

Research article

Working conditions, lifestyle and mental health of Brazilian public-school teachers during the COVID-19 pandemic

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ARTICLE HISTORY: Received 28 April 2021/Revised 21 July 2021/Published Online 26 November 2021

ABSTRACT

This study aimed to describe the working conditions, lifestyle and mental health of Brazilian public-school teachers during the COVID-19 pandemic. This is an epidemiological websurvey, carried out from August to September 2020. Teachers from public schools in rural and urban areas in the state of Minas Gerais, Brazil, participated in the study. A digital questionnaire was used and the study addressed variables related to four major thematic topics: sociodemographic and economic profile, working conditions, lifestyle and health conditions, and mental health problems during the pandemic. The sample consisted of 15,641 teachers, of which 13.3% worked in rural areas, 81.9% were women, 56.2% were aged 41–60 years, 66.8% were married, 99.2% were working remotely and 79.8% adhered to social distancing. During the pandemic, 40.6% showed a decrease in family income, 33.7% were dissatisfied with their work, 58% reported increased body weight, 47.9% did not exercise, 35.8% were part of at least one risk group for COVID-19, 40.5% had some flu-like symptoms during the pandemic and 1.2% tested positive for COVID-19. Regarding mental health problems, 25.9% of teachers self-reported formal diagnosis of anxiety and/or depression during the pandemic. In addition, 7.1% of teachers were drinking more alcohol than usual, 33.4% started having sleep problems, 30.4% were using relax/sleep/anxiety/depression medications, 67.1% reported that their quality of life worsened and 43.7% reported having severe fear of COVID-19. It was also found that 82.3% of teachers had at least one mental health problem during the pandemic, such as increased alcohol consumption, sleep problems, use of psychotropic medication, decreased quality of life, and fear of COVID-19. The results of this study reveal the numerous challenges and the extent of the impact of the pandemic on working conditions, lifestyle, and especially on the mental health of teachers.

KEYWORDS: Coronavirus, education, health conditions, work stress, epidemiology.

Introduction

In 2019, the SARS-CoV-2 pandemic started and quickly spread around the world. In January 2020, COVID-19 was announced by World Health Organization WHO as a public health emergency.¹ The first case of COVID-19

was confirmed in Brazil in February 2020 and after three weeks, all Brazilian states presented at least one case of the disease.²

As a result of the increase in the number of deaths, the most widely adopted public health measure was social

distance.³ Social distancing was applied to reduce contact between people. Many measures were adopted during the pandemic, such as border closures, non-essential commercial establishments have been closed, and the prohibition of public events.⁴ COVID-19 caused damage even to the educational system.⁵ Teachers faced financial, physical, and mental problems, due to changes in the routine of life and work.⁶

As a result of the pandemic extension in Brazil, in April 2020, the National Council of Education approved an emergency strategy on the reorganization of the school calendar and the possibility of remote classes, aiming at fulfilling the country's annual workload.⁷ This "new normal" generated consequences and concerns for teachers, directly affecting working conditions, life habits, and health,⁸ especially those of public basic education, who work in schools with precarious structures, with high working hours, and sometimes in more than one educational institution.⁹

Although the pandemic is recent, the literature already presents studies on the impact caused on the population's health and work.¹⁰⁻¹³ However, the extent of the changes caused in the health and working conditions of basic education teachers is still unclear. Therefore, this study aimed to describe the working conditions, lifestyle, and mental health of Brazilian teachers during the COVID-19 pandemic.

Material and Method

This study is part of the ProfSMoc Project - Minas Covid Stage "Health and work conditions among teachers from the state education system of Minas Gerais during the COVID-19 pandemic". This is a cross-sectional study, carried out with teachers of elementary, middle, and high school from public schools in the state of Minas Gerais, Brazil. The state of Minas Gerais had approximately 90,000 teachers of basic education in 2020 working in 3,441 schools.¹⁴ This study followed the Checklist for Reporting Results of Internet E-Surveys.¹⁵

The sample calculation was made considering infinite populations. A prevalence of 50% was considered aiming to obtain the largest sample size and inference power. The tolerable error adopted was 3%. The sample was duplicated $deff=2$, as it is a conglomerate. A 20% increase was made in the sample size to compensate for possible losses. Thus, a minimum sample of 2,564 teachers was estimated.

Organizationally, the state of Minas Gerais is divided into six regional centers and each center is subdivided into Regional Teaching Superintendencies (RTS). Altogether, the state has 45 RTS. Access to the number of teachers

and to which RTS the teacher was linked was made available by the Department of Education of Minas Gerais (DE-MG). Thus, it was possible to guarantee the proportionality of teachers by RTS, stipulating the minimum number of teachers to be studied in each of the RTS.

Authorizations were obtained from the DE-MG and 45 RTS to carry out the research. A pilot study was carried out with 20 teachers from five different cities in Minas Gerais to test and adjust the data collection. Data collection took place from August 20 to September 11, 2020, using a digital form. The link to the digital form was sent to the institutional e-mail of all teachers in the state, which had the support of DE-MG in sending them. To avoid automatic filling of the form by computer systems, a reCAPTCHA was used, preventing the form from being sent by robots. All questions on the form were mandatory, minimizing information loss. The study also guaranteed the teachers' anonymity.

This study included teachers working in elementary, middle, and/or high school, and those who accepted to participate in the research. Teachers deviating from the teaching function and those who answered "no" when asked if they agreed to participate in the study were excluded.

The study addressed four major thematic groups of variables: sociodemographic and economic profile, working conditions, lifestyle and health conditions, mental health problems, including the Fear of COVID-19 Scale (FCV-19S), which is an instrument that investigates people's fear of COVID-19. The total score was obtained from the sum of the items, being categorized from 7 to 19 points as "little fear", from 20 to 26 points "moderate fear" and 27 to 35 points "severe fear".¹⁶

The data were analyzed using the Statistical Package for Social Sciences, version 22.0. Simple frequencies were presented, the prevalence and 95% confidence interval 95% CI were calculated for the variables studied.

The project was approved by a research ethics committee of the State University of Montes Claros (4,200,389/2020). The research also complied with resolution 466/12 of the National Health Council/Ministry of Health.

Results

The questionnaire was accessed by 16,210 teachers, of which 15,641 agreed to participate in the survey, resulting in a recruitment rate of 96.5% and a 100% completion rate. Most of the teachers (86.7%) worked in the urban area, while 13.3% worked in schools located in rural areas. The sociodemographic and economic profiles of the sample are shown in table 1. The majority of the teachers were female (81.9%), 56.2% were aged 41 to 60 years, 59.5%

Table 1. Sociodemographic and economic profile of public-school teachers (n=15,641).

	n	% (CI 95%)
Gender		
Female	12,817	81.9 (81.2–82.5)
Male	2,824	18.1 (17.4–18.7)
Age years		
21–40	6,447	41.2 (40.4–41.9)
41–60	8,793	56.2 (55.4–56.9)
>60	401	2.6 (2.3–2.8)
Skin color/ethnicity		
White	7,642	48.9 (48.1–49.6)
Brown	6,321	40.4 (39.6–41.1)
Black	1,246	8.0 (7.5–8.4)
Asian	359	2.3 (2.0–2.5)
Indigenous	73	0.5 (0.3–0.6)
Living area		
Urban area	13,565	86.7 (86.1–87.2)
Rural area	2,076	13.3 (12.7–13.8)
Family income before the pandemic (minimum wage) #		
1–2	3,969	25.4 (24.7–26.0)
3–5	9,301	59.5 (58.7–60.2)
6–9	1,945	12.4 (11.8–12.9)
>10	426	2.7 (2.4–2.9)
Family income during the pandemic		
Increased	304	1.9 (1.6–2.1)
Remained the same	8,947	57.2 (56.4–57.9)
Decreased	6,350	40.6 (39.8–41.3)
Lost the income	40	0.3 (0.2–0.3)
Marital status		
Married	10,453	66.8 (66.0–67.5)
Not married	5,188	33.2 (32.4–33.9)
Children		
Yes	11,350	72.6 (71.9–73.2)
No	4,291	27.4 (26.7–28.0)

*Variation in n due to loss of information

#Quantity of minimum wages received by the family. Brazilian national minimum wage=\$ 212.6/month.

had family incomes of 3 to 5 minimum wages, 40.6% had a decrease in family income during the pandemic, 66.8% were married and 72.6% had children.

Table 2 shows data on working conditions. A quarter of the teachers worked as teachers for 21 years or more, 15.8% worked more than 40 hours per week, 4.4% had a MSc and/or PhD degree, 99.2% were doing remote work and 33.7% were dissatisfied with work during the pandemic.

Table 2. Working conditions of public-school teachers (n=15,641)

	n	% (CI 95%)
Years of teaching work *		
1 - 10	5,941	38.0 (37.2-38.7)
11- 20	5,788	37.0 (36.2-37.7)
> 21	3,911	25.0 (24.3-25.6)
Weekly hours of teaching work *		
≤19	3,613	23.1 (22.4-23.7)
20–39	9,554	61.1 (60.3-61.8)
≥40	2,472	15.8 (15.2-16.3)
Graduate degree		
Master's and/or PhD	692	4.4 (4.0-4.7)
Specialization	11,115	71.1 (70.3-71.8)
No	3,834	24.5 (23.8-25.1)
Performing remote work during the pandemic		
Yes	15,520	99.2 (99.0-99.3)
No	121	0.8 (0.6-0.9)
Work satisfaction during the pandemic		
Satisfied	3,375	21.6 (20.9-22.2)
Neither satisfied nor dissatisfied	6,995	44.7 (43.9-45.4)
Dissatisfied	5,271	33.7 (32.9-34.4)

* Variation in n due to loss of information

Regarding the lifestyle and health conditions, 79.8% fully adhered to social distancing, 47.9% were not exercising, 53% were not performing leisure activities, 58% had gained weight, 35.8% were part of at least one risk group for COVID-19, 40.5% had some flu-like symptoms during the pandemic and 1.2% tested positive for COVID-19. These and other data are included in table 3.

Table 4 presents topics related to mental health. It was observed that 25.9% of teachers reported a formal diagnosis of anxiety and/or depression during the COVID-19 pandemic. Before the pandemic, 32.3% of teachers reported that they had been previously diagnosed by a doctor with anxiety and/or depression. Furthermore, during the pandemic, 7.1% of the teachers were drinking more alcohol than usual, 33.4% started having sleep problems, 30.4% were using drugs to relax/sleep/anxiety/depression, the perception of quality of life of 67.1% of teachers worsened and 43.7% reported having severe fear of COVID-19. It was also found that 82.3% of teachers had at least one condition related to mental health during the pandemic, such as increased alcohol consumption, sleep problems, use of psychotropic medication, quality of life, and fear of COVID-19. Those who reported a formal diagnosis of depression and/or anxiety during the pandemic were not included in the analysis.

Table 3. Lifestyle and health conditions of public-school teachers during the pandemic (n=15,641).

	n	% (CI 95%)
Adherence to social distance		
Totally	12,486	79.8 (79.1–80.4)
Partially	3,096	19.8 (19.1–20.4)
Did not adhere	59	0.4 (0.3–0.5)
Food Consumption		
More vegetables and fruits; less processed food	7,737	49.5 (48.7–50.2)
Less vegetables and fruits; more processed food	7,904	50.5 (49.7–51.2)
Practice exercise		
Yes	8,144	52.1 (51.3–52.8)
No	7,497	47.9 (47.1–48.6)
Leisure Activities		
Increased	876	5.6 (5.2–5.9)
Did not change	3,005	19.2 (18.5–19.8)
Decreased	5,033	32.2 (31.4–32.9)
Not doing leisure activities	6,727	43.0 (42.2–43.7)
Body weight * #		
Remained the same	4851	31.5 (30.7–32.2)
Decreased	1611	10.5 (10.0–10.9)
Increased	8933	58.0 (57.2–58.7)
Risk group for COVID-19		
No	10,047	64.2 (63.4–64.9)
Yes	5,594	35.8 (35.0–36.5)
Flu-like symptoms		
No	9,312	59.5 (58.7–60.2)
Yes	6,329	40.5 (39.7–41.2)
Tested positive for COVID-19		
Did not test	13,627	87.1 (86.5–87.6)
No	1,788	11.4 (10.9–11.8)
Did not receive the result	41	0.3 (0.2–0.4)
Yes	185	1.2 (1.0–1.3)
A friend or family member has died because of COVID-19		
No	12,442	79.5 (78.8–80.1)
Yes	3,199	20.5 (19.8–21.1)

* Variation in n due to loss of information

Pregnant women were excluded from the analysis n=232

Discussion

This study aimed to describe the working conditions, lifestyle, and mental health of Brazilian public-school teachers during the COVID-19 pandemic. The results show that, during the pandemic, teachers suffered from financial difficulties and changes in many aspects, including their mental health.

Table 4. Mental health problems of public-school teachers during the pandemic (n=15,641).

	n	% (CI 95%)
A medical diagnosis of anxiety and/or depression during the pandemic		
No	11,597	74.1 (73.4–74.7)
Yes	4,044	25.9 (25.2–26.5)
Formal diagnosis of anxiety and/or depression before the pandemic		
No	10,594	67.7 (66.7–68.4)
Yes	5,047	32.3 (31.5–33.0)
Alcohol consumption		
Did not consume before and not consuming during the pandemic	8,052	51.5 (50.7–52.2)
Not drinking alcohol	1,238	7.9 (7.4–8.3)
Drinking less	2,027	13.0 (12.4–13.5)
Same consumption as before	3,165	20.2 (19.5–20.8)
Drinking more	1,112	7.1 (6.6–7.5)
I had stopped drinking but started drinking again	47	0.3 (0.2–0.4)
Sleep problems		
Did not affect, still sleeping well	6,554	41.9 (41.1–42.6)
Had sleep problems, but they improved	138	0.9 (0.7–1.0)
Continued to have the same sleep problems	1,956	12.5 (12.3–12.6)
Had sleep problems and they got worse	1,767	11.3 (10.8–11.7)
Started having sleep problems	5,226	33.4 (32.6–34.1)
Use of medication to relax/sleep/anxiety/depression		
No	10,891	69.6 (68.8–70.3)
Yes	4,750	30.4 (29.6–31.1)
Perception of quality of life		
Improved	1,359	8.7 (8.2–9.1)
Remained the same	3,789	24.2 (23.5–24.8)
Worsened	10,493	67.1 (66.3–67.8)
Fear of COVID-19		
Little fear	4,364	27.9 (27.1–28.6)
Moderate fear	4,446	28.4 (27.6–29.1)
Severe fear	6,831	43.7 (42.9–44.4)
Mental health problems during the pandemic*		
No	2,050	17.7 (17.1–18.3)
Yes	9,547	82.3 (81.7–82.9)

*Teachers who previously reported a formal diagnosis of depression and/or anxiety during the pandemic were excluded

The sociodemographic profile of the participants was consistent with the profile of Brazilian teachers verified in other studies.^{13,17} This study shows that financial difficulties have affected an important portion of teachers dur-

ing the pandemic. Almost half of the teachers reported a decrease in family income during the pandemic.

The pandemic has also brought considerable changes in teachers' working conditions. The data show that 99.2% of the teachers worked virtually during the pandemic. This finding was consistent with a previous study on remote work conducted among Brazilian teachers during the pandemic, which showed that 87% of the professionals were teaching online classes.¹³ The classroom activities encompass several possibilities, while remote education presents serious limitations, which makes it difficult to meet all the criteria needed according to the national curriculum guidelines.¹⁸

As for the satisfaction with their work before the COVID-19 pandemic, 4.3% reported dissatisfaction, and during the pandemic, it increased to 33.7%. Dissatisfaction with work appears to be associated with problems related to physical, mental, and social health, resulting in lower quality of service, increased absenteeism, and evasion from the profession.¹⁹ Considering the pandemic, dissatisfaction with the teaching work may be related to the urgency of changes in the teacher's work routine. The distance between the teacher and the student can also be a reason for dissatisfaction with the work. Literature shows that teachers develop a feeling of affection and care for students.^{20,21} Casacchia et al²² evaluated the impact and the relationship between distance education and the emotional well-being of teachers during the period of home confinement in Italy. The absence of "face-to-face" eye contact and the difficulty of assessing students' attention was a complaint among the teachers. Therefore, remote education stimulated the weakening of the affective bond between them. In any case, this considerable increase in dissatisfaction with the teaching work deserves attention.

Total adherence to social distance, staying at home and going out only for health care needs, and/or shopping in supermarkets and pharmacies were reported by approximately 80% of the teachers in the present study. In line with the data shown in this study, another previous study also observed that the adult Brazilian population in general adhered to social distance, with 60% reporting intense restriction of contact with people and 15% only leaving home for health care.²³ In this sense, it is believed that the high prevalence of adherence to social distance by teachers, when compared to the general population, is linked to the positive behavior of the teaching class, pointed out as examples for parents and students, being good "models" to be followed.

More than 87% of the teachers did not test for COVID-19, and more than 40% reported flu-like symptoms during the pandemic and 1.2% tested positive. It

must be considered, however, that this study took place in 2020 when the pandemic was still recent and there were not enough tests available for the whole population. A previous study, an online survey with adults, found that 28.1% had flu-like symptoms after the arrival of the pandemic in Brazil, and 1.3% of those who reported flu-like symptoms tested positive for COVID-19.²⁴ These results reveal that the teachers did not differ from the adult population towards the issues related to COVID-19. Possibly, this similarity was due to the shutdown of educational institutions and respect for social distance.

A prior study comparing the teachers' perception of quality of life before and during the pandemic shows that their perception has been negatively affected by COVID-19, presenting a significant decrease during the pandemic compared to the pre-pandemic measurement.²⁵ In our study, most of the teachers reported a decrease in their quality of life during the pandemic. Among them, 39.8% started having sleep problems, 8.9% consumed more alcohol and 48% did not carry out recreation activities. According to Dankel et al,²⁶ lifestyle interferes with the population's quality of life. In this sense, the data from the present study show that there was a worsening in the quality of life of teachers due to the negative changes in their routine acquired during the pandemic.

In general, teachers experienced a worsening in their behaviors and life habits. In this study, there was a high prevalence of physical inactivity, increased body weight, inadequate diet, and increased time dedicated to screens. Other studies have also shown increased health risk behaviors in the daily life of the population during the pandemic, highlighting sedentary behavior and poor health habits.^{27,28} According to Malta et al,¹² the frequent increase in inappropriate lifestyle during the pandemic is alarming and can cause several health risks, among them, the emergence of chronic non-communicable diseases.

As for mental health problems, more than a quarter of the teachers in our study reported having received a formal diagnosis for anxiety and/or depression during the pandemic. The findings also showed that approximately one-third were consuming medication to relax/sleep/anxiety/depression, and a third started to have sleep problems after the beginning of the pandemic. A study that analyzed the levels of stress, anxiety, and depression of teachers in Spain found that 32.2% of the teachers showed a certain degree of depressive symptoms.²⁹ Other studies with teachers also show similar results, highlighting the mental health impacts of the pandemic.^{22,30} Many negative psychological aspects were seen during the pandemic, such as the fear of infection, frustration, boredom, and inadequate information.³¹

A previous study showed that there was a significant prevalence of Brazilians who felt sad or depressed (40.4%) and anxious or nervous (52.6%) during the pandemic. In the same study, 43.5% of the population started having sleep problems during the pandemic, with a higher prevalence in women and people with a formal diagnosis of depression.³² These data show that there was a considerable worsening in the quality of sleep of the general population during the pandemic, and should be considered alarming since sleep problems are associated with a worse quality of life, higher occurrence of hypertension, alcohol consumption, physical inactivity, and increased demand for health services.^{33–37}

Stachteas and Stachteas³⁸ showed that 34% of teachers experienced a high and a very high degree of fear during the pandemic. Regarding the fear of COVID-19 in our study, it was observed a higher prevalence for severe fear, and among them 86.5% were women, 57.4% were aged 41 to 60 years, 25.7% lost a family member or friend because of COVID-19 and 34.8% had a medical diagnosis of anxiety and/or depression during the pandemic. According to Shigemura et al,³⁹ fear, especially during pandemic times, raises the levels of anxiety and depression in healthy people, with greater severity in psychiatric patients.

Moreover, the study that validated the Fear of COVID-19 Scale for Brazil⁴⁰ showed that 29.4% of the participants presented severe fear. According to our result, the teachers had a higher prevalence for severe fear of COVID-19 when compared to the Brazilian adult population in general. Thus, it is assumed that these results may make it difficult for teachers to return to classroom activities at school, making it necessary for education managers to be aware of this situation.

The present study has a limitation concerning internet data collection, which brings the possibility of selection bias. However, the literature shows that the research carried out via the internet is promising, as a result of the low costs and the possibility of knowing the health conditions

of the population in real-time.^{12,23} The study also presents a limitation based on the self-report response, leading to the possibility of memory bias. On the other hand, this limitation was minimized by the robustness of the sample, support from DE-MG, and good sample distribution, reaching 93.2% of the state's municipalities and coverage of 13.3% of teachers working in the rural area.

The results reveal the dimension of the negative impact of the pandemic on the health and working conditions of teachers, showing the financial difficulties, dissatisfaction with work, the worsening of quality of life and mental health, the increase in body weight, and the intensification of health risk behaviors. Therefore, the COVID-19 pandemic has caused numerous challenges to them.

The findings also show that the course of the pandemic among teachers was not different from the general adult population. However, some issues are specific to teachers, such as increased dissatisfaction with work, remote teaching, being distant from the students and the classroom, and the fear of COVID-19, which was higher among the teachers when compared to the Brazilian population in general.

Furthermore, these results may assist in the development of coherent strategies for the return of classroom activities, health promotion measures, and better working conditions for teachers of public schools, with special emphasis on the most vulnerable teachers. Education is fundamental for the development of the nation and teachers are the protagonists of this process. There will be no quality education without health care and teacher well-being.

Acknowledgements

We thank the teachers of the State of Minas Gerais for participating in the ProfSMoc Project; the Department of Education of Minas Gerais; the State University of Montes Claros; and the Coordination of Improvement of Higher Education Personnel-Brazil CAPES-Finance Code 001.

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Ερευνητική εργασία

Συνθήκες εργασίας, τρόπος ζωής και ψυχική υγεία των Βραζιλιάνων δασκάλων σε δημόσια σχολεία κατά τη διάρκεια της πανδημίας COVID-19

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ΙΣΤΟΡΙΚΟ ΑΡΘΡΟΥ: Παραλήφθηκε 28 Απριλίου 2021/Αναθεωρήθηκε 21 Ιουλίου 2021/Δημοσιεύθηκε Διαδικτυακά 26 Νοεμβρίου 2021

ΠΕΡΙΛΗΨΗ

Η παρούσα μελέτη είχε στόχο να περιγράψει τις συνθήκες εργασίας, τον τρόπο ζωής και την ψυχική υγεία των Βραζιλιάνων δασκάλων σε δημόσια σχολεία κατά τη διάρκεια της πανδημίας COVID-19. Πρόκειται για μία επιδημιολογική διαδικτυακή έρευνα, που διεξήχθη από τον Αύγουστο μέχρι τον Σεπτέμβριο 2020. Δάσκαλοι από δημόσια σχολεία σε αγροτικές και αστικές περιοχές της πολιτείας Minas Gerais της Βραζιλίας συμμετείχαν στην έρευνα. Χρησιμοποιήθηκε ένα ηλεκτρονικό ερωτηματολόγιο και συλλέχθηκαν στοιχεία σχετιζόμενα με τέσσερα μείζονα θεματικά πεδία: κοινωνικο-δημογραφικό και οικονομικό προφίλ, συνθήκες εργασίας, τρόπο ζωής και συνθήκες υγείας και προβλήματα ψυχικής υγείας κατά τη διάρκεια της πανδημίας. Το δείγμα αποτέλεσαν 15.641 δάσκαλοι, εκ των οποίων το 13,3% εργάζονταν σε αγροτικές περιοχές, 81,9% ήταν γυναίκες, 56,2% ήταν ηλικίας 41–60 ετών, 66,8% ήταν παντρεμένοι, 99,2% εργάζονταν εξ αποστάσεως και 79,8% συμμορφώνονταν με τα μέτρα κοινωνικής απόστασης. Κατά τη διάρκεια της πανδημίας το 40,6% υπέστη μείωση στο οικογενειακό εισόδημα, 33,7% ήταν ανικανοποίητοι με την εργασία τους, 58% ανέφερε αύξηση του σωματικού βάρους, 47,9% δεν ασκούσαν, 35,8% ανήκαν σε τουλάχιστον μία ομάδα κινδύνου για COVID-19, 40,5% είχαν ορισμένα γριπώδη συμπτώματα στην πανδημία και 1,2% είχαν βρεθεί θετική για COVID-19. Όσον αφορά στα προβλήματα ψυχικής υγείας, 25,9% των δασκάλων ανέφερε επίσημη διάγνωση αγχώδους διαταραχής ή/και κατάθλιψης κατά τη διάρκεια της πανδημίας. Επιπροσθέτως, 7,1% των δασκάλων έπιναν περισσότερο αλκοόλ από το συνηθισμένο, 33,4% άρχισαν να έχουν προβλήματα ύπνου, 30,4% χρησιμοποιούσαν ηρεμιστική/υπναγωγική/αντικαταθλιπτική φαρμακευτική αγωγή, 67,1% ανέφερε ότι η ποιότητα ζωής τους χειροτέρευσε και 43,7% ανέφερε σοβαρό φόβο για την COVID-19. Βρέθηκε επίσης ότι το 82,3% των δασκάλων είχε τουλάχιστον ένα πρόβλημα ψυχικής υγείας κατά τη διάρκεια της πανδημίας, όπως αυξημένη κατανάλωση αλκοόλ, προβλήματα ύπνου, χρήση ψυχοτρόπου αγωγής, μείωση της ποιότητας ζωής και φόβο για COVID-19. Τα αποτελέσματα αυτής της μελέτης αναδεικνύουν τις πολλές προκλήσεις και την έκταση του αντίκτυπου της πανδημίας σε συνθήκες εργασίας, τρόπος ζωής και ειδικά στην ψυχική υγεία των δασκάλων.

ΛΕΞΕΙΣ ΕΥΡΕΤΗΡΙΟΥ: Κορωνοϊός, εκπαίδευση, συνθήκες υγείας, εργασιακό στρες, επιδημιολογία.