

# Psychological Stress among Palestinians during the COVID-19 Pandemic

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## Abstract

The present study addresses psychological stress among Palestinians during the COVID-19 pandemic. Psychological stress prevalence among Palestinians during the COVID-19 pandemic was evaluated using an index of a 10-item scale based on the Perceived Stress Scale (PSS), which was originally developed in 1983, and was administered to four thousand two hundred and forty-five (4,245) Palestinians in the West Bank, Palestine. The sample population was selected via the stratified random selection method. Study findings revealed that almost three quarters of the participants (74.2%) experienced a high level of psychological stress during the COVID-19 pandemic. The study indicates that being female, married, non-working, age, with large number of children were all risk factors for experiencing a significantly higher level of psychological stress.

**Keywords:** COVID-19, pandemic, psychological stress, anxiety, Palestine.

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## 1. Introduction

Since its declaration as a pandemic by the World Health Organization (WHO) in early 2020, the coronavirus pandemic (SARS-CoV-2 virus or COVID-19) is still an ongoing pandemic thereby making it

complex and difficult to study. We are currently dealing with a health disaster that is completely different from other usual disasters that have existed for a defined period and ended, such as

earthquakes, floods, and even wars (WHO, 2021).

Therefore, it is difficult to determine the effects and consequences of the COVID-19 virus for the mentioned reasons, also because of the overlap of topics and the difficulty of separating them, and it is too early to assess the effects resulting from the pandemic. In public health, Robillard *et al.* (2020) reported an increase of anxiety from low to moderate level during the outbreak of the COVID-19 pandemic, in addition to social, financial and psychological stresses during an emerging pandemic from a population survey in the acute phase of COVID-19 pandemic.

Indeed, if researchers were to assess the effects of the pandemic, it would span many areas or levels starting with those infected with COVID-19, those in contact with the infected whether healthcare providers or family members; and there is also the effect of closure and quarantine on people, or the effects that were caused by health measures such as continuously wearing masks and limiting the freedoms of individuals, social distancing or limiting social contact between people and even between members of the same family, if need may be. That is in addition to the on-and-off closure of schools, universities, markets and institutions and the ramifications they create in society. However, it is not easy to separate all of these issues, and caution must be exercised in addressing and analyzing them.

The effects of the epidemic are linked to both the fear of contracting the disease personally or having a loved one contract it, and with containment measures that restrict individuals' freedoms (Di Giuseppe *et al.*, 2020; Song, 2020; Robillard *et al.*, 2021).

## 2. Background and Literature Review

Despite the various publications on the subject of stress on the part of those interested in mental and physical health, the term stress does not have the same meaning to all of them. The definition of psychological stress is a multi-definition term due to the multiplicity of scholars' views. Selye (1974) is considered the founding father of psychological stress, as he was the first to use stress in the biological field. In fact, Selye (1974) used the term stress in his early writings to refer to a group of unspecified changes to any demand or any external event causing damage.

Selye (1976) defined psychological stress as exciting or changes in the internal or external environment with this degree of intensity and permanence, which conveys the adaptive capacity of the organism to its maximum extent, which in certain circumstances can lead to disease, and assesses the persistence of stress as much as it follows in terms of psychological responses so the body is unhealthy.

Lazarus and Folkman (1984) defined stress as a special relationship between the individual and the environment that the individual values as arduous and stressful or that it exceeds his resources to deal with and

endangers his health. Also, Schafer (1996) defined stress as stimulating the mind and body in response to a demand imposed on them, and that pressure is always present and it is a characteristic of life. Excitement is an inevitable part of life, and the proof of this is that we are always thinking and doing some degree of excitement. As for Kobasa(1979), he defined pressures as those stressful events in the internal or external environment for the individual that led to a change in his lifestyle and require him to restore his previous consensuses.

To sum up, the foregoing that the common factor in the physical and psychological sphere is the load that falls on the shoulders of the individual and the responses that follow on his part to adapt to the change he faces. Most researchers agree in defining what is meant by pressure by referring to situations in which the requirements of the environment or what the individual is required to do on a degree greater than his or her own capabilities. The individual is not able to perform the tasks required of him fully and so feels pressure, which may lead to the possibility of psychological disorders and the emergence of psychosomatic symptoms. The level of stress depends on the extent of the individual's awareness of the failure in facing these requirements as well as on the sources of support available to him (Lazarus, 1966).

The concept of crisis means turning point, which is a specific pathological moment for the patient in which he turns worse or better within a relatively short period of time, and

the term crisis has been used to denote the occurrence of firm pressures like the case of the crisis in which we are experiencing the COVID-19 pandemic (Kobasa, 1979; Song, 2020).

Novel Coronavirus (COVID-19) is an infectious disease that currently represents a major public health risk and is of concern to all of us. It is important to remember that it is normal for us to be emotionally affected by events such as large-scale disease outbreaks(Mukhtar, 2020; WHO, 2020, 2021).

The effects of the COVID-19 pandemic can be compared to the effects of natural disasters and wars. It is therefore imperative to better understand its psychological impact in our society and to highlight risk and protective factors in order to better guide public health recommendations and psychosocial interventions. This knowledge will help us better to cope with a potential second and third wave of COVID-19 or future pandemics (Di Giuseppe *et al.*, 2020; Song, 2020; Robillard *et al.*, 2021).

There are many questions that we must study to find out the effects of the COVID-19 pandemic including the extent to which people are aware of the measures taken by the government in relation to the pandemic, how the it affected their living conditions and their education potentially turning to remote digital education in addition to the lack of opportunities among members of society.

The current Coronavirus pandemic is a special and extraordinary occurrence. It can

affect people on the physical, psychological, social, and educational levels. In fact, in such a context, many individuals will undoubtedly experience reactions of stress, anxiety and depression (Chew *et al.*, 2020; Mukhtar, 2020; Banat *et al.*, 2021a).

In terms of the psychological effects, the potential impacts of quarantine and the social distancing, overall, COVID-19 is a multifaceted concern. We note that people do not react in the same way to the event, and their reactions depend on their experience, the context in which they find themselves, the internal and external resources that they can mobilize in addition to their health condition. The following symptoms can appear, to varying degrees, for each person: (1) Anxiety towards the self, family and isolated vulnerable parents. (2) Feeling guilty about colleagues for not being in the office or in services. (3) Boredom and frustration with lack of communication and activity (4) Anxiety, feelings of persecution, and physical disturbances with sleeping patterns and pain. (5) Feeling of isolation and increased loneliness among officers away from their homes. (6) Irritability or avoidance behavior. (7) Drug abuse (alcohol, tobacco, etc.). (8) Marital or family tensions. (9) Difficulty returning to work from home, and focus. (10) Triggering previous traumas. (11) Fatigue associated with overloading demands (working in precarious situations) (WHO, 2020, 2021; Gori *et al.*, 2020; Banat *et al.*, 2021a; Yan *et al.*, 2021).

The role of family assistant, solidarity with relatives, etc. are more important if they were not previously present with the affected person. For individuals in an anxious mood and who have a tendency to worry, the Coronavirus pandemic can pose great difficulty. Recent studies highlight that the duration of the quarantine is itself an exacerbating factor for these effects especially past the ten-day mark (Yan *et al.*, 2021, Banat *et al.*, 2021a).

The current health situation is an unprecedented and traumatic one that can cause Post-Traumatic Stress Disorder (PTSD). In fact, the crisis associated with this pathogen confronts us directly with death, the death of others and the fear of our own death. This cuts off the sense of immortality that we all possess and thus creates an intense feeling of vulnerability (Kobasa, 1979; Song, 2020; Banat, 2021a).

The World Health Organization's Diagnostic Manual ICD 10 (1993) classified disintegrating disorders that included ten disorders related to acute stress reactions and adjustment disorders, which include five types: (1) Acute stress reaction. (2) Post-traumatic stress disorder. (3) Adjustment Disorder. (4) Other reactions to severe stress. (5) Unspecified.

It is important to distinguish the concepts of stress, anxiety and burnout. Stress is related to the reactions experienced in relation to current stressors, for example the financial difficulties of employees in relation to unemployment and the family adjustment of

people who live together during lockdown and quarantine. Anxiety, on the other hand, is defined as an expectation of negative or unfortunate events that could eventually arise, such as an overwhelming fear of contracting a virus. Anxiety is seen as a sad and often exaggerated reaction to the situation (Selye, 1974, 1976).

Stress is a normal physiological response to an abnormal state. It is an integral part of our existence. It allows our body to adapt to the many positive and negative events through which we are going such as childbirth, marriage, loss of function and thereof. Stress comes and goes on its own, depending on whether one is in the presence of stressors or not. For instance, if you are nervous at work, but this tension subsides in the evening or on the weekends, you may think that stress factors are related to your work (Selye, 1974, 1976).

As for anxiety, unlike fear, which is a response to a very specific and real threat, anxiety is a response to a mysterious or unknown threat. Anxiety is expressed when we believe that a dangerous or unfortunate event is occurring and we anticipate it. Each person can experience anxiety in its unique degree and intensity. The individual perception of the event will have a great influence on the severity of the anxiety the person suffers (Selye, 1974, 1976; Urooj *et al.*, 2020).

According to Diagnostic and Statistical Manual of Mental Disorders (DSM5), depression is a temporary state of

fatigue, frustration and sadness. Depression can manifest itself in different ways, both physically and psychologically, and its severity varies from one person to another (Tolentino & Schmidt, 2018; Chew *et al.*, 2020).

Empirically, a very limited number of studies worldwide have highlighted the psychological stress during the COVID-19 pandemic. In a recent study, Yan *et al.* (2021) concluded that the self-reported stress of Chinese residents related to the COVID-19 pandemic was significantly related to gender, age, employment, resilience and coping styles.

The cross-sectional analyses of Robillard *et al.* (2021) showed a significant increase from low to moderate stress during the COVID-19 outbreak. The factors associated with stress worsening were, mental disorder, gender, the number of children, age, worse family relationships and spending less time exercising and doing artistic activities.

The study of Di Giuseppe *et al.* (2020) indicated that the psychological impact of the COVID-19 pandemic among Italians during the early weeks of government lockdown has been significant. The pandemic has continued to have an extraordinary mental health impact as it has moved across the globe. Given the salience of defensive functioning in psychological distress, considering the interventions that foster the use of more adaptive defenses may be an important component of building resilience amidst a pandemic.

Song (2020) argued that the then called novel coronavirus disease 2019 (COVID-19) developed into a pandemic on March 11, 2020. COVID-19 not only brought on a life crisis, but also incurred psychological stress: tension, anxiety, fear and despair among the affected populations.

### 3. Purpose and Scope

During the COVID-19 pandemic people worldwide experienced increased levels of psychological stress, anxiety and frustration (Di Giuseppe *et al.*, 2020). The impacts of psychological stress on social, psychological and emotional well-being remain relatively unexplored. This study aims to explore the prevalence of psychological stress among Palestinians during the COVID-19 pandemic. The study is considered the first of its kind, to the authors' knowledge, and one of the leading studies that address the prevalence of psychological stress, where empirical studies of such an important topic during the COVID-19 pandemic is scarce in Arab societies in general, and in the Occupied Palestinian society in particular.

### 4. Definition of Terms

**Psychological stress:** psychological stress is defined as a particular relationship between the person and the environment that is appraised by the person as taxing or exceeding his/her resources and endangering his/her well-being (Kobasa, 1979; Lazarus & Folkman, 1984: 19).

**Coping strategies:** coping strategies are the basic categories used to classify how people

react to or handle stress (Rabenu *et al.*, 2017: 875; Gori *et al.*, 2020; Banat *et al.*, 2021a).

### 5. Hypotheses

The study proposed the following hypotheses:

**Hypothesis #1:** There are no statistically significant differences at  $\alpha \leq 0.05$  in the prevalence of psychological stress among Palestinians during the COVID-19 pandemic according to gender, marital status, place of residency, educational level, and work status.

**hypothesis #2:** There is no statistically significant correlation at  $\alpha \leq 0.05$  between age, number of children and the prevalence of psychological stress among Palestinians during the COVID-19 pandemic.

### 6. Methodology and Design

#### 6.1 Approach

The current study used a quantitative approach using a questionnaire that is appropriate to the exploratory nature of the research.

#### 6.2 Population and Sampling

The target population consisted of Palestinians, who are 18 years of age and older in the West Bank during the year 2021, which included 781,864 individuals (394,730 males to 387,134 females)

(Palestinian Central Bureau of Statistics, 2021).

The sample was composed of 4,245 participants stratifiedly selected, according to their gender. The sample size was calculated using the sampling web of <http://www.surveysystem.com/sscalc.htm>, the sample size calculator, with a margin error of 1.5.

### 6.3 Instrumentation

Psychological stress prevalence among Palestinians during the COVID-19 pandemic was evaluated using an index of a 10-item scale, based on the Perceived Stress Scale (PSS), which was originally developed in 1983, taking into consideration the cultural appropriateness in the Palestinian society. A 5-point Likert scale (ranging from “very often” to “never”) was used to assess the prevalence of psychological stress among the sampled population through an online survey that was launched on January 12, 2021, and the data were collected for a period of three months. The sampling survey instrument sought socio-economic background information about the participants, which included age, gender, marital status, place of residency, educational level, number of children, and work status.

#### 6.3.1 Instrument Validity

The validation of the instrument proceeded in two distinct phases. The initial phase involved a small focus group session (N=20); while the second phase involved the

implementation of a pilot study (N=50) to validate the survey using exploratory factor analysis. Factor loading for all items exceeded 0.80 (0.83 to 0.94), which indicated that these items were suitable in assessing every item of psychological stress among Palestinians during the COVID-19 pandemic.

#### 6.3.2 Instrument Reliability

The reliability was tested using Cronbach's Alpha and Guttman Split-Half Coefficients to ascertain the reliability and consistency of the survey. Cronbach's Alpha and Guttman Split-Half Coefficients for the survey instrument were 0.88 and 0.86, respectively, indicating excellent reliability and consistency.

### 6.4 Sample Socio-demographic Characteristics

The demographic breakdown parameters of the participants were age, gender, marital status, place of residency, educational level, number of children, and work status. In total, 4,245 Palestinians participated in the sample study. Respondents were between 18 and 86 years of age (M 35.87, SD 15.46); and more than half (53%) were married. Males represented 50.2% of the participants, while the remaining 49.8% were females. Almost half (52.7%) of the participants were from rural areas, 35.9% from urban areas, while the remaining 11.4% were from refugee camps. The majority of the respondents were well-educated, almost 64.7% had a college or undergraduate degree. The majority (56.7%) were working,

and had an average of 3.90 children, with a range of 1 to 16 (SD 2.34).

### 6.5 Data Analysis

The questionnaire items were rated on a 1–5 Likert scale (1=never to 5=very often) whereby the highest score indicated a high prevalence of psychological stress during the COVID-19 pandemic. Descriptive statistics gauged the prevalence of using psychological stress during the COVID-19 pandemic among the sampled population. The following statistical techniques were measured: Regression, T-test, One way analysis of variance, Tukey test, Cronbach's Alpha, Guttman Split-Half Coefficients and Factor Analysis using SPSS.

## 7. Findings

The mean score of the prevalence of psychological stress during the COVID-19 pandemic scale among Palestinians as reported by the sampled participants was high (M 3.71, SD 0.62). About three quarters of the participants (74.2%) experienced a high level of psychological stress during the COVID-19 pandemic.

Furthermore, the findings identified the indicators of psychological stress among Palestinians residing in the West Bank during the COVID-19 pandemic ranked in a descending order as follows: “in the last month I have felt nervous and stressed” (M 4.24, SD 0.74); “I have been upset because of something that happened unexpectedly” (M 4.09, SD 0.75); “I have been angered

because of things that happened, that were outside of my control” (M 4.05, SD 0.87); “I have felt difficulties were piling up so high that I could not overcome them” (M 3.95, SD 0.79); “I have felt that I were unable to control the important things in my life” (M 3.93, SD 0.84); and “I have found that I could not cope with all the things that I had to do” (M 3.65, SD .92).

The study explored the demographic breakdown over the prevalence of psychological stress among Palestinians during the COVID-19 pandemic with the aim of identifying any differences. Findings showed that place of residency and educational level do not indicate any statistically significant differences. However, it was found that gender, work status, marital status, age and the number of children were significant variables. In relation to gender, the differences were in favor of the females (M 3.76, SD 0.62) compared to (M 3.65, SD 0.63) for the males: the T-test value was (-5.537,  $P=0.000$ ). As for the work status, the differences were in favor of participants who were unemployed (M 3.74, SD 0.61) compared to (M 3.68, SD 0.64) for those who had jobs: the T-test value was (-2.949,  $P=0.003$ ). With regards to the marital status, the differences favored the married participants (M 3.75, SD 0.62) compared to (M 3.68, SD 0.63) for the single participants: F value was (8.071,  $P=0.000$ ).

Finally, the study findings indicated that there was a statistically significant positive correlation between age, number of children and the average score of psychological stress



among Palestinians during the COVID-19 pandemic, Beta-value was (0.169,  $P=0.000$ ) and (0.090,  $P=0.000$ ), respectively.

## 8. Discussion

The online survey has generated evidence related to the impact of COVID-19 on the psychological wellbeing of people in Palestine, since far less attention has been devoted to the impact of COVID-19 pandemic on the psychological wellbeing (Barkur & Vibha, 2020). To the best of our knowledge, this study is the first large scale survey of psychological distress in the Palestinian population following the COVID-19 outbreak. Due to the way the survey was constructed, all participants completed all items, which was a further strength of the study.

Overall, a considerable 74.2% of the study participants experienced a high level of psychological stress during the COVID-19 pandemic. Having a chronic disease, not considering policies and scientific evidence, and not implementing COVID-19 preventive measures were significantly associated factors with the perceived stress. The prevalence of psychological stress was higher than in previous studies. In China, Qiu *et al.* (2020) revealed that 35% suffered from high psychological distress during the last week of the current COVID-19 epidemic at the time. In Australia, Taylor *et al.* (2008) indicated that a third (34%) of participants reported high perceived distress during an equine influenza quarantine. The outcomes of this study is comparable to a

previous study conducted in China (82.6%, general population) (Zhang *et al.*, 2020).

According to the WHO's definition (2020) COVID-19 is the disease caused by a new coronavirus called SARS-CoV-2. As per Thursday June 03, 2021, the global number of COVID-19 casualty figures was at (170,812,850) confirmed cases, including (3,557,586) deaths. In Palestine, the number of COVID-19 casualty figures was at (337,573) confirmed cases, including (3,771) deaths (WHO, 2021).

The outbreak of COVID-19 pandemic has shed some light on the potential for a widespread increase in psychological issues (Dong & Bouey, 2020). People could experience fear of death, fear of getting oneself or their family infected, anxiety, anger, depressive symptoms and other mental health concerns during this pandemic outbreak (Mukhtar, 2020). Governmental lockdowns, restrictions and quarantines have impacted every Palestinian's life and, potentially, their physical, socio-psychological, and economic well-being under the on-going Israeli Occupation and would likely experience a high level of psychological stress.

COVID-19 pandemic could have a negative impact on psychological and mental health for individuals. For instance, psychological distress, mental health issues, grief, shame, helplessness, hopelessness, post-traumatic symptoms, substance abuse, panic attacks, stress, anxiety, depression, loneliness, ambivalence, fear, anger, stigma and worry

towards socioeconomic status (Mukhtar, 2020).

The study results showed that, Palestinian females scored a higher level of psychological stress than their male counterparts. Previous studies have reported higher stress among females (Urooj *et al.*, 2020; Du *et al.*, 2020; Chew *et al.*, 2020). This is probably due to female involvement in the household and family matters, and the care burden at home in addition to the females' physiology in general and the ovarian hormone fluctuations and endogenous estradiol changes across the menstrual cycle in particular that increase their psychological stress (Yan *et al.*, 2021).

Moreover, patriarchal ideology is deeply rooted in the Palestinian society, where the notions of father and brother are prevalent. The Palestinian culture seeks to direct males towards an affirmation of masculine qualities like manhood, chivalry, bravery, gallantry, daring and stamina. On the other hand, it stresses directing females towards feminism, decency, decorum, virginity, love of children, home economics and stability (Barakat, 1993; Muhawi & Kana'na, 2001; Banat & Rimawi, 2014; Banat, 2010, 2014, 2015, 2019a, 2019b, Banat & Dayyeh, 2019; Banat *et al.*, 2021b); it consequently follows that they would likely experience a higher level of psychological stress. This result was contrary to previous studies done by Chew *et al.* (2020) and Du *et al.* (2020).

The findings show that married participants scored a higher level of psychological stress

than those who were single, and a positive relationship was found between the number of children and the level of psychological stress. Consequently, with a higher number of children, participants have more family responsibilities and would need to deal with different problems including economic issues under the difficult living conditions prevalent in the Palestinian society and the new challenges, which would agitate the stability of the family and hence increase their psychological stress (Banat, 2019b; 2019c).

Furthermore, the study findings indicated that unemployed participants experienced a higher level of psychological stress than those who were employed. Sociologically, Karl Marx (1844) had pointed out in his social theory about the significance of the economic aspect in the social structure and its role in controlling all aspects of the society (Banat, 2012). The economy gives independence and social status. Thus, this is regardless of the harsh living conditions in the Palestinian society as a result of the high rate of unemployment and poverty under the on-going Israeli Occupation. The statistics of the Palestinian Central Bureau of Statistics (2020) reflects the highest percentage of poverty and the difficult socio-economic conditions in Palestine in general and during the COVID-19 pandemic in particular. Here, 47.5% of the refugee families are under the risk of poverty, which is as a result of the high rate of unemployment, high fertility rate, the large family size, and the high dependency rate. This would surely lead to a more

pessimistic orientation among Palestinians toward the COVID-19 pandemic that would increase their psychological stress.

Finally, a positive relationship was found between age and psychological stress among Palestinians during the COVID-19 pandemic. Psychological stress increases substantially among the elderly. In the era of globalization and technology, perhaps youth participants direct more cognitive effort to maintain positive emotions and avoiding negative ones. However, maybe the senior participants face greater social, emotional, and responsibilities toward their families' health and protection under the difficult living conditions prevalent in the Palestinian society and the new challenges, which would agitate the stability of the family and increase their psychological stress (Banat, 2019b; 2019c; Banat *et al.*, 2021a; Yan *et al.*, 2021).

## 9. Conclusion and Recommendations

The study has shown a high prevalence of psychological distress amongst the Palestinian population. Approximately, more than two-thirds of participants scored high on the psychological distress scale associated with the COVID-19 pandemic. Gender, work status, marital status, age and number of children were significant, associated factors with psychological stress. Further research studies must address the psychosocial aspects of epidemics and pandemics alike. The study results emphasized the urgency of demand for psychosocial support services in the near future, such as online psychological

counseling services to improve Palestinians' resilience and to alleviate their distress during the COVID-19 pandemic under the on-going Israeli Occupation.

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