

Is Psychiatry a Profession Associated with High Anxiety?

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Background: Depending on intensity, anxiety can have an adapting and mobilizing role, or it can represent a serious risk.

Aim: To examine the prevalence of anxiety symptoms for those who work in a clinic of psychiatry.

Material and method: Group consists of 35 persons who work in the Acute Psychiatric Clinic II – Targu Mures. Anxiety was measured as a current emotional state and as a trait by Spielberger's State-Trait Anxiety Inventory (STAI).

Results: Applying Spielberger's Inventory 33.3% of the female and 28.5% of the male might be suspected of suffering from significant anxiety symptoms as a state. Also the subject's predisposition to anxiety as a trait of the subject's personality is important, 24% of female and 43% of men had levels of anxiety over 60% compared with standards.

Conclusions: An important number of people who work in psychiatry have high scores of anxiety. Further studies are needed to clarify to what extent this relates to a high prevalence of anxiety disorders.

Keywords: anxiety, Spielberger's State-Trait Anxiety Inventory – STAI

Introduction

Anxiety, as a characteristic of the human being, is integrated in a complex way in daily life and thus, it supposes to differentiate between the natural and normal anxiety in connection with existential events and the psychopathological one [1]. Depending on its intensity it can have an adapting and mobilizing role or an inhibitive and disorganizing one for psychic and behavior.

Impulse control disturbances intermingle with normal life in the contemporary society which sometimes amplifies unconditionally the self-image and the majority of individualism features. That is why anxiety symptoms, as quotidian stress expression can have high values for straight anxiety and for the structural reference points of personality.

The aim of this study was to establish the anxiety levels in a group of people working in psychiatry.

Material and method

The prospective study was carried out from March 2009 to March 2010.

The data collection instruments included a questionnaire containing the Spielberger's State-Trait Anxiety Inventory (STAI) [2], and another questionnaire formulated by the researcher with queries on demographic characteristics. Results were arranged in four tables and two figures.

Inclusion criteria for subjects of this study were:

- ▶ health workers in the Acute Psychiatric Clinic II, Targu Mures
- ▶ literacy to respond to questions
- ▶ subjects volunteered to participate in the study

Exclusion criteria were:

- ▶ lifetime psychosis and bipolar disorder;

- ▶ organic mental disorder;
- ▶ current strong suicidal ideation

For collecting data, the Spielberger's scale (STAI) was used to determine anxiety intensity because of its high validity and reliability and its ability to determine state and trait anxiety, which were important for this study. The inventory comprised 40 questions translated to Romanian.

In addition, a questionnaire formulated by the researcher was used to assess demographic characteristics.

It should be mentioned that the anxiety inventory questionnaire has been used in many studies and the mean of its reliability has been reported at 97%, so it seems there was no need to determine its reliability again in this study [3, 4].

Results

Our sample was formed of 35 subjects who work in the Acute Psychiatric Clinic II Targu Mures. A percent of 60% [21] were female and 40% [14] of participants were men. The demographic features are shown in Table I.

Findings showed that the majority of persons were in the age range of 30–39 years (mean = 35years) (Figure 1).

The group was composed of psychiatry care workers such as: doctors, nurses, infirmaries and administrative staff. The majority, that is 51% (18) had university studies as shown in Table II.

Spielberger's State Trait Anxiety Inventory (STAI) was used to measure current anxiety symptoms. Primary scores were converted in standard scores due to Romanian etalon of age and gender. This test was translated, culturally adapted, validated and calibrated by a group of researchers from D&D Consulting. The most prevalent presenting problem was males' trait anxiety (43% of men scored up to 60%) and females' state anxiety (33.3% of

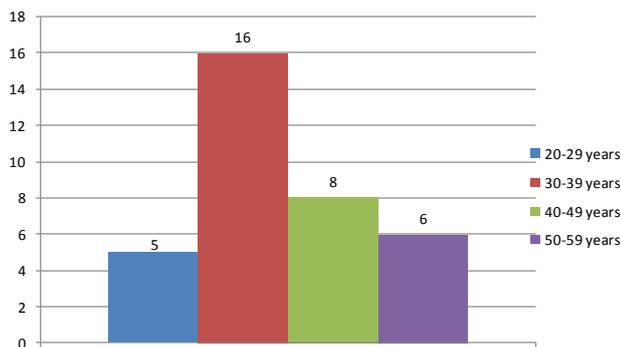


Fig. 1. Age distribution

Table I. Demographical features

Female	Male	Total
21 (60%)	14 (40%)	35 (100%)

Table II. Educational level

	Female	Male	Total
High School	2	0	2
Professional School	0	4	4
College	9	2	11
University	12	6	18

female scored up to 60%) (Table III and IV). TDue to STAI scores 6 persons considered to have moderate to severe anxiety symptoms (60–70%) and 4 severe trait anxiety levels (Figure 2.)

Discussions

The individual of contemporary society lacks the security sense which defines work in traditional societies; he has no more the certainty of a stable employment and of a direct benefit proportionally to his effort and involvement, which creates a prolonged psychological tension that generates anxiety [5, 6].

Psychiatry, from all medical specialties, is particular because it treats mental health. This work environment can influence the emotional health of psychiatry care workers. Current perception is that medical profession is suffering from increased stress [7]. As a professional group, doctors may be more susceptible to depression, burnout and anxiety [8, 9]. Our finding confirms literature and shows that a great percent of this group were identified as severely distressed psychiatrically using STAI measure.

Conclusions

The main finding of our study is that an important number of people who work in psychiatry have high scores of anxiety.

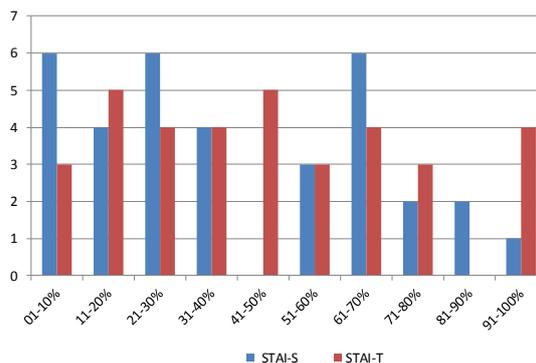


Fig. 2. State-Trait Anxiety Inventory - proportional scores.

Table III. Anxiety as a state (STAI-S)

STAI-S	0–29%	30–60%	Up to 60%
Female	10 (47.6%)	4 (19%)	7 (33.3%)
Male	6 (43%)	4 (28.5%)	4 (28.5%)

Table IV. Anxiety as a trait (STAI-T)

STAI-T	0–29%	30–60%	Up to 60%
Female	8 (38%)	8 (38%)	5 (24%)
Male	4 (28.5%)	4 (28.5%)	6 (43%)

Elements of the work environment did impact on the emotional health of psychiatry care workers. It is necessary to evaluate psychological difficulties of this professional group and to determine if early intervention is achieved.

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