helping profession, the mental health practitioners were experiencing anxiety and episodes of panic attack due to the overwhelming pandemic-related concerns that arose from the clients.

Client loads

The mental health practitioners reported that there is an increase of client loads during the pandemic. The factor that contributed to the increase in client load is due to the growth in awareness about mental health care. The COVID-19 pandemic has affected the psychological

Table I: Demographic information

ID	Age	Gender	Ethnicity	Occupation	Year of experience
P1	36	Female	Chinese	Clinical Psychologist	13
P2	29	Male	Chinese	Clinical Psychologist	4
P3	28	Female	Chinese	Clinical Psychologist	4
P4	31	Female	Chinese	Counsellor	6
P5	28	Female	Malay	Clinical Psychologist	3
P6	41	Male	Indian	Clinical Psychologist	6
P7	32	Female	Chinese	Clinical Psychologist	7
P8	28	Female	Chinese	Clinical Psychologist	2
P9	29	Female	Chinese	Counsellor	3
P10	28	Male	Chinese	Clinical Psychologist	2

wellbeing of everyone. Hence, the public acknowledged the need to prioritise and manage the mental health of everyone.

"The workload is starting to become more and more and more… It started from that one particular crisis, then it becomes a lot more people are, you know, people are more aware of mental health, people are starting to reach out, which is good." (P5, 28)

On the other hand, the mental health practitioners revealed a decline in client loads during the pandemic. The reason for the drop in the number of clients is due to the limited access to internet, thus restricting the option of online therapy for clients without stable internet connection. Besides, clinical psychologists described the obstacle of online therapy, which is the lack of safe space in the personal settings of the client. For instance, the client who experienced domestic violence would not be able to undergo online therapy safely in home settings.

"I think during the pandemic actually reduces because they cannot have the physical session. I guess it's the same for like most of the private practice. And then I guess even in the government setting and all that, they will kind of only prioritize if you we need that you can't prevent the risk and all that. So it actually reduce, although maybe there isn't the main more people are like struggling in terms of mental health and all that. But those who actually seek out probably less, because of the limitation lah. Now that we cannot go out all that and not everyone has like, the internet and not everyone

is comfortable using the internet platform and all that. But now, once like the physical session can be resumed basically it goes back to the usual load." (P7, 32)

Transition to virtual therapy

The transition to virtual therapy emerged as one of the psychological impacts of COVID-19 pandemic on mental health practitioners. Prior to the pandemic, virtual therapy was not a norm among the mental health care industry. Due to the lockdown restrictions, mental health practitioners who worked in private settings started working from home and conducted virtual therapy for existing and new clients. The mental health practitioners highlighted the benefits of virtual therapy, such as the convenience of conducting the sessions at anytime and anywhere.

"Before COVID also mainly because I'm seeing physical, face to face, there's not so many clients to be, yeah, to begin in the first place and secondly because of the, of the room availability itself, sometimes we don't get to do that right now because it's so convenient, it's virtual online, so I can actually do that anytime I want. Uhm, I can, yeah it's easy for me to arrange." (P2, 29)

Therapist burnout

The mental health practitioners revealed that they experience burnout due to the increased workload. When being questioned about the consequences of burnout, physical and emotional exhaustion were mentioned by the mental health practitioners.

"I realized that it was making me feeling demotivated, sometimes it's making me really, really stressful, really tiring. I'm afraid of my physical health. Also, I'm not sure how, how bad is my physical health status. But yeah, I'm not having issues with sleep and eat and all but it's just I'm delaying my sleep, my mealtime is irregular." (P2, 29)

Anxiety

The mental health practitioners reported that the new norm of the pandemic made them feel anxious. The main cause of anxiousness was because of the uncertainty about the fluid standard operating procedures for mental health centre during the lockdown. While common anxiousness was experienced by the public, the participant disclosed episodes of panic attack due to the overwhelming influx of new clients and spike in COVID-19 positive cases.

"I remember during that time, I have a new batch of clients coming in into the app and so apparently the clients most of them are also going to burnout because the industry that they are in is also not doing well. So those who comes in, I think about hundred-ish I can't remember how many but about hundred-ish, I would say about seventy of them have high risk DASS score, like DASS score is high and then I remember having

them on board, then after that I check my phone or you know you know the usual family group, how many cases today and all I remember looking at the number, started to have five digits and from there on there I actually got my panic attack." (P5, 28)

Enjoyment of work

The mental health practitioners expressed high satisfaction and enjoyment in their career. Despite the challenging aspects of the job, the profession of mental health practitioners is described as a meaningful helping profession that enables them to learn more about themselves.

"Yeah, I thoroughly enjoyed, I thoroughly enjoy, you know, mental health work, the work that I'm doing and the work that I'll continue doing, I thoroughly enjoyed. There are time where it's really challenging, there are times when it gets quite stressful. Not that it get, there are times when it was, I think that along the way I've learned, as I kept on learning and studying and getting to know myself and reflecting." (P6, 41)

Coping strategies of mental health practitioners

Perceived organizational support

The first coping strategy emerged most from the participants' narrative is regarding the perceived organisational support from the workplace. The mental health practitioners revealed that they benefited from the regular supervisions and training provided by their organization. The group supervisions allowed the mental health practitioners to find emotional support among their colleagues within the organisation. Concurrently, the mental health practitioners highlighted the importance of understanding and caring superiors towards the practitioners during the pandemic.

"So supervision play a very important role in helping me because my supervisor is someone that's experienced and in know, in all of our job, and, and all that, so they can support me and providing me, not just emotionally support me, but also giving me some of the skill? And also the yeah, so the skill and also at why is that, how can I handle the cases better." (P4, 31)

"These two places that I work at have generally a good ethics when it comes to taking care of the employees. They do send care packages they do, like, you know, check in they have like, supervisors checking in with you. They do check in with me, right, they do drop message and everyone that is very supportive. And I'm also grateful that you know. (P10, 28)

Social support

Both friends and family members were mentioned as the significant social support among the mental health practitioners. Family members were described as supportive and encouraging towards the mental health

practitioners.

"And at the same time, I think social support is my, my, my husband, he's also very supportive to me, and also my family, my family, they're really, really support me, they never say no, on my decision, and they just say just go ahead, their belief on my ability. So I think this is so very strong psychological support for me." (P4, 31)

Self-care techniques

The mental health practitioners revealed self-care techniques, such as mindful breathing and setting boundaries. Mindful breathing techniques were mentioned by the mental health practitioners as part of their self-care routine daily, especially after therapy sessions.

"I think normally what I'm using is mindfulness being mindfulness, like what I'm doing right now. And I also can only care about now movement. That's, that's the only thing that I can do for myself. I couldn't really like worry too much about the future or what, what else I can I can do to help myself because that's the only thing I can do myself. So mindfulness is a really good tools for me to help myself to be more calm and all that." (P4, 31)

The mental health practitioners emphasized on the importance of setting healthy boundaries when it comes to work-life balance. This was highlighted to reveal how the participants cope with working from home and seeing more clients in therapy sessions.

"I think another things are very important is we have to set the boundaries especially now we work from home so I think boundaries is very important especially you have to set the time and after work then you have really to off from your laptop and all that and then to have your own me time, have your own self activity not just about work and then maybe sometimes like my Whatsapp, I also will off that as well. So I really will I take care of myself because I understand that as a mental health practitioner you have to take care of yourself only you have the energy and also your you know your focus and your attention to give to your client as well you can give, you need to give the best to yourself that only you can give your best to your client as well. So boundaries is another thing I think I have to tell others as well to set that now have some time for yourself to have like reading or maybe just watching a movie or a drama and just have fun." (P4, 31)

The psychological impact of the pandemic on the mental health practitioners are client loads, transition to virtual therapy, anxiety, burnout, and enjoyment of work. The coping strategies utilized by the mental health practitioners are perceived organisational support, peer support, and self-help techniques.

Table II describes the summary of the themes identified

Table II: Themes and research objectives of this study

Research Objectives	Theme	Description
1. To explore the psychological impact of COVID-19 pandemic on the mental health practitioners.	Psychological impact of COVID-19 pandemic on the mental health practitioners	Psychological impact of COVID-19 pandemic on the mental health practitioners includes client load, transition to virtual therapy, therapist burnout and anxiety.
2. To investigate the coping strategies of mental health practitioners during the COVID-19 pandemic.	Coping strategies of mental health practitioners	Coping strategies of mental health practitioners include perceived organizational support, social support and self-care techniques

in this study based on the research objectives.

DISCUSSION

The findings show that mental health practitioners are impacted by the increased number of clients, the move to virtual treatment, burnout, and anxiety during the pandemic. Due to the negative life events of the pandemic, mental health practitioners have noticed an upsurge in the demand for online treatment sessions from the public. For example, a cross-sectional survey conducted in Malaysia discovered that a considerable proportion of people in Malaysia had experienced moderate to remarkably prominent levels of psychological distress because of the COVID-19 outbreak (33). The pattern of people seeking care is consistent with prior research indicating a rise in stress, sadness, and anxiety symptoms among Malaysians (34). However, the mental health professionals at the centre reported a decline in the number of clients attending therapy sessions. The plausible cause of the decline in the number of clients is explained by the lack of access to a quiet and secure environment at home, making internet therapy sessions unsatisfying for clients. Additionally, mental health practitioners find it challenging to conduct clinical assessments with the existing clients because most of the clinical tools are to be performed within the physical settings. During the initial stages of the pandemic, the stringent standard of procedures implemented by the government also act as a barrier for clients to return to physical therapy sessions in fear of getting infected with the COVID-19.

Burnout is a problem for mental health professionals due to many factors during pandemic. The practitioners showed symptoms such as increased working hours, lack of enthusiasm in leisure activities, physical fatigue, and low immune systems. The work settings of the mental health practitioners are home-based and have a low level of physical proximity with others. Therefore, the work transition has caused mental health practitioners to work overtime during the evenings and weekends in order to cater to the needs of the clients who opt for therapy after working hours. The underlying cause of burnout is found in the sense of responsibility carried by

the practitioners towards clients.

The uncertainty and severity of the COVID-19 pandemic have heightened the sense of anxiousness among the mental health practitioners. Mental health practitioners reported incidents of emotional breakdown and relapse of panic attacks, especially on occasions where standard operating procedures tightened and COVID-19 daily cases surge. This observation exposed the vulnerabilities of mental health practitioners who also experienced the same emotions as the public in faced with the unknown. Help seeking behaviours were lacking among the mental health practitioners and warning signs of burnout were ignored. The stressful workload of mental health practitioners comes from facing and dealing with the psychological distressed clients daily (35). Therefore, it is a misconception to think that mental health practitioners can handle their emotions well just because of the nature of their profession. In fact, mental health practitioners are also human beings, just like the public, who go through a roller coaster of emotions like stress, fear, depression, guilt, frustration and more throughout this pandemic (12).

One unexpected finding was despite the psychological impacts experienced by the mental health practitioners, none of them were willing to give up on their current profession. The practitioners did not regret choosing their career as clinical psychologist and counsellors even during the psychological traumatic pandemic that caused distress to the public. This is because the practitioners did not view their relationship with clients as a doctor-patient relationship, rather they engaged in a therapeutic alliance with the clients, with both parties working on a mutually established therapeutic goal. Therefore, the practitioners also experienced a sense of fulfillment being both the giver and receiver in this therapeutic alliance with their clients. In fact, the mental health practitioners took pride in their line of work as meaningful individuals who attended to the psychological needs of the public during the pandemic. A similar attitude was observed among the Malaysian COVID-19 frontliners who display deep passion and self motivation in their occupation in spite of the harsh circumstances that arose during the pandemic (36).

In line with the second research objectives, the results revealed several coping strategies adopted by the mental health practitioners. The findings suggest that organizational support is an essential support provider for mental health practitioners. The mental health practitioners believe that group supervision and training are useful as it provides different perspectives of thoughts to their clinical practice. As a result, they feel supported by the constructive feedback acquired from their supervisors during the supervision and training. This finding is consistent with previous research that supports the benefits of group supervision in psychotherapy as professional contacts between supervisors and supervisees to improve therapeutic skill building (37).

Another prominent coping strategy of the mental health practitioners is by attending therapy sessions to cope with burnout. Complimentary therapy sessions are provided by the organization as part of employee support initiatives to care for the psychological well-being of mental health practitioners. Therapy is proven to be beneficial for practitioners' personal and professional development. (38) Among the advantages of treatment, mental health practitioners experienced a rise in empathy and emotional functioning, as well as a decrease in unfavourable attitudes toward clients (39).

In addition, mental health practitioners cope by having strong social support among family and friends even during the lockdown. The lack of face-to-face contact during lockdown has prompted more efforts to connect with others via virtual messaging platforms, such as Facebook messenger, WhatsApp, WeChat, Line, and more applications. This discovery is consistent with recent studies indicating an increase in social support during the epidemic (40, 41). Besides, this is aligned with one of the previous research which indicating that academics in the private sector who received support and cooperation from colleagues felt more fulfilled at work and were able to maintain a distinct attitude in both the professional and personal realms (2).

Lastly, mental health practitioners practiced self-care techniques to cope with the psychological impacts of the pandemic. The self-care techniques like grounding exercise, breathing techniques and meditation have increased self-awareness and decreased the symptoms of burnout among the mental health practitioners. Another necessary self-care technique for mental health practitioners is by setting boundaries between clients and therapists. In order to avoid burnout, mental health practitioners capped their client loads to a maximum of seeing three clients a day. This practice is essential for the practitioners to spend time on post-therapy reflections on the clients and own therapeutic experiences.

CONCLUSION

This research sets forth to study the psychological impact of COVID-19 pandemic towards the profession of mental health practitioners Malaysia and their coping strategies. The key findings of this study showed high intrinsic motivation among the mental health practitioners who perceived this profession as highly rewarding and meaningful. Some of the prominent ways to support the wellbeing of mental health practitioners stems from the organisational support and working cultures among supervisors and peers. On a personal level, social support and self-care techniques are equally significant for coping among mental health practitioners.

The research has provided an insightful contribution

to examine the psychological impact of the pandemic towards the mental health practitioners. With the learning of the current state of mental health practitioners, interventions and support can be provided by the governing association and employers to better support the mental health practitioners within the organizations. By prioritising the mental health of the mental health practitioners, the practitioners will be well cared for to provide psychological services as the pandemic progresses.

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