

STRESS DURING COVID-19 PANDEMIC IN KOSOVO: A COMPARATIVE STUDY OF DIFFERENT PROFESSIONS

Delvina Beka

Fama College, Kosovo, delvina-b@live.com

Zana Qehaja

University of Tetovo, North Macedonia, zanaqehajah@gmail.com

Valbona Uka

University College, Kosovo, yuka5@live.com

Abstract: The COVID-19 pandemic has caused damage in all aspects of society and has been the cause of considerable stress during this period. Each profession has gone through difficult situations during the pandemic period, regardless of work characteristics. The pandemic has affected the course of life on a global scale in almost all countries that implement serious pandemic-related constraints on social life. Thus, it brought serious negative consequences not only for physical health but also in social, psychological, and economic terms, and many people lost their jobs during this period.

The aim of this study was to compare the stress levels of employees of different professions during the second wave of the pandemic. Given that different professions perform different tasks and face different situations, it was necessary to measure the level of stress in the six categories into which we have divided the professions.

The research was conducted through an online survey using the Stress Scale Questionnaire (DASS-21). The target population of the study is composed of people over 18 years of age and above, as well as those who have a profession in which they practice. In this research, which was conducted in the period November-December 2020, a total of 194 participants, 116 females and 78 males, with an average age of 34.

Data analysis was performed through SPSS. According to the Kruskal-Wallis analysis, there are significant differences in terms of stress levels in the categories of different professions, where the category of lawyer has the highest average level of stress and the category of psychologists resulted in the lowest level of stress during pandemic. While in other research, health workers have shown that they have experienced a very high level of stress, in our research, lawyers are those who have shown the highest level of stress, continuing with health workers, civil workers, teachers and professors, economists, and finally psychologists.

According to the findings of the study, the level of stress in Kosovo society during the situation of COVID-19 varies by profession, where the profession of lawyer shows a higher level of stress than other categories of professions. The findings of our study suggest that there is a need for accessible psychological support interventions for workers of different professions, in particular lawyers and healthcare workers. Coronavirus disease 2019 (COVID-19) pandemic is the most stressful time of entire professional career for many people. Whether they are working on the front lines or working at home, employees are in need of accessible, equitable mental health benefits. These results also lead to the interest of other researchers to look at other variables that may have influenced the results.

Keywords: *COVID-19, stress, professions, Kosovo*

1. INTRODUCTION

The World Health Organization (WHO) on March 11, 2020, declared the spread of coronavirus (COVID-19) a global pandemic. This news was disturbing and had immediate consequences in all areas of the life of the population around the world. Coronavirus (COVID-19) is an essential stressor that can cause psychological distress. Evidence suggests that individuals previously exposed to traumatic events, and especially to persistent traumatic stress, may be more vulnerable to anxiety when faced with additional stressors. Pandemics can result in certain stressors. However, the potential excessive effects of the pandemic are often overlooked, especially when it comes to the psychological impact, which may be more pronounced and last longer than the purely somatic effects of the disease (Couarraze, Delamare, Machar, & Quach, 2021).

Not only are these psychological effects important in their ability to cause mental health disorders such as anxiety, mood disorders, and post-traumatic stress disorder (PTSD), but they also play a role in adhering to public health measures, such as vaccination and social distancing and can result in socially disruptive behaviors such as civil unrest. Such a scenario is exactly the case during the COVID-19 pandemic (Cullen, Gulati, Kelly, 2020).

It should be noted that anxiety and worry are normal reactions to a situation as threatening and unpredictable as the coronavirus pandemic. Possible stress-related reactions in response to the coronavirus pandemic may include changes in concentration, irritability, anxiety, insomnia, reduced productivity, and interpersonal conflicts. This may be true for the general population, but especially for groups directly affected (e.g. health care personnel) (Taylor,

2019). In addition to the threat from the virus itself, there is no doubt that quarantine measures, which are in force in many countries, also have negative psychological effects, further increasing the aforementioned stress-related symptoms. The severity of these symptoms will depend at least in part on the duration and extent of quarantine, feelings of loneliness, fear of infection, (in) adequate information, and stigma (Brooks, 2020).

Coronavirus 2019 (COVID-19) is a contagious disease caused by severe acute coronavirus 2 (SARS-CoV-2) respiratory syndromes. The first known case was identified in Wuhan, China, in December 2019. The disease has since spread worldwide, leading to a persistent pandemic.

So far:

- Covid-19 has caused millions of deaths worldwide, as well as various health and psychological problems;
- The coronavirus is still spreading from person to person. It has been diagnosed with laboratory tests.
- Against COVID 19, several vaccines have been authorized for urgent use and vaccination is still ongoing around the world.
- Mas Measures have been taken to prevent the COVID-19 virus, in any country of the world. These preventative measures include physical distancing, wearing masks, hand hygiene, and staying away from others if you feel ill (WHO, 2020).

Stress is the psychological, physiological, and behavioral response by an individual when they perceive a lack of equilibrium between the demands placed upon them and their ability to meet those demands, which, over a period of time, leads to ill-health (Palmer, 1989).

Stress can affect all aspects of your life, including emotions, behaviors, thinking ability, and physical health. Stress brings with it emotional changes and physical disorders, such as depression, anxiety, heart attack, strokes, gastrointestinal upset, obesity, and hypertension. The higher this stress, the more it can create such symptoms:

Frequent headaches sleep disturbances, back and/or neck pain, dizziness, persistent illness, irritability, gastrointestinal problems, excessive restlessness, muscle tension, feeling overwhelmed, and having difficulty calming the mind; are just a few examples of stress symptoms (Hurely, 2019).

Similar to a previous threatening event, stress increased responses during the persistent outbreak of COVID-19 may be associated with adverse overtime physical and mental health outcomes.

Some of the stress symptoms that can be experienced during this pandemic include:

- Fear and concern for your health and the health of family members;
- Changes in sleep or eating patterns;
- Difficulty sleeping or concentrating;
- Exacerbation of chronic health problems;
- Increased use of alcohol, tobacco, or other drugs.
- Increased use of sedatives;

Therefore, the stress response, for many people during a pandemic or crisis like COVID-19, will manifest a lack of concentration, forgetfulness, pessimistic thoughts, and low energy. Knowing these responses to stress can help manifest such increased stress and know when to use stress reduction techniques that would minimize long-term consequences (Hurley, 2019).

Recently there has been some research exploring the psychological stress of the population against COVID-19, comparing levels of psychological stress among health care workers, nurses, and people in the general public, but there is still a lack of detailed studies on stress levels to various professions during the pandemic. In 2020, a study measured the level of stress between health workers and the general population. This research resulted that health care professionals had stress levels 25.8% higher than the general population ($p < 0.001$). Among health care workers, paramedical staff had stress levels 12.7% higher than physicians ($p < 0.001$). Regardless of the occupational category, women were systematically more stressed than men (between 12.2% and 20.7% depending on the occupational category, $p < 0.001$).

The main findings were that healthcare professionals were most at risk of stress during the pandemic. Among this population, paramedics were more at risk than physicians. Thus, we found higher levels of stress among healthcare professionals compared to other employees. Among health care workers, nurses are more stressed than doctors. (Luan, Pu, Dai, Yang & Wang, 2020).

Another 2020 study, conducted in China, measured the level of stress and anxiety in various occupations during the onset of the pandemic. According to the results, there is an increase in depression (17.9%), anxiety (30.3%), and stress ($n = 94$, 13.7%) in our sample. Occupations that were vulnerable to depression were staff and other medical students. Doctors, nurses, and students were vulnerable to anxiety; and other medical staff, students, and economics staff were vulnerable to stress.

Being female and emotional coping was independently associated with depression, anxiety, or stress. As a result, a significant portion of the Chinese population exhibited increased levels of depression and anxiety. Students and

other medical staff were most affected, while the economy staff was much stressed. Doctors and nurses need support regarding possible anxiety disorders. Future work should focus on long-term outcomes of the pandemic and develop targeted preventive measures (Du, Mayer, Hummel, Oetjen, Gronewold, Zafer & Schults, 2020).

2. METHODOLOGY

The target population of the study was all citizens of the Republic of Kosovo. The criteria for the selection of participants were: (1) to be at least 18 years old and above, and at the same time, to be citizens of Kosovo; and (2) to have a profession to which they apply.

A quantitative method was used as a method for this research. For the realization of this research, as measuring instruments, the questionnaire that measures the respective variables was used. At the beginning of the questionnaire are placed some of the demographic questions such as age, gender, place of residence, education, and profession they practice, and then continue with the questionnaire for measuring stress. The variable for the profession practiced by the participants is grouped into 6 categories: the first category includes 1: psychologist, social worker, sociologist, 2: health workers, 3: teacher, professor, 4: economist, accountant, 5: lawyer, 6: civil worker. The questionnaire used in this research to measure stress levels was the DASS-21 questionnaire (Lovibond and Lovibond, 1995). This is a 21-item self-report questionnaire (but in our case, only 7 questions without including anxiety and depression) that assesses recent experiences of stress (e.g., "I had a hard time relaxing"). This questionnaire has 7 questions for stress variable in our case. Questions are rated on a 4-point Likert scale, ranging from 0 (It was not like that at all) to 3 (It was like that most of the time). The lowest scores represent the normal or mild level, while the highest scores represent the highest or severe level. Reliability or Cronbach's Alpha coefficient for 194 participants for the stress questionnaire resulted in =.925 with 7 questions.

An online survey was used to conduct this research. The questionnaire was translated into Albanian and then the survey was created on Google. Data collection was carried out at the end of November and December 2020. Due to the situation of COVID-19, the questionnaire was distributed through social networks, specifically Facebook, as a large number of people of different ages have access to social networks. The procedure for completing the questionnaires took about 5 minutes. If there was any ambiguity, participants could contact me via the email address provided.

Participants were informed of the purpose of the research and that the questionnaire is anonymous, the data is confidential. As a start, all participants were declared to participate voluntarily then, after consent the participants were subjected to a questionnaire. Participants were free to ask for any ambiguities regarding the questionnaire. All participants had the right to complete the questionnaire only once.

3. RESULTS

Data analysis for this research was done through SPSS (a statistical package). After these necessary or basic analyses were performed, we continued with the application of other analyses. We have used Kruskal-Wallis analysis to see the stress level in the profession category. Below are the figures with the relevant analyzes drawn to reach conclusions. The mean age of the participants in this study is 34.93 years, with a DS of 10,1545

Figure 1. Descriptive statistics for all study variables

	N	Minimum	Maximum	Mean	SD.
Gender	194	-	-	-	-
Age	194	19.00	60.00	34.93	10.1545
Stress	194	.00	21.00	10.40	6.08780
Valid N (listwise)	194				

Source: Created by the author on the basis of the results of the study

From figure no. 1. It is seen that a total of 194 is the number of participants. The minimum age is 19 years and the maximum age is 60 years, with an average of $M = 34.93$ and a standard deviation $SD = 10.154$. As for the maximum level of stress severity, it is seen to be 21 point

Figure 1a. Demographic structure of the sample and population distribution

		N	Percent %
Gender	Female	116	59.8%
	Male	78	40.2%
Where do you live	Urban	140	72.2%
	Rural	54	27.8%
Level of education	Psychologist	19	9.8%
	Health Worker	32	16.5%
	Teacher / Professor	40	20.6%
	Economist / Accountant	31	16%
	Lawyer	18	9.3%
	Civil Worker	54	27.8%
Total		194	100.0%

Source: Created by the author on the basis of the results of the study

From figure 1a, of the 194 participants, 116 or 59.8%, were female and 78 or 40.2%, were male, starting from the age of 18 to the age of 60, of which 140 or 72.2%, were resident in the city and 54 or 27.8%, of them were resident in the rural area

Figure 1b. Statistics on levels of conventional severity of stress

Variable	N	Percent %	
Stress	Normal	121	62.40%
	Mild	64	32.9%
	Moderate	9	4.6%
	Severe		
	Extremely Severe		
Total	194	100%	

Source: Created by the author on the basis of the results of the study

Figure 1b shows the distribution of participants depending on the level of severity of stress, with lower values indicating lower levels of severity and vice versa. Depending on the values of the severity levels of the stress questionnaire, participants have resulted in these levels of stress. Thus, for stress it is seen that 121 (62.4%) people are under normal stress, 64 (32.9%) people have mild stress, and 9 (4.6%) people have moderate stress.

The Kruskal-Wallis test (sometimes also known as the Kruskal-Wallis H test) is a non-parametric one-way ANOVA test. This analysis enables comparison between three or more groups whose variables are continuous. The values are converted to ordinal form, and the ordinal means for each group are compared. Therefore, this test was used to see if there are differences in the level of stress in the categories of different professions that we have defined, in a total of six categories.

Figure 2. Kruskal-Wallis analysis of differences in occupational categories regarding stress level

	Stress
Chi-Square	16.924
Df	5
Asymp. Sig. (2-tailed)	.005

Source: Created by the author on the basis of the results of the study

From the results obtained, we need the core values, the Chi-Square value, the degree of freedom (df), and the level of significance (Asymp. Sig). As can be seen, the significance level is $p = .005$ and is less than the value of 0.05. So, we can say that there is a difference between these six categories of participants in terms of stress level. The Kruskal-Wallis H test shows that there is a statistically significant difference in the result, $\chi^2 (5) = 16.924$, $p = .005$

Figure 2a. Mean Rank for professions

	Profession	N	Mean Rank
Stress	Psychologist / Sociologist / Social worker	19	60.74
	Health Worker	32	107.95
	Teacher / Professor / Educator	40	96.08
	Economist / Accountant / Financier	31	81.89
	Lawyer	18	124.42
	Civil Worker	54	105.29
	Total	194	

Source: Created by the author on the basis of the results of the study

According to Mean Ranks values, the category of lawyers has the highest average value of stress ($M = 124.42$) with 18 participants, compared to other values, then 32 health workers showed an average of ($M = 107.95$), followed by 54 civilian workers with an average of stress level ($M = 105.29$), then the category of teachers, a total of 40 participants with an average of ($M = 96.08$), in fifth place is the profession of economists a total of 31 participants with an average of ($M = 81.89$) and finally with the lowest average of stress with ($M = 60.74$) comes the category of psychologists.

4. DISCUSSIONS

For many of us, the pandemic has significantly changed the places and the way we work. This pandemic has made everyone experience stress. Depending on the profession, the level of stress also varies. This is exactly the reason for our research to compare the levels of stress in different professions. Comparative analysis, more precisely the analysis of Kruskal Wallis to see the differences in the levels of stress of the categories of professions, has shown that there is a difference between these categories of participants, which has resulted in the highest average level of stress for the category of lawyers, followed by health workers, and the lowest level of stress has been shown for the category of psychologists. It is worth noting that the maximum stress level was 21, which means that fall participants experienced an moderate level of stress.

Being a health worker means that all your life you will face human health and fight to protect people's health from this you will be prepared that while you commit to your profession you will face all kinds of diseases, epidemic, pandemic and others therefore you are more informed about the work that awaits you and you are more prepared. Being a lawyer you are locked in an office which means you face all kinds of problems to be faced and you are not very inclined to think about diseases or pandemics that may come. Mental health professionals, on the other hand, are trained to intervene and learn skills to cope with different situations and look at things from a different perspective.

The main findings of other research were that healthcare professionals were most at risk during the pandemic, as it automatically sent them to higher levels of stress. In general, it is understandable that healthcare professionals are psychologically affected by this difficult process on a level similar to the society in which they live. Another study conducted during the COVID-19 pandemic has also shown that healthcare professionals and the rest of society are similarly affected by the pandemic (Pappa et al., 2020).

Other data suggests that lawyers may have been more negatively affected during the pandemic than health workers. Ritter 2020, said lawyers are predisposed to feeling anxious because their entire profession is about tackling the problems that a business or a person has. Because of this anxiety, lawyers often turn to unhealthy coping mechanisms. In September and October 2020, the American Bar Association surveyed more than 4,000 members-one of the largest surveys the organization has ever conducted. When the results were published in 2021, it turned out that lawyers had been concerned about employer support and reduced access to clients (Temme, 2021). ABA members reported much higher levels of stress in trying to manage work and home and higher levels of disengagement with the social aspects of work.

A global pandemic completely changed the way law firms across the country operate. On the day the closing order came into force, everything was closed, thinking that it would take two weeks, but it turned out that two weeks did

not work and we would have to stay longer at home. Although it has had relative success in switching to distance work, it still has its downsides and differences from traditional office work. Being a lawyer can be stressful. The work they do literally changes people's lives, and this can consume the individual physically, mentally, and emotionally. This can be especially challenging when working remotely because there is no separation between the "office" and the home. For anyone who has a pending case or a legal issue that requires attention, communicating with a lawyer is crucial. Under normal circumstances, face-to-face consultation between the client and the lawyer is standard. But to prevent the further spread of COVID-19, many lawyers have sought to minimize personal contact with existing and potential clients. Then, considering that the number of problems (such as divorce) after isolation had started to increase, it can be a bit stressful to face so many problems after a break during isolation. The other, since most professions have worked from home and have benefited like (teachers, professors, economist, psychologist), most lawyers/judges were not offered such an opportunity, and most of them lost their jobs, the court was closed and non-participation in court hearings due to isolation, so drastic change of work may have been affected in this data. This result may also be due to the unequal division of participants by categories, but the difference was very large and significant. These are just a few reasons, but that leaves room for a lot of research and control of other variables.

The aim of this research was to compare the level of stress during the pandemic among employees of different professions. In conclusion, it turned out that the highest level of stress resulted in lawyers while the lowest level in psychologists. According to the findings of the study, the level of stress in Kosovo society during the situation of COVID-19 varies by profession, where the profession of lawyer shows a higher level of stress than other categories of professions. The findings of our study suggest that there is a need for accessible psychological support interventions for workers of different professions, in particular lawyers and healthcare workers.

5. LIMITATIONS AND RECOMMENDATIONS

This study has brought new results in the current Kosovar context, but that does not mean that the study had no limitations. Regarding the limitations of this research, we can mention the way of filling in the questionnaires online. This can probably affect the answer, as we were not present (physically) during the filling in of the questionnaire. Given the situation we are in, this was the best way to collect data. However, this limitation also has its benefits because at the time we are now, it was almost the best way of fulfillment as almost the target could be reached more easily and it was the rest of the health that no matter how little we protect participants from physical contact.

Regarding the recommendations, this study was done in a way that fits the situation we are in due to the pandemic, and due to the distribution of the online survey, we recommend that next time the distribution be done physically. However, these gains pave the way and present the need for further studies with a more comprehensive sample in terms of occupations and other demographic variables.

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