Personality Traits, Resilience, and Anxiety among Clinical Psychologists during COVID-19 Pandemic

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Abstract

The COVID-19 pandemic has created an unpredictable psychological environment for individuals. This study explored the relationship among personality traits, resilience, and anxiety in clinical psychologists during the COVID-19 pandemic. Correlation research design and snowball sampling were used to select a sample of clinical psychologists (*N*=80) and their ages ranged from 25-60 years (*M*=30.2, *SD*=6.6). Demographic sheet, Ten Item Personality Inventory, The Brief Resilience Scale, and Level 2-Anxiety-Adult were used for data collection. The results show a significant negative relationship between personality traits (extroversion, agreeableness, emotional stability, and openness to experience) and anxiety. A significant positive relation was found between personality traits (extroversion, agreeableness, emotional stability, and openness to experience) and resilience. Also, personality traits (extroversion, agreeableness, and emotional stability) and resilience significantly predict anxiety among clinical psychologists. Moreover, resilience was found to significantly mediate between personality traits (extroversion, agreeableness, and emotional stability) and anxiety among clinical psychologists. This study will be helpful for clinical psychologists to enhance their mental health which, in turn, will improve their functioning and performance.

Keywords: Pandemic, Personality Traits, Resilience, Anxiety, Mental Health.

The pandemic coronavirus disease (COVID-19) has put a considerable amount of strain on people all around the world. When COVID-19 broke out in China, the healthcare system was confronted with a great challenge to fight this deadly infection (Wang et al., 2020). It is no doubt that healthcare workers play a crucial role in lowering the spread of disease and death rate in the public but while doing so, they cannot avoid their exposure to patients. Along with healthcare workers, mental health professionals reported a huge influx of patients who presented with complaints of stress, anxiety, and depression symptoms. They were prone to experience psychological challenges such as stress, confusion, anger, and anxiety due to the stressful situation of the world (Sethi et al., 2020). During COVID-19, stressors faced by clinical psychologists and other mental health professionals included a long period of quarantine, fear of getting infected, boredom, despair, shortage of food supplies, lack of authentic information, financial instability, and stigma (Razu et al., 2021). During COVID-19, mental health experts who supported front-line healthcare professionals took more responsibilities and workloads, were stressed and unclear about how to best manage this workforce,

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and neglected their health and wellness. Many were socially isolated and indirectly affected by the trauma and moral impairments (Billings et al., 2021, De Kock et al., 2021).

Literature reveals that there is a relationship between personality traits, resilience, and anxiety. Personality traits (optimism, openness to experience, conscientiousness, agreeableness, and extroversion) were found to have a positive link with resilience in studies, while neuroticism or emotional instability was found to have a negative relationship with resilience (Davey et al., 2003). According to Friborg et al., (2005), resilience was positively related to various personality variables. Emotional stability was found to be strongly and positively connected with resilience-personal strengths (perception of self and perception of future). Conscientiousness was linked to a resilience-future view and resilience-personal structure. The literature further suggests that psychological resilience is positively correlated with personality traits like optimism, extraversion. agreeableness, emotional stability. and conscientiousness, and is inversely related to neuroticism (Mohammad & Mustafa, 2015).

Previous research has found that depression, anxiety, and unpleasant emotions are negatively correlated with resilience. Life satisfaction, personal well-being, and positive emotions are all favorable indicators of mental health that are associated with resilience (Hu et al., 2015). According to previous studies, depression, and anxiety are negatively related to resilience (Miller & Chandler, 2002; Nrugham et al., 2010; Poole et al., 2017; Shapero et al., 2019; Wells et al.,

2012). The characteristics of resilience have been linked to symptoms of low-level anxiety and depression (Skrove et al., 2012). According to Anyan and Hjemdal (2016), the mediating role of resilience was found among stress, anxiety, and depressive symptoms. The personal and professional values of practitioners are in line with the values of their organizations and seem to have a major influence on negotiating and experiencing resilience (Scevoli, 2020).

Disease outbreaks, such as the COVID-19 pandemic, can be frightening. Individuals who are more anxious experience unfavorable impacts on their physical and mental health as well as on their professional performance. Many previous types of research have shown that increased levels of anxiety have detrimental consequences, such as a loss of appetite, dizziness, sleep disturbances, and nausea or vomiting (Lee, 2020; Lee et al., 2020). Higher anxiety levels were also connected to impairment in several physical processes, negative coping techniques (such as greater intake of alcohol or drugs), stress and depression, and increased suicidal ideation (Lee et al., 2020). Furthermore, untreated worries may have a long-term impact on individuals' work performance and job satisfaction, leading to frequent absenteeism and eventual turnover (Labrague et al., 2018; Lee et al., 2020). According to Greene (2017), Behavioral health professionals who are extraverted, open, agreeable, and conscientious are less prone to develop burnout. Due to training, counseling self-efficacy increases and anxiety decreases in trainee clinical psychologists (Al-Darmaki, 2004).

Present study

During the pandemic, several mental well-being issues related to pandemic emerged which increased the workload of mental health professionals. This may have placed them under increased pressure resulting in increased levels of work stress. Literature suggests that mental health professionals themselves experienced stress due to a huge influx of psychiatric patients which negatively affected their psychological health (Kar & Singh, 2020). The common perception of clinical psychologists in society is that they are strong, caring, and motivating and that they are free from stress, anxiety, and frustration. However, clinical psychologists are also human beings who experience these emotions and face psychological distress. As a result, they frequently neglect seeking treatment for themselves, mistakenly believing that as experts they can handle their mental health issues on their own (Gerada, 2018). The frequent exposure of clinical psychologists to psychological issues makes them vulnerable to stress, anxiety, depression, and burnout. In the current situation, the mental health of clinical psychologists and other mental healthcare workers is largely ignored. As a result, the study's goal was to look into the relationship among personality traits, resilience, and anxiety among clinical psychologists during the pandemic and to investigate how different personality traits cause high anxiety among clinical psychologists, especially during the pandemic situation. The role of resilience is important among clinical psychologists in dealing with professional and personal distress and anxieties. This study would provide insight to understand the role of clinical psychologists during the COVID-19 pandemic and would also provide ground for future research in Pakistan.

Hypotheses

It was hypothesized that among Clinical Psychologists,

- There would be a negative relationship between personality traits (extroversion, openness to experience, emotional stability, agreeableness, and conscientiousness) and anxiety.
- There would be a positive relationship between personality traits (extroversion, openness to experience, emotional

- stability, agreeableness, and conscientiousness) and resilience.
- There would be a negative relationship between anxiety and resilience.
- Personality traits (extroversion, openness to experience, emotional stability, agreeableness, and conscientiousness) and resilience would predict anxiety.
- Resilience would mediate between personality traits (extroversion, emotional stability, and agreeableness) and anxiety.

Method

The sample size was determined by using the G-power 3.1.9.3 software (Erdfelder et al., 1996). A priori analysis which is considered an ideal method to control type I and II errors (Mayr et al., 2007) was selected to determine the necessary sample size which resulted in N=74 but a total of 80 participants was selected. Snowball sampling was used to select clinical psychologists of both genders (N=80) and their ages ranged from 25-60 years (M=30.2, SD=6.6). The majority of the participants were women (91%) and 62% of the sample was unmarried. The educational level was divided into two categories including MS and Ph.D. Most of the participants had an MS degree (71%). 66% of the sample was living in the nuclear family system. Almost 91% of clinical psychologists lived in urban areas and 3% of clinical psychologists were having work experience of fewer than 5 years. Most (73%) clinical psychologists worked 8 hours per day.

Measures

The following measures were used for the collection of data.

Ten Item Personality Inventory (TIPI). Extraversion, Agreeableness, Conscientiousness, Emotional Stability, and Openness to Experience are the Big Five personality traits measured by the inventory. The items are rated on a scale of 1 to 7(strongly disagree -strongly agree). The Cronbach's alpha coefficients ranged from $\alpha=0.5$ to 0.9. High scores on each trait indicate that the individual is more inclined towards that trait (Gosling et al., 2003).

The Brief Resilience Scale (BRS). This scale consists of six items, each of which is rated on a five-point Likert scale ranging from 1-5 (strongly disagree - strongly agree). The Cronbach's alpha coefficient was $\alpha=0.94$. High scores on the brief resilience scale reflect a high level of resilience in the individual (Smith et al., 2008).

LEVEL 2-Anxiety-Adult (PROMIS Emotional Distress, Anxiety, Short Form). PROMIS Health Organization (2012) produced LEVEL 2-Anxiety-Adult. The 7-item PROMIS Anxiety Short Form is a part of DSM-5. Level 2-Anxiety-Adult assessment examines the pure domain of anxiety in people aged 18 and above. Each item of the questionnaire is scored on a 5-point scale (1=never-5=always), with higher scores from 7-35 indicating anxiety severity. The reliability coefficient was $\alpha = 0.93$. High scores on anxiety short form indicate a high level of anxiety in the individual.

Procedure. The research topic was approved by the Ethical Board and Board of Studies. Permission to use the scales was procured from the authors. After taking permission for data collection from department authorities, participants were approached through Social media apps. Data was collected through an online survey Gin Google Forms. Before providing the questionnaire, informed consent was taken from the participants. All the assessment measures were administered online and participants were thanked by the researcher at the end of the research protocol.

Results

Table 1Pearson Product Moment Correlation among Personality traits, Resilience, and Anxiety (N=80)

Variables	1	2	3	4	5	6	7
1. Extroversion		.36**	.30*	.35**	.58*	53**	.50**
2. Agreeableness			.27*	.38**	.51**	50**	.40**
3. Conscientiousness				.19	.25*	22	.40**
4. Emotional Stability					.45**	71**	.55**
5. openness to experience						50**	.48**
6. Anxiety							57**
7. Resilience							

Note. *p<.05; **p<.01

As shown in Table 1, there is a significant negative relationship between personality traits (extroversion, agreeableness, emotional stability, and openness to experience) and anxiety which suggests that clinical psychologists who scored high on extroversion, agreeableness, conscientiousness, emotional stability, and openness to experience had less anxiety. Findings also revealed that there is a significant positive relationship between personality traits

(extroversion, agreeableness, conscientiousness, emotional stability, openness to experience) and resilience which indicates that clinical psychologists who are social, cooperative, diligent, emotionally stable, have an active imagination and intellectual curiosity are more resilient. Furthermore, resilience was also found to be negatively correlated with anxiety which shows that clinical psychologists who are resilient have less anxiety.

Table 2 *Multiple Linear Regression for Personality Traits and Resilience as Predictors of Anxiety among Clinical Psychologists (N=80).*

Variables	Anxiety						
	В	SE	В				
Constant	37.8	3.1					
Extroversion	77**	.26	28				
Agreeableness	71**	.30	20				
Conscientiousness	.09	.33	.02				
Emotional stability	-1.4***	.24	49				
Openness to experience	.07	.39	.02				
Resilience	61	.82	07				
\mathbb{R}^2	.67***						
F	24.2***						

Note. ***p*<.01; ****p*<.001.

The results of table 2 reveal that the overall model explained 67% of the variance (R^2 =.67, F (6, 73) = 24.2, p=<.001. It was found that extroversion (β = -.28, p<.01), agreeableness (β = -.20, p<.01), emotional stability (β = -1.4, p<.001) and resilience (β = -.61, p>.05) negatively predicted anxiety. Conscientiousness (β = .02, p>.05) and openness to experience (β = .02, p>.05) did not predict anxiety. The

findings suggest that extroverted, agreeable, emotionally stable, and resilient clinical psychologists have less anxiety.

To test the mediation effect of resilience between personality traits and anxiety, Model 4 of PROCESS (3.5) software was used. To determine the simple mediation of resilience in the relationship between personality traits and anxiety among clinical psychologists, a regression-based method was used.

 Table 3

 Role of Resilience as a Mediator between Personality Trait (Extroversion) and Anxiety in Clinical Psychologists (N= 80).

 Consequent

				consequent				
		M(Res	silience)			Y(A	nxiety)	
Antecedent		В	SE	p		β	SE	р
Extroversion (X)	A	.19	.03	.000***	c'	-1.06	.28	.000***
Resilience (M)					b	-2.96	.89	.000***
R ² =.35					R ² =.44			
F (1,78)42.5=p=.000***						F(2,77)	30.7=p=.000***	
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Note. ***p<.001.

Figure 1.

The mediation pathway of resilience, personality trait (extroversion), and anxiety among clinical psychologists.

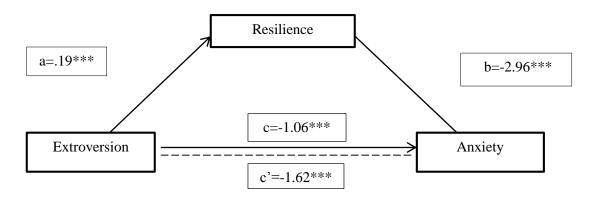


Table 3 indicates that path a significantly (a=.19, p<.000***) predicted resilience which shows that extroverted clinical psychologists are high on resilience. Path b is negatively predicting anxiety (b=-2.96, p<.000***), with a high level of resilience there

would be less anxiety in clinical psychologists. The path c' is also significant (c'=-1.06, p<.000***).

To determine the simple mediation of resilience in the relationship between personality traits (emotional stability) and anxiety among clinical psychologists, a regression-based method was used.

 Table 4

 Role of Resilience as a Mediator between Personality Trait (Emotional stability) and Anxiety in Clinical Psychologists (n= 80).

 Consequent

		M(Resilie	ence)		Y(Anxiety)				
Antecedent		В	SE	р		В	SE	р	
Emotional stability (X)	A	.18	.03	.001	c'	-2.05	.22	.000***	
Resilience (M)					b	-2.28	.75	.000***	
	R ² =.30					R ² =.57			
F (1,78)33=p=.000***					F(2,77)51=p=.000***				

Note. *p<.05; **p<.01; ***p<.001.

Figure 2.The mediation pathway of resilience, personality trait (emotional stability), and anxiety among clinical psychologists.

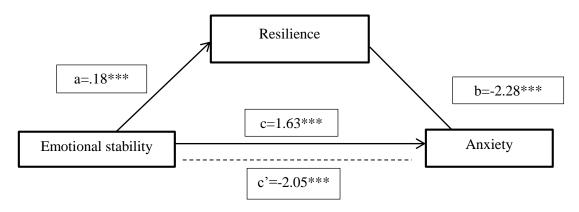


Table 4 indicates that path a is significantly (a=.18, p<.000***) predicting resilience indicating that in highly emotionally stable clinical psychologists' resilience will be higher. Path b is negatively predicting anxiety (b=-2.28, p<.000***) implying that with a high

level of resilience, there would be less anxiety in clinical psychologists. The path c' is also significant (c'=-2.05, p<.000***). To determine the simple mediation of resilience in the relationship between personality traits (agreeableness) and anxiety among clinical psychologists, a regression-based method was used.

Table 5
Role of Resilience as a mediator between Personality Trait (Agreeableness) and Anxiety in Clinical Psychologists (N= 80).

Consequent

	M(Res	silience)			Y(Aı	nxiety)		
Antecedent		В	SE	р	,	В	SE	р
Agreeableness (X)	A	.18	.04	.001	c'	-1.28	.33	.000***
Resilience (M)					b	-3.56	.79	.000***
R2=.20					R ² =.45			
F (1,78)19.7=p=.000					F(2,77)31=p=.000***			
		_						

Note. *p<.05; **p<.01; ***p<.001.

Figure 3

The mediation pathway of resilience, personality trait (agreeableness), and anxiety among clinical psychologists.

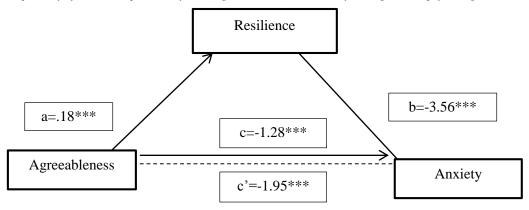


Table 5 indicates that path a is significantly (a=.18, p<.000***) predicting resilience which indicates that agreeable clinical psychologists are highly resilient. Path b is negatively predicting

anxiety (b=-3.56, p<.000***) meaning that with a high level of resilience, there would be less anxiety in clinical psychologists. The path c' is also significant (c'=-1,28, p<.000***).

Discussion

COVID-19 caused physical, psychological, and emotional turmoil among individuals. The huge influx of patients consulted medical and mental health professionals which overburden them. So keeping in view the situation of the country, the study was designed to assess the relationship among personality traits, resilience, and anxiety in clinical psychologists during the Covid-19 pandemic. Similarly, this study aimed to find out the mediating role of resilience between personality traits (Extroversion, agreeableness, conscientiousness, emotional stability, and openness to experience) and anxiety among clinical psychologists.

The age of the participants ranged from 25-60 years. Most clinical psychologists were women (91%). In Pakistan, the majority of women opt for the field of clinical psychology. The reason for this gender imbalance is reported in another study: Women are mostly psychologists because they perceive themselves as more empathic than men (Wilyard, 2011). Multiple hypotheses were analyzed in this study. Findings of the Pearson product-moment correlation revealed that there is a significant negative relationship between personality traits (extroversion, agreeableness, emotional stability, and openness to experience) and anxiety. That suggests that clinical psychologists who scored high on extroversion, agreeable, conscientiousness, emotional stability, and openness to experience had less anxiety. These findings are consistent with literature which reveals that resilience and personality traits (agreeableness) significantly predict lower anxiety, stress, depression, and OCD (Davey et al., 2003; Frajo-Apor et al., 2016; Greene, 2017; Hjemdal et al., 2010). Resilience was also found to be negatively correlated with anxiety.

Findings also revealed that there is a significant positive relationship between personality traits (extroversion, agreeableness, conscientiousness, emotional stability, openness to experience) and resilience which shows that clinical psychologists who are resilient have less anxiety. There is a dearth of evidence in the literature regarding the relationship between resilience and anxiety in clinical psychologists. Literature reveals that highly resilient individuals feel less negative emotions i.e depression and anxiety (Yi et al., 2020). So the present study's findings fill this gap in the literature that resilience and anxiety are negatively correlated in clinical psychologists.

A significant positive relationship was found between personality traits (extroversion, agreeableness, conscientiousness, emotional stability, openness to experience) and resilience which indicates that clinical psychologists who are social, cooperative, diligent, and emotionally stable, have an active imagination and intellectual curiosity are more resilient. These findings are also consistent with the literature (Davey et al., 2003).

On the basis of the findings of multiple linear regression which reveals that resilience and personality traits (extroversion, agreeableness, and emotional stability) are significant negative predictors of anxiety, mediation analysis was run by keeping only the above-mentioned personality traits as IVs, resilience as mediator and anxiety as DV. The findings of this analysis reveal that resilience is found to be a significant mediator between personality traits (extroversion, emotional stability, and agreeableness) and anxiety. These findings are also consistent with the literature (Kocjan et al., 2021; Shi et al., 2015).

Implications

Despite some limitations, the current study provides useful insights into the complicated relationship among personality traits, resilience, and anxiety among clinical psychologists during the covid-19 pandemic. This research will be helpful in raising awareness in society that the mental health of clinical psychologists is crucially important as they encounter stress, psychological problems, and different life challenges patients all the time. This continuous exposure can develop stress, anxiety, depression, and even burnout in them. Due to the pandemic, the patient ratio seeking psychological help has already increased. In this current situation, there is a dire need to have webinars, seminars, and training sessions on how to effectively deal with stress, and workload and how to boost resilience.

Conclusion

During COVID-19, mental health problems have increased and there

References

- Al-Darmaki, F. R. (2004). Counselor training, anxiety, and counseling self-efficacy: Implications for training psychology students from the United Arab Emirates University. Social Behavior and Personality: an international journal, 32(5), 429-439
- Anyan, F., & Hjemdal, O. (2016). Adolescent stress and symptoms of anxiety and depression: Resilience explains and differentiates the relationships. *Journal of Affective Disorders*, 203, 213-220.
- Billings, J., Biggs, C., Ching, B. C. F., Gkofa, V., Singleton, D., Bloomfield, M., & Greene, T. (2021). Experiences of mental health professionals supporting front-line health and social care workers during COVID-19: a qualitative study. *British Journal* of Psychiatry Open, 7(2), 1-8.
- Davey, M., Eaker, D. G., & Walters, L. H. (2003). Resilience processes in adolescents: personality profiles, self-worth, and coping. *Journal of Adolescence Research*, 18(4), 347-362.
- De Kock, J.H., Latham, H.A., Leslie, S.J. et al. (2021). A rapid review of the impact of COVID-19 on the mental health of healthcare workers: implications for supporting psychological well-being. BMC Public Health 21, 104. Doi: 10.1186/s12889-020-10070-3
- Erdfelder, E., Faul, F., & Buchner, A. (1996). GPOWER: A general power analysis program. Behavior Research Methods, Instruments, & Computers, 28, 1- 11.
- Frajo-Apor, B., Pardeller, S., Kemmler, G., & Hofer, A. (2016). Emotional Intelligence and resilience in mental health professionals caring for patients with serious mental illness. *Psychology, Health & Medicine*, 21(6), 755-761.
- Friborg, O., Barlaug, D., Martinussen, M., Rosenvinge, J. H., & Hjemdal, O. (2005).Resilience in relation to personality and intelligence. *International Journal of Methods* in *Psychiatric Research*, 14(1), 29-42.
- Gerada, C. (2018). Doctors, suicide, and mental illness. *British Journal of Psychiatry Bulletin*, 42(4), 165-168.
- Gosling, S. D., Rentfrow, P. J., & Swann, W. B., Jr. (2003). A Very Brief Measure of the Big Five Personality Domains. *Journal of Research in Personality*, 37, 504-528.
- Greene, A. M. (2017). The Big Five as Predictors of Behavioral Health Professional Burnout (Doctoral dissertation, Walden University).

has been a huge influx of patients consulting clinical psychologists. The findings of the present study highlighted many key points that are very important to consider in order to lessen the emotional distress and anxiety of clinical psychologists during the COVID-19 pandemic.

Limitations and Recommendation

There are certain limitations of the study. The data was collected only from clinical psychologists of Lahore, so the findings of this study might not be generalized to clinical psychologists of other cities. The proportion of gender was not equal as women clinical psychologists were 91%. It is suggested that future research may be based on intervention studies for the management of anxiety and stress for clinical psychologists during COVID-19. Moreover, a comparative study may be conducted between psychiatrists and clinical psychologists.

- Hjemdal, O., Vogel, P. A., Solem, S., Hagen, K., & Stiles, T. C. (2011). The relationship between resilience and levels of anxiety, depression, and obsessive—compulsive symptoms in adolescents. Clinical Psychology & Psychotherapy, 18(4), 314-321.
- Hu, T., Zhang, D., and Wang, J. (2015). A meta-analysis of the trait resilience and mental health. *Personality and Individual Differences*, 76, 18–27.
- Kar, S. K., & Singh, A. (2020). Mental health of mental health professionals during COVID-19 pandemic: Who cares for it? Asian Journal of Psychiatry, 53, 102385.
- Kocjan, G. Z, Kavčič, T., & Avsec, A.(2021). Resilience matters: Explaining the association between personality and psychological functioning during the COVID-19 pandemic. *International Journal of Clinical and Health Psychology*, 21(1), 1-9
- Labrague, L. J., McEnroe Petitte, D. M., Leocadio, M. C., Van Bogaert, P., & Tsaras, K. (2018). Perceptions of organizational support and itsimpact on nurses' job outcomes. *Nursing Forum*, 53(3), 339–347.
- Lee, S. A. (2020). Coronavirus Anxiety Scale: A brief mental health screener for COVID-19 related anxiety. *Death Studies*, 44(7),393–401.
- Lee, S. A., Jobe, M. C., Mathis, A. A., & Gibbons, J. A. (2020). Incremental validity of coronaphobia: Coronavirus anxiety explains depression, generalized anxiety, and death anxiety. *Journal of Anxiety Disorders*, 74, 102268.
- Mayr, S., Erdfelder, E., Buchner, A., & Faul, F. (2007). A short tutorial of G power. *Tutorials in Quantitative Methods for Psychology*, 3(2), 51-59.
- Miller, A. M., and Chandler, P. J. (2002). Acculturation, resilience, and depression in midlife women from the former Soviet Union. Nurs. Res. 51, 26–32. doi: 10.1097/00006199-200201000-00005
- Mohammed, A. A., & Mostafa, A. A. (2015). Five factor personality traits and psychological resilience among secondary school students in Egypt. *Psycho-Educational Research Reviews*, 3-9.
- Nrugham, L., Holen, A., and Sund, A. M. (2010). Associations between attempted suicide, violent life events, depressive symptoms, and resilience in adolescents and young adults. *The Journal of Nervous and Mental Disease*, 198, 131–136. doi: 10.1097/NMD.0b013e3181cc43a2
- Poole, J. C., Dobson, K. S., and Pusch, D. (2017). Childhood adversity and adult depression: the protective role of

- psychological resilience. *Child Abuse & Neglect*, 64, 89–100. doi: 10.1016/j.chiabu.2016.12.012
- PROMIS Health Organization. (2012). LEVEL 2-Anxiety-Adult (PROMIS Emotional Distress, Anxiety, Short Form). PROMIS CooperativeGroup.https://www.google.com/url?sa=t&rct=j&q=&esrc=s&source=web&cd=&ved=2ahUKEwi8yOeUuKryAhU ySEEAHeFbCJUQFnoECAIQAQ&url=https%3A%2F%2Fwww.psychiatry.org%2FFile%2520Library%2FPsychiatrists%2FPr actice%2FDSM%2FAPA_DSM5_Level-2-Anxiety-Adult.pdf&usg=AOvVaw2HTcm9M80n7MLfFb-HdieQ.
- Razu, S. R., Yasmin, T., Arif, T. B, Islam, M. S, Islam, S. M. S., Gesesew, H. A & Ward, P. (2021). Challenges Faced by Healthcare Professionals During the COVID-19 Pandemic: A Qualitative Inquiry From Bangladesh. Frontiers in Public Health 9:647315. doi: 10.3389/fpubh.2021.647315
- Scevoli, N. (2020). Resilience in Counselling and Clinical Psychologists Working in the NHS: A Grounded Theory Investigation (Doctoral dissertation, University of Roehampton).
- Sethi, B. A., Sethi, A., Ali, S., & Aamir, H. S. (2020). Impact of coronavirus disease (COVID-19) pandemic on health professionals: Impact of COVID-19 on health professionals. Pakistan Journal of Medical Sciences, 36 (COVID19-S4).
- Shi, M., Liu, L., Wang, Z. Y., & Wang, L. (2015). The mediating role of resilience in the relationship between big five personality and anxiety among Chinese medical students: A cross-sectional study. *PLoS One*, *10*(3), e0119916.
- Shapero, B. G., Farabaugh, A., Terechina, O., DeCross, S., Cheung, J. C., Fava, M., et al. (2019). Understanding the effects of

- emotional reactivity on depression and suicidal thoughts and behaviors: moderating effects of childhood adversity and resilience. *Journal of Affective Disorders*, 245, 419–427. doi: 10.1016/j.jad.2018.11.033
- Skrove, M., Romundstad, P., and Indredavik, M. S. (2012). Resilience, lifestyle and symptoms of anxiety and depression in adolescence: the young-HUNT study. Social Psychiatry & Psychiatric Epidemiology, 48, 407–416. doi: 10.1007/s00127-012-0561-2
- Smith, B. W., Dalen, J., Wiggins, K., Tooley, E., Christopher, P., & Bernard, J. (2008). The brief resilience scale: assessing the ability to bounce back. *International Journal of Behavioral Medicine*, 15(3), 194-200.
- Wang, J., Zhou, M., & Liu, F. (2020). Reasons for healthcare workers becoming infected with novel coronavirus disease 2019 (COVID-19) in China. *The Journal of Hospital Infection*, 105(1).
- Wells, M., Avers, D., and Brooks, G. (2012). Resilience, physical performance measures, and self-perceived physical and mental health in older catholic nuns. Journal of Geriatric Physical Therapy, 35, 126–131. doi: 10.1519/jpt.0b013e318237103f
- Willyard, C. (2011). Men: A growing minority. *GradPSYCH Magazine*, 9(1), 40.
- Yi, F., Li, X., Song, X., & Zhu, L. (2020). The underlying mechanisms of psychological resilience on emotional experience: Attention-bias or emotion disengagement. *Frontiers* in *Psychology*, 11, 1993.

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