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The Relationship between Working Anxiety, Stress and Depression with Positive Psychological Capital at 2020 Covid-19 World Pandemic[1]

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Abstract: This study aims to reveal the relationship between the levels of anxiety, depression and stress observed in employees with positive psychological capital, during the Covid-19 outbreak that emerged in Wuhan, China in December 2019 and spread to the whole world in a short time. For this purpose, data was collected using the survey technique from 402 participants selected by simple random method. Lovibond and Lovibond (1995) DASS (Depression Anxiety Stress Scale) and the Psychological Capital Scale developed by Luthans, Avolio, Avey and Norman (2007) used for data collection. As a result of the analysis made on the data collected in the research; positive psychological capital levels of employees have been affect negatively the anxiety, depression and stress symptoms.

Keywords: COVID-19, Outbreaks, Positive Psychological Capital, Depression, Anxiety, Stress, Employee Psychology in Disasters.

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2020 COVİD-19 Dünya Pandemisinde İş Yaşamında Görülen Kaygı, Stres ve Depresyonun Pozitif Psikolojik Sermaye İle İlişkisi

Öz: Bu çalışma, Aralık 2019'da Çin'de Wuhan'da ortaya çıkan ve kısa sürede tüm dünyaya yayılan Covid-19 salgını sırasında, pozitif psikolojik sermayeye sahip çalışanlarda gözlenen kaygı, depresyon ve stres düzeyleri arasındaki ilişkiyi ortaya koymayı amaçlamaktadır. Bu amaçla, veriler basit rastgele yöntemle seçilen 402 katılımcıdan anket tekniği kullanılarak toplanmıştır. Lovibond ve Lovibond (1995) DASS (Depresyon Kaygı Stresi Ölçeği) ve veri toplamada Luthans, Avolio, Avey ve Norman (2007) tarafından geliştirilen Psikolojik Sermaye Ölçeği kullanılmıştır. Araştırmada toplanan veriler üzerinde yapılan analizler sonucunda; çalışanların pozitif psikolojik sermaye düzeyleri kaygı, depresyon ve stres belirtilerini olumsuz etkilemektedir.

Anahtar Kelimeler: COVID-19, Salgınlar, Pozitif Psikolojik Sermaye, Depresyon, Anksiyete, Stres, Afetlerde Çalışan Psikolojisi.

Introduction

In organizational life, some employees who experience stress are forced to continue their activities with it. The stress faced by employees is sometimes due to the nature of their work and sometimes the self-perception of the employee. However, there are such situations that the stress encountered is based on a very strong reality. This reality is disaster situations. Especially in such a situation, an inevitable stress situation occurs in the individual, who both maintains his/her own vital and organizational activities and who has to help other people as a result of his/her job or voluntarily. The feeling of pressure that the individual cannot control under the work and environmental factors creates stress (Şimşek at al., 2019: 227). Various harmful consequences emerge in especially for employees who are faced with disasters and emergencies, particularly psychological, as a result of the stress they are exposed to (Mitchell and Dyregrow, 1993: 906). The intense stress experienced by employees can turn into more serious health problems such as anxiety disorders and depression (Gürkan and Yalçiner, 2017: 91).

The recent one of the disasters that cause harmful results is the outbreak that occurred in Wuhan Province of China and affected the whole world as of December 2019. This outbreak has started to appear in Turkey by March 2020 and has deeply affected the working and social lives of many people. Because of this outbreak, new regulations have been introduced to social and organizational life (T.C.Sağlık Bakanlığı, Halk Sağlığı Genel Müdürlüğü, Covid-19 (Sars-CoV2 Enfeksiyonu) Rehberi).

Positive psychological capital consists of the components of optimism, self-efficacy, hope and psychological resilience. Self-efficacy can briefly be defined as one's belief in one's own abilities and hope is defined as one's motivation for achieving one's goals. Optimism refers to a person's tendency to expect the best outcome, and psychological resistance refers to the ability to combat changes, conflicts, setbacks, and difficult situations. Psychological resilience is also known for its ability to restore a situation that deviates from the standard. It is seen that individuals with positive psychological capital are successful in fulfilling the objectives of the organization and in their own activities (Luthans et al., 2004: 47; Urgan and Sevim, 2019: 79; Erdoğan and İraz, 2019: 27).

Considering the studies carried out in the three-month period from the beginning of the outbreak to the present day, the general topics have been dealt with in relation to Covid-19, which is the most important output of the study. It is seen that the studies mostly consist of qualitative studies such as health, tourism, human psychology, economy, probable predictions, general evaluations, restrictions, environmental effects of the virus, information focused on the work life of employees and general information (Dinarto et al, 2020; Acar, 2020; Gössling et al, 2020; 2020; Hoque et al, 2020; Bakar and Rosbi, 2020; Gan et al,2020; Tandon, 2020; Mehta et al, 2020; 2020; Rothan and Byrareddy, 2020;Qiu et al, 2020; Wang et al, 2020; Ho et al, 2020; Li et al, 2020; Cao et al, 2020; Zang et al, 2020; Dalton et al, 2020; Duan and Zhu, 2020; Zheng et al, 2020; Nicola et al, 2020; Parks, 2020; Zang et al, 2020; Stojkoski et al, 2020; Tuite et al, 2020a;

Sahmoud, 2020; Tuite et al, 2020b; Tuite et al, 2020c; Ayittey et al, 2020; Wilson et al, 2020; Dong et al, 2020; Nelson et al, 2020; Bogoch et al, 2020; Gössling et al, 2020; Lacus et al, 2020; Chinazzi et al, 2020; Monserrate et al, 2020; Haleem et al, 2020; Gentilini et al, 2020; Koh, 2020).

The positive psychological capital status of individuals who are in working life and continue their activities is important during the time of the effects of the outbreak. The research aims to reveal the stress level perceived by the positive psychological capital levels of the working individuals during these days when the outbreak effect continues and the outcome cannot be predicted concretely. In addition to stress, symptom levels of psychological situations, such as anxiety and depression, where stress is experienced more intense, will also be revealed. It is thought that it will make a unique contribution to the literature in terms of determining the situation on a concrete event. In the future, when the historical processes are analyzed by going back, the study will provide valuable data for the researchers in terms of revealing the effect of positive psychological capitals working in disasters on the levels of depression, anxiety and stress in employees.

Basic Theoretical Framework

In this section, stress of employees in disasters and positive psychological capital concepts will be discussed.

Stress of Employees in Disasters

In general, disaster is the name given to all kinds of natural, technological or human-related events that cause physical,

economic and social harm for people, disrupt normal life and affect the whole society and cannot be overcome by local efforts (Kadıoğlu, 2008: 2). Disasters change the normal course of life, leading to untimely casualties and social destruction. Along with human history, disasters are encountered. Disasters differ according to their size, the deaths they bring, the injuries, the degrees of social and economic harm (Erkal and Değerliyurt, 2009: 149; Ergünay, 2009: 2; Güler and Çobanoğlu, 1994: 11). One of these disasters is outbreaks (Erkal and Değerliyurt, 2009: 149). Outbreaks have had consequences that have profoundly affected societies throughout history. In a period of 150 years, the population in America decreased from 50 million to 5 million. Some countries disappeared from history as a result of the outbreak (McNeil, 2007: 261). When historical processes were examined, many outbreaks emerged at the end of the war. Circulating among countries are not only goods, technical knowledge and thought but also disease-carrying microbes. These disease-carrying microbes have been the cause of major deaths (Özdemir, 2005: 3).

The recent outbreaks seen throughout history occurred in 2019 in Wuhan Province of China. The disease, caused by Coronaviruses, was seen in 20 more countries in sync with the time it appeared in China. The World Health Organization declared a state of emergency on January 30, 2020 (Koronavirüs Bilgilendirme Raporu, 2020). As of April 19, 2020, the number of coronaviruses diagnosed patients worldwide was 1,991,562 and the number of patients who died was 130,885 (WHO, Coronavirusdisease 2019 (COVID-19) Situation Report).

Due to the outbreak that increased its impact in a short period, countries have applied measures that regulate both social life and working life by taking various measures such as quarantine. In Turkey, the spread of the disease is tried to be prevented through various measures such as flexible working, distance education, travel restriction and social isolation (T.C İçişleri Bakanlığı, Koronavirüs Konulu Ek Genelge, 2020).

Disasters cause many harmful effects on people. Intense stress is one of them. Stress is defined as environmental factors affecting the individual. Especially when the elements that the individual cannot control within the organization, cannot be balanced with the possibilities of the individual, it turns into a quality that causes physical and psychological damage (Şahin and Bedük, 2019: 1449; Gümüştekin and Gültekin, 2019: 148; Yüksel, 2014: 116). Factors that can disrupt human physical and mental balance can also be social-oriented (Aydın, 2004: 53-54). Intense stress is expressed by the effect of trauma. The stress that the individual is exposed to is a phenomenon that turns from stress to trauma with an evolution that turns from abstract to concrete. It is a common condition in people who are exposed to natural disasters (Figley, 1995; Yanbolluoğlu, 2018: 142). Trauma is associated with the devastating effects of acute developing and unexpected life cases (Pak et al., 2017: 629). Intense stress also causes psychological problems such as anxiety disorder and depression (Yılmaz, 2007: 140; Gürkan and Yalçıner, 2017: 91).

There may be people who are affected by disasters themselves, and there are also employees who need to serve people

affected by the disaster. These employees are exposed to intense stress and hence trauma due to the fact that they have to continue to serve, even if they have experienced or did not experience the disaster themselves (Mitchell and Dyregrow, 1993: 906).

After disasters, physical and psychological negative effects are seen in aid workers, professionals or voluntary workers. There are healthcare professionals among these employees (Pak et al., 2017; Yılmaz, 2007; Gürkan and Yalçıner, 2017; Mitchell and Dyregnev, 1993). Apart from healthcare professionals, search and rescue, firefighters and public security workers are among the professions that are likely to be exposed to traumatic stress (Gökçe and Yılmaz, 2017). Yanbolluoğlu (2018), as a result of his research involving 15 studies in the field of SSCI, considers that the increase in the traumatic stress level of the personnel who directly intervened in the event in case of a disaster and who are effective in the subsequent processes is a common finding. Similarly, it is a common conclusion that burnout syndrome is also seen in these employees (Yanbolluoğlu, 2018).

Employees exposed to extraordinary situations such as disasters show various symptoms as a result of their witnesses. These are usually traumatic stress symptoms, accompanied by a physiological and psychological disorder, and anxiety that causes disorder in body functions (Yılmaz, 2007: 140). There may be sleep disorders and social loneliness (Gürkan and Yalçıner, 2017: 92). Disaster workers may show behaviors that result in burnout, anger, and disorder in daily and social rela-

tionships after events (Gökçe and Yılmaz, 2017: 199). All individual attitudes of employees who have to work in extraordinary situations also affect their work life. The job satisfaction and commitment of those working with patients who require intensive care or who are dying are declining (Tel et al .; 2003: 14).

Psychological Resistance and Positive Psychological Capital

Today, the changes are occurring at a rapid pace in a way to question the learned strategies day by day. Previously learned strategies are insufficient to solve existing problems. The ability to take a position by perceiving such changes becomes increasingly important in this case (Ülgen and Mirze, 2010: 33). The capacity to produce alternative solutions is important when existing strategies in both organizational and social life do not reach their goals (Urgan and Sevim, 2019: 72).

Positive psychological capital focuses on the realization potential within the individual. Focusing on the positive aspects of the individual, it causes activities to be carried out with positive triggers. Psychological resilience is the capacity to keep up with changes, the power to return to the old state after setbacks, conflicts, and trials that have not been successful. Psychological resilience constitutes positive psychological capital with hope, self-efficacy and optimism. (Luthans, 2002, Luthans et al., 2004; Luthans et al., 2006; Avey et al., 2006; Luthans et al., 2007a, Luthans and Youssef, 2007). Psychological resilience is very effective in revealing sufficient manpower in individuals and communities. It corresponds to the ability to adapt to major challenges. In particular, individuals with psychological resili-

ence display the most appropriate behavior in the perception of a threat (Masten, 2001: 228).

When we look at the common characteristics of people who adapt to the changes, it is seen that firstlythey accept the real thing as it is, secondlythey possess values and have a deep belief and finallythey have the flexibility to adapt to changes easily. Psychological resilience and flexibility can be used interchangeably in this sense (Jackson and Watkin, 2004).

Psychological resilience is turning into an advantage for businesses. The psychological resilience of the individuals involved in organizational behavior is the necessary force to balance a situation that deviates from the standard (Luthans, 2002: 702). According to James and Watkin (2004: 15), the resilience that forms this strategy basically consists of seven elements:

- The power of managing the individual's internal world (Emotion regulation)
- Emotion and behavior control (Impulse control)
- Resilient people do not act with their usual thinking patterns and thus produce more potential solutions (Causal analysis)
- Belief in self-efficacy to solve problems (Self-efficacy)
- Realistic optimism and being realistic in planning (Realistic optimism)
- Capturing clues from others' process analyses and behavioral states (Empathy)
- The power to realize positive aspects and take on new challenges (Reaching out)

Some studies reveal the relationships between employees working in extraordinary situations such as disasters and their positive psychological capital and psychological resilience. Pak et al. (2017) examined the relationship between psychological resilience and stress in emergency workers and found that the stress levels of emergency workers with high psychological resilience were low (Pak et al., 2017). In another study with nurses, they concluded that nurses are trying to cope with the stress they are exposed to, with internal and external protective factors, and these factors increase their psychological resilience levels (Çam and Büyükbayram, 2017). A study that sampled doctors examined strategies for resilience that doctors use in coping with stress. They concluded that they are trying to solve the problems of facing difficult working environments, long shifts, lack of resources and heavy workload with the strategies they developed through their psychological resilience (O'Dowd et al., 2018). According to another study, individuals working by being exposed to organizational stress create an individual workforce resilience with the formation of a multi-dimensional structure. The resulting workforce resilience turns into a strategy they use to prevent risks from workplace stress, especially anxiety, depression, stress and burnout (Rees et al., 2015). A study with sampled rescue workers also revealed negative relationships between the psychological stress and psychological resilience of rescue workers (Yasien and Nasir, 2016).

Method

This section of the study includes explanations about the universe and sample of the research, data collection tools, scales, models and hypotheses of the research.

Universe and Sampling

The universe of the research consists of employees with blue collar and white collar status throughout Turkey. Our sample number, 402, has a reliability level of 0.05, and 0.05 is the level to represent the universe for sampling error (Yazıcıoğlu and Erdoğan, 2004: 50).

Data Collection Tool

The questionnaire form used as a data collection tool within the scope of the research consists of 3 parts. In the first part of the questionnaire, participants were asked to answer the questions of gender, marital status, education, age and working status, in this way the characteristics of the participants were tried to be learned.

In the second part of the questionnaire form, DASS (Depression Anxiety Stress Scale) developed by Lovibond and Lovibond in 1995 and adapted to Turkish by Akın and Çetin (2007) was used. The original scale consists of 42 items and 3 subdimensions (14 depression, 14 anxiety and 14 stress) yet the Turkish adaptation (Akın and Çetin, 2007) consists of 3 subdimensions in accordance with the original scale. However, in the adaptation study of Akın and Çetin (2007), two items of stress dimension (12 and 29) were not included in the scoring due to low factor load. Akın and Çetin (2007) found the Cronbach Alpha coefficient of DASS as 0.89 for the entire scale,

0.90 for the depression dimension, 0.92 for the anxiety dimension and 0.92 for the stress dimension.

In the last part of the questionnaire, PCQ-24 (Psychological Capital Questionnaire) developed by Luthans, Avolio, Avey and Norman (2007b) and adapted to Turkish by Erkuş and Fındıklı (2013) was used. The original scale consists of 24 items and 4 sub-dimensions. The Turkish adaptation (Erkuş and Fındıklı, 2013) consists of 4 sub-dimensions in accordance with the original scale. However, in the adaptation study of Erkuş and Fındıklı (2013), one item from the resilience dimension (13th item) and 2 items (20th and 23rd items) in the optimism dimension were excluded from the scale. An item (18th item) from the dimension of resilience was excluded from the scale as a result of confirmatory factor analysis. Erkuş and Fındıklı (2013) found the Cronbach Alpha coefficient as 0.89 for the entire scale, 0.90 for the self-efficacy dimension, 0.79 for the hope dimension, 0.72 for the resilience dimension and 0.68 for the optimism dimension.

Before starting the analysis of the data in the study, Cronbach's alpha values were examined to measure the reliability of the Depression Anxiety Stress Scale (DASS) and the Psychological Capital Questionnaire ScalePCQ). Cronbach's alpha coefficients of the scales are given in Table 1.

Table 1. Cronbach Alpha coefficients of the scales

Scales	Cronbach's alpha Coefficients
DASS	0.969
Depression	0.943

Anxiety	0,913
Stress	0.930
Psychological Capital	0.946

Both scales used in the study were evaluated as having a high level of reliability (Kayış, 2010: 405).

Data Collection and Analysis

For the research, permission was obtained from the Ondokuz Mayıs University Social and Humanities Ethics Committee, dated 17.04.2020 and Decision No. 220. The research data were obtained on the internet between 20 April 2020 and 21 May 2020 via the survey method. The collected data were analyzed with SPSS 22.0 program using descriptive statistical methods.

Normality analyses were performed to determine the analysis method (parametric-nonparametric) to be used in the first part of the study. Since the skewness value (-0,969) and kurtosis value (0,843) of the psychological capital scale and the skewness value (0,599) and kurtosis value (-0,177) of DASS were between -1 and +1, the data was assumed to be normally distributed (Ak, 2010: 73). For this reason, parametric tests were used in the analysis of the data.

In the second part of the study, average scores were obtained according to the participants' responses to Depression Anxiety Stress Scale and Psychological Capital Scale. The depression, anxiety, stress symptoms and psychological capital averages of the participants were calculated. Then, whether the determined scores differed according to various variables (age,

gender, marital status, education level, income level, working status) were analyzed with the t-test and ANOVA tests.

In the third part of the study, the relationship between the participants' positive psychological capital levels and depression, stress and anxiety symptom levels were interpreted with regression analysis.

Research Model and Hypotheses

In this study, two different variables, psychological capital and DASS (depression-anxiety-stress) were used in the relational screening model. The effect of positive psychological capital, which is accepted as an independent variable, on depression, anxiety and stress symptoms was examined. The research model is shown in

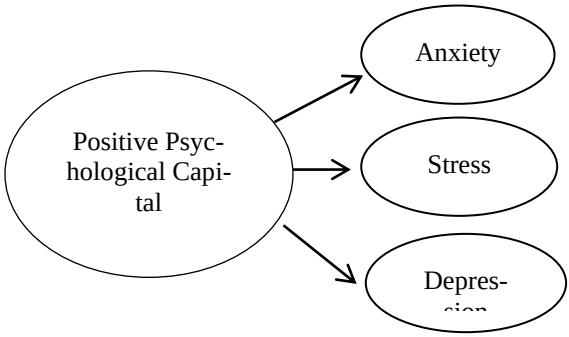

Figure 1. Research Model

H1. Positive psychological capital level of employees negatively affects depression symptom level.

H2. Positive psychological capital level of employees negatively affects the level of anxiety symptoms.

H3. The positive psychological capital level of the employees negatively affects the stress symptom level.

Results

Regression Analysis

Simple linear regression analysis was carried out to determine how much positive psychological capital of participants affected depression, anxiety and stress symptom levels.

Simple linear regression analysis was carried out to determine how much positive psychological capital of the participants affected the symptoms of depression. Regression analysis results are given in Table 2.

Table 2. Psychological Capital and Depression Regression Analysis Results

Model	Non-Standardized Coefficient		Standardized Coefficient	T	Sig.
	B	Std. Error	Beta		
Constant	4,014	0,256		15,671	0,000
Psychological Capital	-0,460	0,064	-0,339	-7,207	0,000
Dependent Variable: Depression					
F Value:51,942 p:0,000					
R= 0,339 R^2= 0,115 AdjustedR^2= 0,113					

Simple linear regression analysis results are statistically significant [F (1)=51,942, p=0,000<05].The corrected R^2 value is 0.113. According to this value, it is seen that the 11% variance at the depression symptom level depends on the positive psychological capital level. Regression equation for simple linear relationship between variables; depression = 4.014 -0.460. In other words, it is interpreted as "1 unit increase in the level of posi-

tive psychological capital decreases depression symptom level by 0.460 units".

Result: "H1.Positive psychological capital level of employees negatively affects depression symptom level" hypothesis was accepted.

Simple linear regression analysis was carried out to determine how much positive psychological capitals of the participants affected anxiety symptoms. Regression analysis results are given in Table 3.

Table 3. Psychological Capital and Anxiety Regression Analysis Results

Model	Non-Standardized Coefficient		Standardized Coefficient	T	Sig.
	B	Std. Error	Beta		
Constant	3,256	0,228		14,262	0,000
Psychological Capital	-0,300	0,057	-0,255	-5,284	0,000
Dependent Variable: Anxiety					
F Value:27,918 p:0,000					
R= 0,255 R^2= 0,065 Adjusted R^2= 0,063					

Simple linear regression analysis results are statistically significant [F (1)=27,918, p=0,000<05]. The corrected R^2 value is 0.063. According to this value, it is seen that the 06% variance at theanxiety symptom level depends on the positive psychological capital level. Regression equation for simple linear relationship between variables; anxiety = 3,256 -0,300. In other words, it is interpreted as "1 unit increase in the level of positive psychological capital decreases the anxiety symptom level by 0,300 units".

Result: "H2. Positive psychological capital level of employees negatively affects the level of anxiety symptoms." hypothesis was accepted.

Simple linear regression analysis was carried out to determine how much the positive psychological capital of the participants affected the stress symptom levels. Regression analysis results are given in Table 4.

Table 4. Psychological Capital and Stress Regression Analysis Results

Model	Non-Standardized Coefficient		Standardized Coefficient	T	Sig.
	B	Std. Error	Beta		
Constant	4,206	0,263		15,982	0,000
Psychological Capital	-0,348	0,066	-0,257	-5,314	0,000
Dependent Variable: Stress					
F Value: 28,235 p: 0,000					
R= 0,257 R^2= 0,066 Adjusted R^2= 0,064					

Simple linear regression analysis results are statistically significant [F (1)=28,235, p=,000<05]. The corrected R^2 value is 0.064. According to this value, it is seen the 06% variance at the stress symptom level depends on the positive psychological capital level. Regression equation for simple linear relationship between variables; stress = 4.206 -0.348. In other words, it is interpreted as "1 unit increase in positive psychological capital decreases the stress symptom level by 0.348 units".

Result "H3. The positive psychological capital level of the employees negatively affects the stress symptom level" hypothesis was accepted.

Discussion

The Coronavirus outbreak, which originated in China in December 2019 and spread throughout the world, has changed many routines, especially in social and economic life. Organizations are affected by all changes due to their dynamic nature. In particular, due to outbreaks with destructive effects, different methods had to be applied in the work-life in a way not seen before. Predicting the changes caused by outbreaks and establishing a strategy is a very difficult process due to its prevalence. The same difficult processes apply to the individual who is fighting with the outbreaks and who is forced to carry out an activity within the organizational life.

In the study, the first hypothesis was that the positive psychological capital levels of the participants reduced the effects of depression. As a result of the analysis, 1 unit positive psychological capital level increase decreases depression symptoms in the outbreak period by 0.460 units (R^2: 0,113). The second hypothesis was that an increase in a positive psychological capital level reduced anxiety symptoms. As a result of the analysis, a negative relationship was found between positive psychological capital and anxiety. It was revealed that 1 unit increase in a positive psychological capital level reduced anxiety symptoms in the outbreak by 0,300 units (R^2: 0,063). The third hypothesis, which was established in the second stage, was that the positive psychological capital level increase of the participants decreased the stress levels of the employees. Here, a significant negative relationship was found between the positive psychological capital levels of the employees and their stress

(R^2: 0,064). As a result of the analysis, it was revealed that 1 unit increase in the positive psychological capital levels of the employees decreased their stress levels by 0.348 units in the outbreak environment. Thus, all hypotheses established at the beginning of the research have been accepted.

When we look at the history of world outbreaks, no literature is available to compare the study. The development years of positive psychology science (1998) occurred after the date of the most recent world outbreak. Before and after the Second World War, it was the breaking point of the science of psychology. Before World War II, there was a process focused on the treatment of mental illnesses, efforts to maintain normal physiological life and the treatment of psychological disorders of soldiers returning from the war. Therefore, whether the person was happy or not was not a controversial problem besides his/her physiological life (Hefferon and Boniwell, 2014). Looking at the history of the world outbreak, the non-examination of human psychology can also be evaluated in this context. In the words of the authors who described the years of the greatest world outbreaks:

> The disease was so severe that no one knew what would happen, and respect for everything divine and venerable was lost. All of the old customs related to the graves turned upside down. The dead were buried just as they could. Many of them were laid in inappropriate graves, and since so many people were lost, the necessary items were not provided. Some of them would place their dead on the piles of wood prepared by others, acting faster than their owners, and fire the woods, throw others into a fired pile, next to the other

> corpses and escape. (Özdemir, 2005: 4; Thukydides, Peloponnesos Savaşı, 1976: 118)
>
> The examples described in 1914-1918
>
> Even though there is constant fighting in too many cold and hot places that cannot be tolerated, none of the very necessary needs, whether in the simplest and primitive way, are provided. Little and very bad food, starved many times...To sum up, it is too much of misery that one cannot imagine. (Özdemir, 2015: 344)

Also provide an estimate for the experienced psychology. From this point of view, the study should be evaluated within the psychology experienced in the history of World outbreaks. The entry of positive psychology into the literature was carried out by Martin Seligman (Luthans et al. 2007a: 9) after 1998, which was a recent history after World War II.

The research was conducted to determine the relationship between the psychological conditions of the employees and the stress, anxiety and depression experienced in an outbreak. With the scale conducted especially in the first two months of the outbreak, the real psychological conditions of the employees were tried to be found out. When the study is evaluated in terms of quantitative analysis results, it contains archival information both for researchers and for all individuals who would like to examine the history of the outbreak and the status of employees.

Kaynakça

Acar, Yusuf. "Yeni Koronavirüs (Covid-19) Salgını ve Turizm Faaliyetlerine Etkisi". Güncel Turizm Araştırmaları Dergisi. 4/I (2020): 7-21.

Ak, Belma. Hipotez Testi. Ş. Kalaycı (Ed.). Spss Uygulamalı Çok Değişkenli İstatistik Teknikleri. 5. Baskı. Ankara: Asil Yayın Dağıtım Ltd. Şti, 2010.

Akın, Ahmet ve Bayram Çetin. "Depresyon, Anksiyete Stres Ölçeği (DASÖ): Geçerlik ve Güvenirlik Çalışması". Kuram ve Uygulamada Eğitim Bilimleri Dergisi. 7/I (2007): 241-268.

Avey, James B., Jaime L. Patera and Bradley J. West. "The Implications of Positive Psychological Capital on Employee Absenteeism". Journal of Leadership & Organizational Studies, 13/II (2006): 42-60.

Aydın, Şule. "Örgütsel Stres Yönetimi". Dokuz Eylül Üniversitesi, Sosyal Bilimler Dergisi. 6/III (2004): 49-74.

Ayittey, Foster K., Matthew Kormla Ayittey, Nyasha Benitta Chiwero, Japhet Senyo Kamasah and Christian Dzuvor. "Economic İmpacts of Wuhan 2019-nCoV on China and The World". Journal of Medical Virology. 2002.

Bakar, Nashirah A. and Sofian Rosbi. "Effect of Coronavirus disease (COVID-19) to Tourism Industry". International Journal of Advanced Engineering Research and Science, 7/IV (2020).

Bogoch, Isaac I., Alexander Watts, Andrea Thomas-Bachli, Carmen Huber, Moritz UG. Kraeme and Kamran Khan. "Potential for Global Spread of a Novel Coronavirus from China". Journal of travel medicine, 27/II (2020).

Cao, Wenjun, Ziwei Fang, Guoqiang Hou, Mei Han, Xinrong Xu, Jiaxin Dong and Jianzhong Zheng. "The Psychological Impact of the COVID-19 Epidemic on College Students in China", Psychiatry Research. 2020.

Chinazzi, Matteo, Jessica T. Davis, Marco Ajelli, Corrado Gioannini, Maria Litvonia, Stefano Merler and Cécile Viboud. "The Effect of Travel Restrictions on the Spread of the 2019 Novel Coronavirus (COVID-19) Outbreak", Science, 368. (2020): 395-400.

Çam, Olcay ve Ayşe Büyükbayram. "Hemşirelerde Psikolojik Dayanıklılık ve Etkileyen Faktörler", Psikiyatri Hemşireliği Dergisi, 8/II (2017): 118–126.

Dalton, Louise, Elizabeth Rapa and Alan Stein. "Protecting the Psychological Health of Children Through Effective Communication About COVID-19". The Lancet Child & Adolescent Health. 4/V (2020): 346-347.

Dinarto, Dedi, Adri Wanto and Leonard C. Sebastian. "Global Health Security–COVID-19: Impact on Bintan's Tourism Sector", RSIS Commentaries, 033-20. 2020.

Dong, Ensheng, Hongru Du and Lauren Gardne. "An Interactive Web-Based Dashboard to Track COVID-19 in Real Time", The Lancet Infectious Diseases. 2020.

Duan, Li and Gang Zhu. "Psychological Interventions for People Affected by the COVID-19 Epidemic". The Lancet Psychiatry. 7/IV (2020): 300-302.

Erdoğan, Pınar ve Rifat İraz. Örgütsel Vatandaşlık, Örgütsel Sinizm ve Tükenmişliğe Pozitif Psikolojik Sermaye Etkisi. Konya: Eğitim Yayınevi, 2019.

Ergünay, Oktay. "Doğal Afetler ve Sürdürülebilir Kalkınma, Deprem Sempozyumu, Abant İzzet Baysal Üniversitesi, Bolu, 11-12 Kasım 2009.

Erkal, Tevfik ve Mehmet Değerliyurt. 2009. "Türkiye'de Afet Yönetimi", Doğu Coğrafya Dergisi, 14/XXII (2009): 147-164.

Erkuş, Ahmet ve Mine Afacan Fındıklı. "Psikolojik Sermayenin İş Tatmini, İş Performansı ve İşten Ayrılma Niyeti Üzerindeki Etkisine Yönelik Bir Araştırma", Istanbul University Journal of the School of Business Administration, 42/II (2013).

Figley, Charles R. Compassion Fatigue: Coping With Secondary Traumatic Stres Disorder. New York: Brunner/Mazel, 1995.

Gan, Wee Hoe, John Wah Lim and David Koh. "Preventing İntra-Hospital İnfection and Transmission of Covıd-19 in Healthcare Workers", Safety And Health At Work. 2020.

Gentilini, Ugo, Mohamed Almenfi, Ian Orton and Pamela Dale. "Social protection and Jobs Responses to COVID-19: A Real-Time Review of Country Measures". Live Document. World Bank, Washington, DC, 19/II (2020).

Gökçe, Gözde ve Banu Yılmaz. "Afetlerde Yardım Çalışanları: İkincil Travmatik Stres ve Başa Çıkma". Türkiye Klinikleri J. Psychol-Special Topics. 2/III (2017): 198-204.

Gössling, Stefan, Daniel Scott and C. Michael Hall. "Pandemics, Tourism and Global Change: a Rapid Assessment of COVID-19". Journal of Sustainable Tourism. (2020): 1-20.

Çobanoğlu, Güler ve Zakir Çobanoğlu. Afetler. Çevre Sağlığı Temel Kaynak Dizisi. No: 33, 1994.

Gümüştekin, Gülten Eren ve Fikret Gültekin. "Stres Kaynaklarının Kariyer Yönetimine Etkileri". Dumlupınar Üniversitesi Sosyal Bilimler Enstitüsü Dergisi. Sayı 23 (2009): 147-158.

Gürkan, Ayça ve Nihan Yalçıner. "Sağlık Çalışanlarında İkincil Travmatik Stres". Gümüşhane Üniversitesi Sağlık Bilimleri Dergisi. 6/II (2017): 90-95.

Haleem, Abid, Mohd Javaid and Raju Vaishya. "Effects of COVID 19 Pandemic in Daily Life". Current Medicine Research and Practice. 2020.

Hefferon, Kate and Ilona Boniwell. Pozitif Psikoloji. Tayfun Doğan (Çev.), Ankara: Nobel, 2011.

Ho, Cyrus Sh, Cornelia Yi Chee and Roger Cm Ho. "Mental Health Strategies to Combat the Psychological Impact of COVID-19 Beyond Paranoia and Panic". Ann Acad Med Singapore. 49/I (2020): 1-3.

Hoque Ashikul, Farzana Afrin Shikha, Mohammad Waliul Hasanat, Ishtiaque Arif and Abu Bakar Abdul Hamid. "The Effect of Coronavirus (COVID-19) in The Tourism Industry in China". Asian Journal of Multidisciplinary Studies. 3/I (2020): 52-58.

Iacus, Stefano Maria, Fabrizio Natale and Michele Vespe. "Flight Restrictions from China During the COVID-2019 Coronavirus Outbreak", Cornell University, Special Issue. (2020):1-9.

Jackson, Rachel and Chris Watkin. "The Resilience Inventory: Seven Essential Skills for Overcoming Life's Obstacles

and Determining Happiness". Selection and Development Review. 20/VI (2004): 13-17.

Kadıoğlu, Mikdat. Modern, Bütünleşik Afet Yönetiminin Temel İlkeleri. M. Kadıoğlu & E. Özdamar (Eds.). Afet Zararlarını Azaltmanın Temel İlkeleri. s. 251-276, Ankara: Japonya Uluslararası İşbirliği Ajansı (JIKA) Ofisi, Türkiye Yayınları, No: 2, 2008.

Kayış, Aliye.. Güvenirlilik analizi. Ş. Kalaycı (Ed.), SPSS Uygulamalı Çok Değişkenli İstatistik Teknikleri. 5. Baskı, Ankara: Asil Yayın Dağıtım Ltd. Şti., 2010.

Koh, David. "Occupational Risks for COVID-19 Infection". Occupational Medicine (Oxford, England). 70/I (2020): 3.

Koronavirüs Bilgilendirme Raporu. 2020. İstanbul Üniversitesi Cerrahpaşa Tıp Fakültesi, https://cdn.istanbul.edu. (E. T.: 17.04.2020)

Li, Sijia, Yilin Wang, Jia Xue, Nan Zhao and Tingshao Zhu. "The Impact of COVID-19 Epidemic Declaration on Psychological Consequences: A Study on Active Weibo users". International Journal ofEenvironmental Research and PublicHhealth, 17/VI (2020): 2032.

Lovibond, Peter F. and S. H. Lovibond. "The Structure of Negative Emotional States: Comparison of The Depression Anxiety Stress Scales (DASS) With the Beck Depression and Anxiety Inventories". Behaviour Research and Therapy. 33 (1995): 335-343.

Luthans, Fred, Bruce J. Avolio, James B. Avey and Steven M. Norman. "Positive psycholoical capital: Measurement and Relationship with Performance and Satisfaction". Personnel Psychology. 60 (2007b): 541-572.

Luthans, Fred, Caroline M. Youssef and James B. Avolio. "Psychological Capital: Investing and Developing Positive Organizational Behavior". Positive Organizational Behavior, Debra, Nelson, Cary L., Cooper, (Ed.), Sage Publication. 2007a.

Luthans, Fred and Caroline M. Youssef. "Emerging Positive Organizational Behavior". Journal of Management. 33 (2007): 321-349.

Luthans, Fred, James B. Avey, Bruce J.Avolio, Steven M. Norman, and Gwendolyn Combs. Psychological Capital Development: Toward a Micro-Intervention". Journal of Organizational Behaviour. 27/III (2006): 387–393.

Luthans, Fred, Kyle W. Luthans and Brett C. Luthans. "Positive Psychological Capital: Beyond Human and Social Capital", Business Horizons. January- February, 47(1) (2004): 45-50.

Luthans, Fred. "The Need for and Meaning of Positive Organizational Behavior". Journal of Organizational Behavior. 23VI (2002): 695-706.

Masten, Ann S. "Resilience Processes in Development". American Psychological Association. 56/III (2001): 227-238.

Mcneil, William H. Dünya Tarihi. A. Şenel, (Translator). Ankara: İmge, 2007

Mehta, Puja, Daniel F. McAuley, Michael Brown, Emilie Sanchez, Rachel S. Tattersall and Jessica J. Manson. "COVID-19: Consider Cytokine Storm Syndromes and Immunosuppression". The Lancet. 395(10229) (2020): 1033-1034.

Mitchell Jeffrey T. and Atle Dyregrov. Traumatic Stress in Disaster Workers and Emergency Personnel. In: J. P., Wilson

& Raphael, B. (eds), International Handbook of Traumatic Stress Syndromes. The Plenum Series on Stress and Coping. Springer, Boston, MA. 1993.

Nelson, Benjamin, W., Adam Pettitt, Jessica E. Flannery, Nicholas B. Allen, "Rapid Assessment of Psychological and Epidemiological Predictors of COVID-19". International Journal of Methods in Psychiatric Research. 21/III (2020): 169-184.

Nicola, Maria, Zaid Alsafi, Catrin Sohrabi, Ahmed Kerwan, Ahmed Al-Jabir, Christos Iosifidis and Riaz Agha. "The Socio-Economic Implications of the Coronavirus and COVID-19 Pandemic: A Review". International Journal of Surgery. 2020.

O'Dowd, Emily, Paul O'Connor, Sinéad Lydon, Orla Mongan and Dara Bryne. "Stress, Coping and Psychological Resilience Among Physicians", BMC Health Services Research, 18 (2018): 730.

Özdemir, Hikmet. Salgın Hastalıklardan Ölümler. Türk Tarih Kurumu Yayınları, 16. Dizi, Sayı: 104, 2005.

Pak, Merve Deniz, Emre Özcan ve Arzu İçağasıoğlu Çoban. "Acil Servis Çalışanlarının İkincil Travmatik Stres Düzeyi ve Psikolojik Dayanıklılığı". Uluslararası Sosyal Araştırmalar Dergisi. 10(52), 2017, Issn: 1307-9581.

Parks, Vanessa. "The Critical Role of Social Capital During the Covıd-19 Pandemic: Lessons from Disaster Research". Population Briefs. (2020):2.

Qiu, Jianyin, Bin Shen, Min Zhao, Zhen Wang, Bin Xie and Yifeng Xu. "A Nationwide Survey of Psychological Distress Among Chinese People in the COVID-19 Epidemic: Implicati-

ons and Policy Recommendations". General Psychiatry. 33/II (2020).

Rees, Clare S., Lauren J. Breen, Lynette Cusack and Desney Hegney. "Under Standing Individual Resilience in the Workplace: The International Collaboration of Work Force Resilience Model". Frontiers in Psychology. 6 (2015): 73.

Rothan, Hussin. A. and Siddappa N. Byrareddy. "The Epidemiology and Pathogenesis of Coronavirus Disease (COVID-19) Outbreak". Journal of Autoimmunity. 102433, 2020.

Sahmoud, Tarek. "Estimation of COVID-19 Burden in Egypt". The Lancet. Infectious Diseases. 2020.

Stojkoski, Viktor, Zoran Utkovski, Petar Jolakoski, Dragan Tevdovski and Ljupco Kocarev. "The Socio-Economic Determinants of the Coronavirus Disease (COVID-19) Pandemic". Cornell University, Special Issue. 2020.

Şahin, Mehmet ve Aykut Bedük. "Çalışanlarda İş Stresi ve Tükenmişlik İlişkisi: Bankacılık Örneği". International Social Sciences Studies Journal, 5/31 (2019): 1448-1458.

Şimşek, Mehmet Şerif, Adnan Çelik ve Tahir Akgemci. Davranış Bilimleri. Konya: Eğitim Yayınevi, 2019.

T.C İçişleri Bakanlığı, Koronavirüs Konulu Ek Genelge. Resmi Gazete. Cumhurbaşkanlığı Genelgeleri. 2020, 4.

T.C.Sağlık Bakanlığı, Halk Sağlığı Genel Müdürlüğü, Covid-19 (Sars-CoV2 Enfeksiyonu) Rehberi, https://covid19bilgi.saglik.gov.tr/depo/rehberler/ COVID-19_Rehberi.pdf, E.T: 22. 04. 2020.

Tandon, Prakash N. "COVID-19: Impact on Health of People & Wealth of Nations". Indian Journal of Medical Research. 151/II (2020): 121-123

Tel, Havva, Mevlüde Karadağ, Hatice Tel ve Şule Aydın, "Sağlık Çalışanlarının Çalışma Ortamındaki Stres Yaşantıları ile Başetme Durumlarının Belirlenmesi". Hemşirelikte Araştırma Geliştirme Dergisi. 2 (2003): 14-23.

Thukydides, Peloponnesos Savaşı. (Çev. Tanju Gökçöl), (İstanbul, Hürriyet Y., 1976), s. 118.

Tuite, Ashleigh R., Isaac I. Bogoch, Ryan Sherbo, Alexander Watts, David Fisman and Kamran Khan. "Estimation of Coronavirus Disease 2019 (COVID-19) Burden and Potential for International Dissemination of Infection from Iran". Annals of Internal Medicine. 2020b.

Tuite, Ashleigh R., Vicroria Ng, Erin Rees, David Fisman, Annelies Wilder-Smith, Kamran Khan and Isaac I. Bogoch. "Estimation of the COVID-19 Burden in Egypt Through Exported Case Detection". The Lancet Infectious Diseases. 2020c

Tuite, Ashleigh R., Victoria Ng, Erin Rees and David Fisman. "Estimation of COVID-19 Outbreak Size in Italy". The Lancet Infectious Diseases. 2020a

Urgan, Suzan ve Şerafettin Sevim. Uluslararası Sağlık Kuruluşlarında Sosyal Sermaye ve Pozitif Psikoloji Etkileşiminde Kültürel Zekâ. Konya: Eğitim Yayınevi, 2019

Ülgen, Hayri ve S. Kadri Mirze. İşletmelerde Stratejik Yönetim. İstanbul: Beta Yayınevi, 2010.

Wang, Cuiyan, Riyu Pan, Xiaoyang Wan, Yilin Tan, Linkang Xu, Cyrus S. Ho and Rocer C. Ho. "Immediate Psycho-

logical Responses and Associated Factors During the Initial Stage of The 2019 Coronavirus Disease (COVID-19) Epidemic Among The General Population in China". International Journal of Environmental Research and Public Health. 17/V(2020): 1729.

WHO, Coronavirusdisease 2019 (COVID-19) Situation Report- 48. 2020, https://www.who.int/docs/default-source/coronaviruse/situation-reports/20200308-sitrep-48-covid-19.pdf?sfvrsn=16f7ccef_4, (E. T.: 17.04.2020).

Wilson, Nick, Amanda Kvalsvig, Lucy Telfar Barnard and Michael G. Baker. "Estimating the Case Fatality Risk of COVID-19 Using Cases from Outside China". Emerg Infect Dis. 26/VI (2020): 1339-1441.

Yanbolluoğlu, Özge. "İkincil Travmatik Stresin Meslek Elemanları Üzerindeki Etkileri: Bir Derleme Çalışması". Uludağ Üniversitesi Fen-Edebiyat Fakültesi Sosyal Bilimler Dergisi. 20/36 (2019): 141-164.

Yasien, Saba and Jamal Abdul Nasir. "Relationship Between Psychological Distress and Resilience in Rescue Workers". Saudi Med. Journal. 37/VII (2016).

Yazıcıoğlu, Yahşi ve Samiye Erdoğan. Spss Uygulamalı Bilimsel Araştırma Yöntemleri. (4. Baskı). Ankara: Detay Yayınları, 2014.

Yılmaz, Banu. "Yardım Çalışanlarında Travmatik Stres". Klinik Psikiyatri. 10 (2007): 137-147.

Yüksel, Hasan. "Çalışma Yaşamı ve Stres Kavramı: Durumsal Bir Yaklaşım". Manas Sosyal Araştırmalar Dergisi. 3/III (2014), ISSN: 1624-7215

Zambrano-Monserrate, Manuel A., Maria Alejandra Ruano and Luis Sanchez Sanchez-Alcalde. Indirect Effects of COVID-19 On the Environment". Science of The Total Environment. 2020.

Zhang, Dayong, Min Hu and Qiang Ji. "Financial Markets Under the Global Pandemic of COVID-19", Finance Research Letters. 2020.

Zhang, Jie, Huipeng Lu, Haiping Zeng, Shining Zhang, Qifeng Du, Tingyun Jiang, and Baoguo Du. "The Differential Psychological Distress of Populations Affected by the COVID-19 Pandemic", Brain, Behavior, and Immunity. 2020.

Zheng, Yi, Edmund Goh and Jun Wen.. "The Effects of Misleading Media Reports About COVID-19 on Chinese Tourists' Mental Health: A Perspective Article". Anatolia. (2020): 1-4.