





# **CONVERGE COVID-19 Working Groups for Public Health and Social Sciences Research**

#### **Research Agenda-Setting Paper**

This paper was written to help advance convergence-oriented research in the hazards and disaster field. It highlights areas where additional research could contribute new knowledge to the response to and recovery from the pandemic and other disasters yet to come. Questions about the research topics and ethical and methodological issues highlighted here should be directed to the authors who contributed to this paper.

### Working Group Name:

COVID-19 and Healthcare Workers in Turkey

## Working Group Description:

The mental health effects of the COVID-19 pandemic on the general population have now been widely studied. Studies on healthcare workers are also increasing; they are expected to be at higher risk than the general population in terms of physical and mental morbidity. This Working Group focuses on the extent of psychological trauma related to COVID-19 among healthcare workers (e.g., doctors, nurses, paramedics, etc.) in Turkey, and will discuss and examine the predictors of their psychological status. It is well known that not everyone is negatively affected by traumas. We, therefore, want to assess possible positive psychological outcomes among healthcare workers, as well. To do this, we will include measures of resilience and posttraumatic growth in our assessment battery.

#### **Priority Research Topics and Specific Research Questions:**

Priority Research Topics		Potential Research Questions
1.	Determine the COVID-related anxiety and depression levels in health-care workers.	<ul> <li>Are the levels measured by valid questionnaires higher than expected (for the general population)?</li> <li>Are there differences between different professional groups (e.g. doctors, nurses) in terms of anxiety and depression?</li> <li>Do the anxiety and depression levels correlate with COVID-19 exposure?</li> </ul>
2.	Determine the levels of resilience in health-care workers.	<ul> <li>Are the resilience levels higher than expected for the general population and for healthcare workers specifically?</li> <li>Are there differences between different professional groups (e.g. doctors, nurses) in terms of resilience?</li> <li>Do the resilience levels correlate with COVID-19 exposure?</li> </ul>
3.	Determine the levels of posttraumatic growth in health-care workers.	<ul> <li>Are the growth levels higher than expected (for the general population)?</li> <li>Are there differences between different professional groups (e.g. doctors, nurses) in terms of posttraumatic growth after the pandemic?</li> <li>Do the growth levels correlate with COVID-19 exposure?</li> </ul>





4.	Determine the predictors of
	current, COVID-related mental
	health status.

What are the independent predictors of current mental health problems among health care workers, taking into account demographic, COVID-exposure, resilience and posttraumatic growth variables?

#### **Ethical / Methodological Considerations:**

Our research group members are located in three cities in Turkey (Ankara, Çanakkale, and Ağrı). We are planning to assess around 500 healthcare workers who are working at the university hospitals of those cities. After obtaining IRB approval, we will ask the hospital administrations of each hospital to forward the link of our research battery to all their healthcare workers. We are planning to collect online data. Although this will likely result in low response rates, it is almost impossible to conduct face-to-face interviews in the times of the pandemic. An alternative could be to attempt phone interviews. This would require us to obtain phone numbers of all workers, which is not possible at this time.

Responding to a questionnaire over the internet has its advantages, mainly that of anonymity. On the other hand, online data collection may lead to a bias that is hard to prevent: it is reasonable to assume that familiarity and frequency of email use will relate to educational level. We will, therefore, be more likely to get responses from doctors than from janitors. Our backup plan is to try to obtain phone numbers of our respondents and have them respond to our questionnaires using their phones. Since this is a study involving health assessment, we will provide contact numbers for those who need psychological help.

#### **Other Frameworks, Considerations for Collaboration, and/or Resources:**

Our Working Group has experience in the assessment of mental health problems in general, as well as the assessment of migrants. We are currently conducting a follow-up study on Syrian refugees in Turkey and want to include an assessment of COVID-related mental health problems as well. Refugees and migrants are at increased risk of acquiring COVID infection, as well as experiencing mental health distress.

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