Assessing the Anxiety Level of Iraq Population During COVID-19 Pandemic

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Abstract

Since the first case of the new coronavirus was reported in December 2019 in China, most countries suffer from spread of the virus. During the spread of virus waves, many of psychological and societal disturbances appeared that could disturb the action of the population. Fear of illness made the situation difficult. The objective of this study was to assess the level of anxiety among the general population in Iraq throughout the corona virus pandemic. The method used for the descriptive-analytic study at during the Covid-19 pandemic, which affected the world in general and Iraq in particular from March 20 to April 5, 2021, a nonprobability convenience sample was carried out in Iraq by using Google samples forms online and a self-reported questionnaire given to 1330 participants, The finding indicated that there (16.4%) of the sample have normal anxiety level, (43.5%) of the sample have mild anxiety level and (27.7%) of the sample have moderate anxiety level, (10.8%) of the sample have severe anxiety level, (1.5%) of the sample have extremely severe anxiety level.

Keywords: Anxiety level, Iraq Population, COVID-19 pandemic

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تقييم مستوى القلق لدى سكان العراق خلال جائحة كوفيد – 19

برهان هادي[1] ، علي فارس عبد الحسين[2] ، انتصار عبدالامير فجر[3] ، نوفل فاضل حمزة[4]

المستخلص

منذ الإبلاغ عن أول حالة إصابة بفيروس كورونا الجديد في ديسمبر 2019 في الصين، تعاني معظم الدول من انتشار الفيروس. أثناء انتشار موجات الفيروس، ظهرت العديد من الاضطرابات النفسية والمجتمعية التي يمكن أن تزعج حركة السكان. الخوف من المرض جعل الوضع صعبًا. الهدف من هذه الدراسة هو تقييم مستوى القلق بين عامة السكان في العراق طوال جائحة فيروس كورونا. تم إجراء تصميم الدراسة الوصفية التحليلية التي تم إجراؤها في عينة ملاءمة عدم الاحتمالية في العراق خلال حقبة وباء كوفيد -19 في العالم بشكل عام وفي العراق خاصة في الفترة من 20 مارس إلى 5 أبريل 2021 باستخدام نماذج Googleعبر الإنترنت إلى استبيان تم الإبلاغ عنه ذاتيًا. تم توزيعه على 1330 مشاركاً، حيث أشارت النتائج إلى أن (16.4٪) من العينة لديهم مستوى قلق طبيعي، (43.5٪) من العينة لديهم مستوى قلق خفيف و (27.7٪) من العينة لديهم مستوى قلق متوسط و (10.8٪) من العينة لديهم مستوى قلق شديد، (1.5٪) من العينة لديهم مستوى قلق شديد للغاية.

الكلمات الافتتاحية: مستوى القلق، سكان العراق، جائحة COVID-19

Introduction

Coronavirus infection 2019 (COVID-19, also known as 2019-nCoV), a group of serious respiratory infections with unidentified reasons, that appear in Wuhan, Hubei province, China since December 2019 [1]. As of March 25, 2020, 81,846 COVID-19 cases have been confirmed in China and 3,287 of Chinese have been died by the infection. Globally, infrequent cases have been reported outside of Wuhan in 193 countries [2]. After few days later, the World Health Organization (WHO) stated coronavirus is a global health problem of universal concern. On March 11, the World Health Organization affirmed that the coronavirus epidemic can be described as an "epidemic" as the infection increasingly spreader around the world [3].

Today, the world faces the new coronavirus pandemic (COVID-19), as the countries of the world intensify their response to control the spread of the infection and strengthen prevention and medical care programs [4]. In this direction, and with the beginning of the discovery of the first case, the Iraqi government and the Kurdistan Regional Government began to take many measures and continued to modify and expand its scope according to the spread pattern of the virus and giving the highest priority to preserve it [5]. The life and safety of citizens. At the same time, the government recognizes that the measures implemented (including curfews, traffic restrictions and associated trade restrictions other than those deemed necessary, and the closure of schools and universities) will have negative social and economic consequences for the population. In addition, its inhabitant's individual's life conditions [6].

The effects of the epidemic will be compounded by the economic shock caused by the fall in oil prices on the international market, which further narrows Iraq's economic space. The greatest impact of similar disasters will fall on the poorest; those with little recovery capacity to cope with crises, and families whose breadwinners work in the economic sectors most affected by crises [7].

Health anxiety means a set of behaviors and awareness of an individual's response that allows constant anxiety about infections that range from mild to severe and may belong to hypochondria, according to the Diagnostic and Statistical Manual of Disorders mental DSM5. The health that leads to the development of many health problems includes personality and mood disorders [8]. In addition, the possibility of adapting to the new situation is through the ability to resist emotional and physical stress. In Iraq, there has been little data recorded on the psychosomatic consequences and predefined anxiety in the community during the epidemic of infectious diseases [9].

Material and Methods:

The method used for the descriptive-analytic investigation at during the Covid-19 pandemic, which affected the world in general and Iraq in particular from March 20 to April 5, 2021, a nonprobability convenience sample was carried out in Iraq by using Google samples forms online and a self-reported questionnaire given to 1330 individuals. After getting consent to participated in the study.

The study questionnaire had two parts. Part one related to demographic characteristics of participants like age, gender, level of education, marital status. Part two is related to Anxiety and Stress Scale Questionnaire (DASS-21) to explore

the psychological problems (anxiety problem) in participants who do not have psychological problems (anxiety problem) by self-reported.

In order to characterize the data and assess whether the study's objectives were met or not, the researchers employed descriptive statistics. They did this by using the computer applications SPSS version 25 and Microsoft Office Excel 2019 to present the data.

Result

Table 1: Distribution of Sample by Socio- Demographic Characteristics.

Age year	Frequency	Percent
(20-29) year	567	42.6
(30-39) year	411	30.9
(40-49) year	258	19.4
(50-59) year	94	7.1
Total	1330	100.0
Gender	**Frequency**	**Percent**
Male	677	50.9
Female	653	49.1
Total	1330	100.0
Level of education	**Frequency**	**Percent**
Secondary degree	79	5.9
Diploma degree	160	12.0
Bachelor's degree	363	27.3
Master degree	476	35.8
Doctorate degree	252	18.9
Total	1330	100.0
Occupation	**Frequency**	**Percent**
Housewife	3	0.2
Student	170	12.8
Un employee	78	5.9
employee	1079	81.1
Total	1330	100%
Residence	**Frequency**	**Percent**
Urban	1131	85.0
Rural	199	15.0
Total	1330	100.0
Location	**Frequency**	**Percent**
Babylon	318	23.9

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Baghdad	259	19.5
Najaf	143	10.8
Karbala	47	3.5
Qadisiyah	131	9.8
Wasit	37	2.8
Kirkuk	43	3.2
Nineveh	63	4.7
Diyala	48	3.6
Salahaddin	38	2.9
Erbil	12	.9
Dhi Qar	89	6.7
Maysan	5	.4
Basra	21	1.6
Dohuk	5	.4
Sulaymaniyah	1	.1
Muthanna	39	2.9
Anbar	31	2.3
Total	1330	100.0

Table (1) shows that the highest percentage of sample study were (42.6%) (20-29) years old, **Male** (50.9%) Master degree (35.8%), (81.1 %) employee, (85.0%) Urban, Babylon (23.9%).

Table 2: Assessment Anxiety Levels among Population in Iraq during COVID-19

Anxiety levels	Frequency	Percent
Normal	218	16.4
Mild	579	43.5
Moderate	369	27.7
Severe	144	10.8
Extremely severe	20	1.5
Total	1330	100.0

Table (2) finding indicated that there (16.4%) of the sample have normal anxiety level, (43.5%) of the sample have mild anxiety level and (27.7%) of the sample have moderate anxiety level, (10.8%) of the sample have severe anxiety level, (1.5%) of the sample have extremely severe anxiety level.

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Table 3: Chi-Square tests for Anxiety Level and Sample Socio- Demographic Characteristics.

Variables	Anxiety Levels						Chi-Square tests		
Age year	Normal	Mild	Moderate	Severe	Extreme severe	Total	Value	df	Sig.
(20-29) year	218	349	0	0	0	567	1747.977	12	.000
(30-39) year	0	230	181	0	0	411			
(40-49) year	0	0	188	70	0	258			
(50-59) year	0	0	0	74	20	94			
Total	218	579	369	144	20	1330			
Gender									
Male	91	283	218	72	13	677	19.776	4	.001
Female	127	296	151	72	7	653			
Total	218	579	369	144	20	1330			
Level of education									
Secondary degree	41	24	11	3	0	79	686.555	16	.000
Diploma degree	99	40	17	4	0	160			
Bachelor's degree	71	227	47	17	1	363			
Master degree	7	244	167	52	6	476			
Doctorate degree	0	44	127	68	13	252			
Total	218	579	369	144	20	1330			
Occupation									
Un employee	12	48	16	2	0	66	469.593	16	.000
Student	112	50	7	1	0	170			
employee	94	481	345	141	18	1079			
Housewife	0	0	1	0	2	3			
Total	218	579	369	144	20	1330			
Residence									
Urban	165	482	325	140	19	1131	37.476	4	.000
Rural	53	97	44	4	1	199			
Total	218	579	369	144	20	1330			
Location									
Babylon	110	131	53	22	2	318	344.996	68	.000
Baghdad	5	81	98	66	9	259			

Najaf	28	68	34	11	2	143			
Karbala	7	31	7	2	0	47			
Qadisiyah	24	74	24	8	1	131			
Wasit	3	17	15	2	0	37			
Kirkuk	2	14	19	8	0	43			
Nineveh	0	20	34	8	1	63			
Diyala	5	20	21	2	0	48			
Salahaddin	0	14	19	4	1	38			
Erbil	1	5	3	2	1	12			
Dhi Qar	22	51	11	3	2	89			
Maysan	0	2	3	0	0	5			
Basra	0	9	8	3	1	21			
Dohuk	1	4	0	0	0	5			
Sulaymaniyah	0	1	0	0	0	1			
Muthanna	8	25	6	0	0	39			
Anbar	2	12	14	3	0	31			
Total	218	579	369	144	20	1330			

It appears from table (3) that there was significant difference in the anxiety levels in sample with respect to their age, gender, educational level, occupation, residence and location at $p \leq 0.05$.

Discussion

The gender of people is participated in the study are equal and their aged less than (20-29) years old (42.6%) and had master degree (35.8%). About (80.1%) of participants are employee and (85%) they are rural residence and the majority of participation live in Babylon governorate (table 1), this result consent with result of [10] [11]. According to the DASS-21 items, table (2) shows the study participants' level of anxiety the (43.5%) suffer for mild anxiety level and (27.7%) suffer too moderate anxiety level and (10.8%) suffer to sever anxiety level. As a result, if untreated, these results are regarded as risk indicators. This outcome concurs with the outcome of [6]. These issues significantly complicated and impaired social and occupational functioning, and they left them feeling overburdened by the demands of daily life. The causes of the psychological issues may be attributed to a variety of factors, including initially insufficient knowledge of COVID-19 and information on how to prevent and control it, and problems of quarantine. In table (3), the researchers find significant relationship between the anxiety levels and gender for participants may due to the nature of male from female by how adopting and copying with the stress and events, this result consent with the result of [12] [13]. Throughout epidemics, society experience anxiety and worry to certain degree, and mental disorder developed in these situations, it is estimate that between a 3 to 5 of individuals can have mental health problem [14]. Thoughtful communicable

illnesses often affects humanoid being. Later many individuals are not aware of the infection that arises in the early periods, so people became more affect by community and mental problem, [15] which usually led to pervasive anxiety and illogical responses. The rise in deaths after a pandemic is creating fear in societies because of misrepresentation, anxiety, pain, community overflow, and sensitive turmoil, leading to uncontrollable behaviors [16]. Therefore, more studies are needed on the psychological wellbeing aspects of the general population during the coronavirus pandemic.

Conclusion

The study showed that a number of participants experienced anxiety ranging from mild to severe anxiety. The study also indicated a statistically significant relationship between all demographic variables of the study and the level of anxiety.

References

[1] Cui, S., Jiang, Y., Shi, Q., Zhang, L., Qian, M., & Chu, J. (2020). Impact of COVID-19 on psychology of nurses working in the emergency and fever outpatient:A cross-sectional survey The 940th Hospital of Joint Logistics Support Force of Chinese People's Liberation Army. https://doi.org/10.21203/rs.3.rs-20777/v1

[2] Organization, W. H. (2020). Novel Coronavirus (2019-nCoV): situation report, 3. Retrieved from https://apps.who.int/iris/bitstream/handle/10665/330762/nCoVsitrep23Jan2020-eng.pdf

[3] Giovanetti, M., Benvenuto, D., Angeletti, S., & Ciccozzi, M. (2020). The first two cases of 2019-nCoV in Italy: Where they come from? Journal of Medical Virology, 92(5), 518–521. https://doi.org/10.1002/jmv.25699

[4] Wilder-Smith, A., & Freedman, D. O. (2020). Isolation, quarantine, social distancing and community containment: pivotal role for old-style public health measures in the novel coronavirus (2019-nCoV) outbreak. Journal of Travel Medicine, 27(2). https://doi.org/10.1093/jtm/taaa020

[5] M. Azize, P., H. Sadiq, C., & Luqman Othman, L. (2020). Impact of CoronaVirus on The Life Status of Kurdish People Living in Kurdistan Region of Iraq. Kurdistan Journal of Applied Research, 45–53. https://doi.org/10.24017/covid.6

[6] Shamblaw, A. L., Rumas, R. L., & Best, M. W. (2021). Coping during the COVID-19 pandemic: Relations with mental health and quality of life. Canadian Psychology/Psychologie Canadienne. https://doi.org/10.1037/cap0000263

[7] Kamal, N. M., & Othman, N. (2020). Depression, Anxiety, and Stress in the time of COVID-19 Pandemic in Kurdistan Region, Iraq. Kurdistan Journal of Applied Research, 37–44. https://doi.org/10.24017/covid.5

[8] Asztalos, M., & Bourdeaudhuij, I. De. (2010). The relationship between physical activity and mental health varies across activity intensity levels and dimensions of mental health among women and men. Cambridge.Org, (13), 1207–1214. https://doi.org/10.1017/S1368980009992825

[9] Habib, O., AlKanan, A., Abed, ☺a., & Mohammed, N. (2020). Epidemiological Features of COVID-19 Epidemic in Basrah-

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The 6th Scientific Conference of Al-Kut University College

Southern Iraq-First Report. The Medical Journal of Basrah University, 38(1), 7–18. https://doi.org/10.33762/mjbu.2020.126943.1008

[10] Kazmi, S. S. H., Hasan, K., Talib, S., & Saxena, S. (2020). COVID-19 and Lockdwon: A Study on the Impact on Mental Health. SSRN Electronic Journal. https://doi.org/10.2139/ssrn.3577515

[11] Shuja, K. H., Aqeel, M., Jaffar, A., & Ahmed, A. (2020). Covid-19 pandemic and impending global mental health implications. Psychiatria Danubina, 32(1), 32–35.
https://doi.org/10.24869/psyd.2020.32

[12] Abu-Snieneh, H. M. (2021). Psychological factors associated with the spread of Coronavirus disease 2019 (COVID-19) among nurses working in health sectors in Saudi Arabia. Perspectives in Psychiatric Care, ppc.12705. https://doi.org/10.1111/ppc.12705

[13] Wang, C., Pan, R., Wan, X., Tan, Y., Xu, L., Ho, C. S., & Ho, R. C. (2020). Immediate psychological responses and associated factors during the initial stage of the 2019 coronavirus disease (COVID-19) epidemic among the general population in China. International Journal of Environmental Research and Public Health, 17(5). https://doi.org/10.3390/ijerph17051729

[14] Rossi, R., Socci, V., Talevi, D., Mensi, S., Niolu, C., Pacitti, F., … Di Lorenzo, G. (2020). COVID-19 Pandemic and Lockdown Measures Impact on Mental Health Among the General Population in Italy. Frontiers in Psychiatry, 11, 790. https://doi.org/10.3389/fpsyt.2020.00790

[15] Sher, L. (2020). The impact of the COVID-19 pandemic on suicide rates. QJM: An International Journal of Medicine. https://doi.org/10.1093/qjmed/hcaa202

[16] Cui, S., Jiang, Y., Shi, Q., Zhang, L., Kong, D., Qian, M., & Chu, J. (2021). Impact of covid-19 on anxiety, stress, and coping styles in nurses in emergency departments and fever clinics: A cross-sectional survey. Risk Management and Healthcare Policy, 14, 585–594. https://doi.org/10.2147/RMHP.S289782