



A qualitative investigation of the occupational stress in the hospitality and tourism industry in Bahrain during COVID-19

Asma AYARI

ORCID: 0000-0002-2134-0624

University of Bahrain, Sakheer, Kingdom of Bahrain

Abstract. *Purpose.* Workplace stress is a big challenge for employees and organizations. This research explores employees' stressors working in Bahrain's hospitality and tourism industry during the COVID-19 pandemic. *Study design.* First, a questionnaire was distributed to 172 employees, which helped to assess employees' stress levels. Then 18 semi-directive interviews were conducted, and the data were analysed using qualitative content analysis. Following the usual content analysis method, an analysis grid was made by switching back and forth between the corpus and the definition of categories. *Findings.* The study's results highlighted new occupational stressors: "the pandemic stressors" and their effects on Bahraini tourism and hospitality professionals. The COVID-19 pandemic stressors are more specific to the context of the health crisis, such as the intolerance of uncertainty, isolation and social distancing, the risk of contamination, and job security. *Value of the results.* The results of this paper revealed different stressors related to the job and stressors specific to the pandemic. The findings will help managers implement preventive measures to reduce the spread of infection, protect workers, and improve employees' well-being in the context of the pandemic. The results can also help set up procedures to manage crises in the future.

Keywords: stress, mental health, COVID-19 pandemic, hospitality and tourism industry.

Introduction

The COVID-19 pandemic spread to every continent at the end of 2019. However, COVID-19 is more than a health threat. It has caused social, economic, political, and workplace challenges (Manzoor et al., 2020; Naumann et al., 2020). The scenario was unprecedented, and people, in general, were unprepared for this unpredictable and unusual disease (Gössling et al., 2020), which impacted their mental health, well-being, and capacity to cope with the pandemic (Asmundson, Taylor, 2020; Bao et al., 2020; Feroz et al., 2020; Rajkumar, 2020).

Organizations were confronted with a situation of misinformation and an uncertain environment they could not control (Durodié, 2020). While public health measures such as social distance are required to halt the spread of COVID-19, workers exacerbate feelings of isolation, loneliness, and stress (Badrfam et al., 2020; Roy et al., 2020; Yu et al., 2021; Zacher, Rudolph, 2021). Employees wondered mostly about their income and jobs (Wang et al., 2020). The threat of job loss and lower benefits affect

an individual's well-being, along with expected high levels of anxiety and panic (Asmundson, Taylor, 2020; Shigemura et al., 2020; Feroz et al., 2020). Employees who did not lose their jobs were asked to work from home or on-site. Working from home exposes workers to distinct psychological hazards such as isolation, blurring work-family boundaries, and a potential risk of domestic abuse (Duan & Zhu, 2020). On-site workers also encounter high levels of stress and anxiety due to direct contact with customers, colleagues, and supervisors (Li et al., 2020; Wang et al., 2020; Xiao et al., 2020). They fear contamination and worry about getting sick at work and infecting family and friends if necessary, precautions are not taken (Rajkumar, 2020).

Under these circumstances, stress has become a critical managerial concern since an organization's success depends entirely on employee productivity, performance, and well-being (Manzoor et al., 2011; Murali et al., 2017). Employees in hospitality and tourism were not reserved (Su, 2022). While the hospitality business slowly recovers, the COVID-19 pandemic significantly impacts employees' stress levels and well-being (Gössling et al., 2020; Sigala, 2020; Yu et al., 2021). Employee stress is costly and can lead to low productivity and impact service delivery. (Kim et al., 2015; Ruyter et al., 2001). Less stressed employees produce better customer service (Kim, 2008), and those who report chronic stress perform poorly (O'Neill, Davis, 2011). Work-related stress has also been linked to decreased job performance (Ratnawat, Jha, 2014; Kim et al., 2015; Karatepe et al., 2018), decreased ability to learn (Murali et al., 2017), increased depressive symptoms, hostility (Kim et al., 2007), and withdrawal (Kim, 2008; Choi, Dickson, 2009).

Workplace stress in hospitality and tourism industry

Stress is a serious issue affecting many businesses and people. Hans Selye (1976) was the first who defined stress as "a nonspecific response of the body to any demand" (Tan, Yip, 2018, p 170). He explained that positive stress (eustress) keeps people alive, allowing employees to reach maximum motivation and guiding them towards positive achievements and success (Lazarus, 1991). The eustress could help employees be more in tune with their environment, making better decisions, and being more productive (Sengupta, 2007; Ayari, 2019). However, in a context of uncertainty and crisis such as a pandemic, a situation can become a source of negative stress (distress). Distress can decrease performance, negatively affect productivity and organizational commitment (Shah et al., 2012; Ratnawat, Jha, 2014; Rasool et al., 2021). Prolonged periods of distress can lead to depression and burnout (Siegrist, 2010; Shah et al., 2012; Wang et al., 2020). So, stress becomes one of the most severe concerns facing managers in the hospitality sector (Yu et al., 2021). Many researchers (Kim, 2008; Karatepe, Uludag, 2008; O'Neill & Davis, 2011; Hon et al., 2013; Kim et al., 2015; Bhushan, 2018; Karatepe et al., 2018) identified different sources of stress specific to hospitality and tourism sector in general. The primary sources are related to role conflict and ambiguity (Kim, 2008; Karatepe et al., 2018), overload of work (O'Neill, Davis, 2011; Kim et al., 2015; Bhushan, 2018), interpersonal relations with supervisors, colleagues, and customers (O'Neill, Davis, 2011; Hon et al., 2013), wages (Karatepe et al., 2018), and environmental characteristics (Kim et al., 2015; Karatepe et al., 2018). Employee stress in the hospitality business is costly because it can lead to fatigue, low productivity (Kim et al., 2015), and impacting service delivery (Ruyter et al., 2001). Less stressed employees produce better customer service (Kim, 2008), and those who report chronic stress perform particularly poorly (O'Neill, Davis, 2011). Work-related stress has also been linked to decreased job performance (Ratnawat, Jha, 2014; Kim et al., 2015; Karatepe et al., 2018), decreased ability to learn (Murali et al., 2017), increased depressive symptoms, hostility (Kim et al., 2007), and withdrawal (Kim, 2008; Choi, Dickson, 2009).

The COVID-19 pandemic harmed people's mental health because of the uncertainty of the event (Zhuo et al., 2021). In general, people are intolerant of uncertainty and do not have the capacity to deal with uncertain and unpredictable situations (Carleton, 2016). Intolerance of Uncertainty (IU) was significantly associated with anxiety, depression, or severe mental health issues in various research (Grupe, Nitschke, 2013; Carleton, 2016; Holmes et al., 2020; Zhuo et al., 2021). The COVID-19 epidemic comes by saddening and affects individuals' physical and mental health (Feroz et al., 2020; Asmundson, Taylor, 2020; Bao et al., 2020). The scenario was unprecedented (Gössling et al. 2020). People, in general, were not prepared for this unpredictable and unusual disease which impacts their well-being, mental health, and capacity to cope with the pandemic (Rajkumar, 2020). They must manage a situation with misinformation and an uncertain environment that they cannot control (Durodié, 2020). Employees working in Bahrain's hospitality and tourism industry were not excepted and were mentally affected by such an unpredictable, and severe disease.

Indeed, the social distancing and the closure impacted all the workers of the tourism sector. Employees were wondering about their income and jobs (Wang et al., 2020). For many workers, the threat of job loss and lower benefits affect an individual's well-being, along with expected high levels of anxiety and panic (Asmundson, Taylor, 2020; Shigemura et al., 2020; Feroz et al., 2020). Employees who do not lose their job were asked to work from home or on-site. Working from home exposes workers to distinct psychological hazards such as isolation (Roy et al., 2020), blurring work-family boundaries, and potential risk of domestic abuse (Duan, Zhu, 2020). On the other hand, frontline employees working on sites also experienced high stress and anxiety during the pandemic (Hashimoto et al., 2020; Wang et al., 2020). Employees in the hospitality sector have a close interaction with customers, colleagues, and supervisors. These interactions could have a high risk of infection (Xiao et al., 2020; Li et al., 2020). If proper precautions are not taken, employees fear the contamination and are worried about getting sick at work and infecting family, and friends (Rajkumar, 2020).

The workload during the pandemic could also be considered an essential stressor for the hospitality and tourism industry (Ruyter et al., 2001). The long working hours increase fatigue and negatively impact the well-being of the employees (Wang et al., 2020). Also, the absence of customers and the low workload impact the employees' stress levels (Dong, Bouey, 2020).

The work conditions, such as shortages of protective equipment (Li et al., 2020; Xiao et al., 2020) and the risk of contamination, significantly impact the employee's well-being working in the hospitality industry (Kang et al., 2020). Reducing stress during the pandemic could improve employees' mental and physical health and organizational performance. Then, it is clear that organizations in the tourism and hospitality sector have to determine strategies to manage and reduce the impact of the pandemic on the mental health of their employees. Organizational coping strategies such as identifying clear objectives, flexible time, institutional and collateral programs aim to help employees cope with the workplace stressors (Bhushan, 2018). Today organizations in the hospitality and tourism industry should consider the impact of the pandemic when developing coping strategies.

The article's primary purpose is to investigate the stressors related to the Bahraini tourism and hospitality industry, which can help managers to develop adequate coping strategies.

Research methodology

The study explores employees' stressors working in Bahrain's hospitality and tourism industries during the COVID-19 pandemic. First, the study assessed the sample's stress level and well-being score, then interviewed participants presenting different stress levels and well-being scores to guarantee the participants' homogeneity.

The study was introduced to the participants, who participated voluntarily and signed an informed consent form. The employee organizations' review boards approved the study protocols. Then, the survey was sent to the participants via email and social media (WhatsApp, Instagram, and Snapchat). Employees' levels of stress and well-being scores were measured using a questionnaire. The questionnaire comprises 12 items: seven questions to measure stress (DASS-21, Lovibond, Lovibond, 1995) and five (WHO-5 Well-Being Index, 1998) to assess employee positive and negative well-being. The response rate for the overall sample was 78%. 172 (111 females and 61 males) questionnaires were collected from employees and managers working in different organizations in the kingdom, such as restaurants, hotels, museums, attraction sites, cinemas, and Bahrain Airport. The average age was 35.20 (SD=10.06), and the average work experience was six years. 79% held a university degree, and 32% had a managerial position. Approximately 66% were expatriates.

Then, semi-directive interview was conducted with 18 participants (seven women, 11 men) who signed up for the study and agreed to participate. The sample size was sufficient to reach data saturation. The guide was created by combining aspects of literature with the research objective (Kvale, 1996; McLeod et al., 2014). The interview guide is structured around three major themes: (1) workplace demands; (2) COVID-19 pandemic challenges; and (3) employees' mental health and well-being during the pandemic. Age, gender, marital status, job title, and employer are the sociodemographic details requested from participants.

All interviews were conducted from June 2021 to February 2022, with MS-Teams at the respondents' convenience. The interviews lasted 20–40 minutes on average, and, with the respondents' permission, they were recorded and later transcribed verbatim. The interviews were conducted in Arabic and English, and all participant quotes were translated into English. Each transcription of the corpus was read numerous times to find themes. The findings will be supplied upon request after the study is concluded.

Qualitative content analysis was employed to analyse the data. Based on our research aims, deductive categories were constructed, whereas inductive categories evolved from the data (Braun, Clarke, 2006; Corbin, Strauss, 2007). Thus, the stressors were identified and grouped by theme content analysis. Following the usual content analysis methodology, an analysis grid was created by alternating between the corpus and the definition of categories (Bardin, 2007; Irmer et al., 2019).

Results

The research starts by assessing the sample's stress level and well-being score, then participants presenting different stress levels and well-being scores will be interviewed to guarantee the sample's homogeneity for the qualitative analysis.

Stress level and well-being score

The obtained stress levels identify employees as highly, moderately, or low-stressed. The well-being score gives information about the respondent's quality of life. A score below 13 indicates an employee with poor well-being, generating, in some cases, burnout and depression (Wiss, 2020). Table 1 demonstrates that most responses have moderate stress, only 42 are experiencing low stress, and the rest (53) have high stress.

Table 1. Respondents stress level and well-being score

Variable	Level / Score		
Stress level	Low 42	Moderate 77	Severe 53
Well-being score	0–13 24		14–25 148

These results coincide with the well-being rating, which shows that most respondents score between 14 and 25, representing an insufficient level of well-being that could generate burnout in the future.

Table 2. Respondents' characteristics

No.	Marital status	Gender	Stress level	W-B Score**	Position	Employer
1	Single	Female	High	22	Waitress	Restaurant-cafe
2	Married	Male	Moderate	16	Sales manager (duty-free)	Bahrain Airport
3	Married	Male	Low	13	Store supervisor	Restaurant
4	Married	Female	Moderate	11	Duty free Salesperson	Bahrain Airport
5	Divorced	Female	Moderate	17	Receptionist	4 stars Hotel
6	Married	Male	High	18	Front desk	4 stars Hotel
7	Single	Male	High	21	Steward	Airlines Company
8	Married	Male	Low	16	Manager	Adhari Park
9	Married	Male	High	18	Receptionist	Cinema
10	Married	Male	Low	13	Tunnel instructor	Gravity
11	Married	Male	High	20	Owner	Restaurant
12	Married	Female	High	17	Flight attendant	Airlines Company
13	Divorced	Female	High	20	Leisure activity co-ordinator	Hotel 5*
14	Married	Male	Moderate	18	Guide	Museum
15	Single	Female	Moderate	15	Event organizer	Bahrain exhibition
16	Divorced	Male	High	22	Manager	Restaurant
17	Married	Male	Moderate	11	Waiter/cashier	Restaurant
18	Single	Female	Moderate	18	Flight attendant/ air hostess	Airlines Company

Note: * — A well-being score below 13 indicates an employee with poor well-being, generating, in some cases, burnout and depression; ** — A well-being score between 14 and 25 represents an insufficient level of well-being.

Qualitative analysis: workplace stressors during the pandemic

The data collected was analysed using qualitative content analysis. The participants recounted rich and complex lived experiences during the COVID-19 pandemic. The respondents' names and identities will be changed to numbers for privacy reasons before reporting the data. The respondents' well-being scores and stress levels were considered when the interviewer started the interviews. Then, interviews were conducted with the people who fell into the three categories of stress level and well-being score, like "severe," "moderate," and "low," to learn more about the stressors in hospitality and tourism. The profiles of the informants' interviewees are listed in Table 2.

The content analysis of the interviews provided six primary themes. These were: workload, role conflict and ambiguity, intolerance of uncertainty, isolation and social distancing, the risk of contamination, and job security.

Workload

The pandemic created new job demands and increased tasks for employees working in the hospitality and tourism industry. The majority of the interviewees mentioned the new tasks related to registering customers information's and keeping the workplace clean and sanitized: "since the pandemic, we are responsible for sanitizing the restaurant" (waiter/cashier, restaurant); "I need to be sure that sanitizers, wipes, and masques are available for the passengers" (air hostess, airlines company); "every day I take the customer's temperature, collect and recall all the information regarding vaccination, phone numbers, and customers ID" (tunnel instructor, Skydiving, Gravity).

Some interviewees who were obligated to work from home during the quarantine mentioned the overload related to the remote work. The majority declared that technology increases the workload and makes employees feel like they are working 24 hours daily: "I have been working all day"; "I had emails and meeting even during the weekend"; "the work never end, and the workdays were longer

than before". The workload had affected the employees' mental health. The majority declared that techno-load causes fatigue, anxiety, sleep disorder, and high stress: "I was so tired, sitting all day answering to emails and preparing reports"; "I cannot sleep wondering about the number of tasks I still not finish"; "It is too much to handle". The overload of work put more pressure and stress, especially on women working from home. It was a big challenge for them to balance professional and personnel life: "The job and taking care of a nine-month-old son took 24 hours. There are no boundaries between our online meetings and our time with our kids. " (Female, divorced, Leisure activity coordinator at a five stars Hotel).

Most of the interviewees also raised the low workload as a source of stress during the pandemic. Indeed, during the lockdown and even after, restaurants, hotels, and attractions sites were "desertic". Customers avoided going anywhere: "no one comes to the museum for six months even with all the protective types of equipment installed and the low-price ticket"; "the park is empty since two years now ... after the lockdown and even with a low number of daily cases, parents stop bringing their kids to play" (manager, Adhari Park). They declared how bored and stressed they were: "I have nothing to do there"; "It was a stressful situation, turning around all day waiting for a customer".

Role conflict and ambiguity

According to most of the interviewees, "ambiguous and not clear" decisions were made during the pandemic. The role conflict was mentioned by many of the interviewees. They stated that role conflicts had arisen because of the contrasting expectations of customers and the company: "Customers became very demanding about COVID-19 precautions and at the same time are chocked when we inform them that they can not use the swimming pool and the gym". A respondent (flight attendant, airlines company) noted that "Some passengers wondered a lot about the contamination on the airplane but refused to wear the mask". The majority of the interviewees also raised the lack of "direct" and "straightforward" instructions regarding how to deal with customers to limit the risk of contagion: "We accept only fully vaccinated customers, but the manager never check if customers are vaccinated or no" (guide, museum); "I was supposed to respect social distancing, but I found myself in an airplane with 300 passengers for five hours".

The conflict and ambiguous instructions put extra pressure on employees working in the hospitality and tourism sector. A minority of the responders highlighted the stressful new work conditions: "Nothing is usual, everything is blurred, and it is very stressful".

The intolerance of uncertainty (IU)

Most of the interviewees declared that the coronavirus epidemic was "unprecedented"; "came out of nowhere"; "by sudden", and "nobody knows what happened, and what kind of virus is". They mentioned that "people were lost in the unknown" and not prepared for this "atypical situation". They also added how they were worried about these "unusual circumstances", their impact on their loved ones, and how COVID-19 "disrupt" their work and personal lives. Some of the interviewees raised their low capability to handle the unknown: "I am confused, I do not know what to do with this situation"; "I am not sure about tomorrow, the situation can change at any time and, what can we do if the virus has already surprised us and may continue to do so" (married, owner of a restaurant since nine years).

A minority of respondents would prefer to see examples of so-called new standards and procedures on what would be done if the situation changed again: "Simple and well-designed rules and procedures will make me feel better if the pandemic or other crisis rise again" (front desk, 4 stars hotel); "Policies will help to the reduce the uncertainty and the anxiety".

The isolation and social distancing

The isolation and social separation were mentioned by a minority as a stressor during the lockdown. They revealed that social isolation "breaks with the social life" and obliged them to follow

“the new normal, away from family and friends” (store supervisor, restaurant). The return to work after the lockdown was not easy for some respondents. They were affected by fear and anxiety when they leave the isolation: “We have been in lockdown for around five weeks, I was anxious and dreaded by leaving my home”; “The return disrupted my routine, and I took two weeks and much mental effort to adjust with the new situation” (sales manager-duty free, Bahrain Airport).

The risk of contamination

Most of the participants highlighted the high risk of virus transmission and contamination in the workplace: “I can get the virus, is too risky in my job, I serve more than 20 customers daily” (waiter/cashier, restaurant). They explained that the risk of virus transmission could not be eliminated because of the nature of the job. Indeed, employees in the hospitality and tourism industry have direct contact with colleagues and customers: “I risk my life at every flight” (Steward, airlines company), “my workplace (hotel) is a perfect place to get sick” (front desk, 4 stars hotel). As a result, the majority of the interviewees experienced high stress and anxiety when they deal with the customers and their colleagues: “I feel scared when I am taking order from customers. I try to keep a distance when I work with my colleagues and the clients, this makes me anxious” (waitress, restaurant-cafe).

A minority mentioned how is stressful when they deal with clients who were not respecting the barrier gestures: “I hate reminding the customers to wear their masks properly. It is stressful; I need to ask them to stay on the yellow line” (receptionist, cinema).

The job security

Job insecurity and instability can lead to low motivation and increase frustration and stress. The COVID-19 epidemic and the ensuing recession aggravated global unemployment, particularly for the hospitality and tourism sector. Many of the respondents fear the “job loss”; “wage cuts”; “layoffs”, and “reduced benefits”. Some interviewees mentioned that “many restaurants and hotels have closed due to lockdowns and may not reopen” (owner, restaurant) and other businesses “downsize”; “reorganize”, or “merge to survive”; which made employees “doubt their employer’s and job security” when “others have already lost their jobs”. The risk of losing the job is a stressful and frustrating situation for many of the interviewees: “I feel powerless and frustrated”; “I am wondering when I would get laid off”; “I was shocked and depressed when the airline company asked us to take an unpaid vacation and gave for some part-time jobs” (Married, flight attendant, airlines company).

Discussion

The main purpose of this qualitative study is to explore the workplace stressors in the hospitality and tourism industry in Bahrain during the pandemic. First, the research started by evaluating the stress level and the well-being score of 172 participants working in the hospitality industry. Then, semi-directive interviews were conducted with 18 employees and managers presenting different levels of stress and well-being scores to guarantee a heterogeneous sample. The 18 interviewees were asked to describe and report their experiences of working in different organizations during the pandemic.

The survey results showed that 75.6 % of the participants experienced moderate to severe levels of stress, and 86 % of the respondents demonstrated an insufficient level of well-being, which may lead to burnout in the future. The qualitative content analysis confirms the findings of the survey. The results showed that employees working in the hospitality and tourism industry in the kingdom experienced high levels of stress and anxiety during the pandemic: “I am stressed, and I cannot sleep very well”; “I am tired”; “I feel like my life has stopped.”

Six main themes emerged from the qualitative content analysis: workload, role conflict and ambiguity, intolerance of uncertainty (IU), isolation and social distancing, risk of contamination, and job security.

The pandemic introduced new job demands and exacerbated tasks, duties, and responsibilities for the employees working in the hospitality and tourism industry (Su, 2022). Even when they work remotely, the use of technology increases the load of work, which can lead to a high-stress level. Underload was also experienced by most of the interviewees, particularly when the customers were afraid to go out. Hotels, restaurants, and attraction sites remained empty for an extended period. Overload and underload of work harm the physical and mental health of the employees (Ruyter et al., 2001; Wang et al., 2020). It can cause workers to become exhausted, forgetful, and lose control (Kim et al., 2015). To prevent stress, managers should examine the new workload in light of the pandemic and adjust and redistribute work assignments accordingly.

The results also show that employees struggle to balance their personal and professional lives, particularly women. Many individuals worked from home during the lockdown and even after it ended. The situation was accentuated by the school and childcare centre closures, which caused stress and difficulty balancing personal and professional lives (Karatepe, Uludag, 2008; Liu et al., 2020a, 2020b, 2021). Different measures can be taken to help workers balance both work and personal life during the pandemic. Managers could increase time flexibility and allow employees to take annual leave whenever possible (Naumann et al., 2020).

The conflict between customers' and company expectations and the lack of clarity about the best practices to deal with customers during a pandemic can increase anxiety and stress among hospitality and tourism workers. Managers should develop clear objectives, instructions, and practices to minimize role conflict and ambiguity during the crisis and protect the mental and physical health of the employees (Karatepe et al., 2018; Rasool et al., 2021; Wiss, 2020).

The COVID-19 pandemic, as an unpredictable health crisis, has resulted in severe mental health issues, particularly concerning its unclear future development (Su, 2022). The inadequate and incomplete information aggravates the uncertainty, which increases anxiety, depression, and insomnia (Zhuo et al., 2021). In managing the pandemic uncertainty, managers should involve all the organization's members in discussing the future and preparing an emergency plan (Carleton, 2016; Durodié, 2020; Grupe, Nitschke, 2013). Well-designed schemes and procedures can help employees with low intolerance of uncertainty increase their capacity to deal with future events and improve their well-being (Holmes et al., 2020).

Social distancing and isolation were associated with various physical and mental consequences such as frustration, fear, anxiety, sleeping disorders, headaches, and stomach pain (Roy et al., 2020). Managers should keep employees connected by organizing activities and meetings regularly. Structured tasks and routines may also keep employees connected and facilitate their return to work after the lockdown (Hwang et al., 2020).

Restaurants, hotels, museums, airplanes, etc., are perfect places for the propagation of the virus since it brings many individuals indoors for long periods, frequently with insufficient ventilation. Most respondents are anxious and depressed about the risk of contamination in their workplace: "we risk our lives." The hospitality and tourism industry managers can adopt different measures to reduce the risk of infection, promote good hygiene at work, and improve employees' mental health and well-being. The use of distance floor marks in shared spaces like reception desks limits the number of consumers per transaction and encourages them to use other payment methods. Employees should be involved in developing protection measures to help adhere to the regulations and promote their mental health and well-being.

The research results show that lack of job security severely impacts employees' mental health. Job insecurity increases stress and anxiety and decreases motivation: "the pandemic has cost some of my friends' jobs"; I feel insecure and replaceable." Managers can take different actions to reduce job instability and protect workers' mental health (Su, 2022). They can explore the options offered by the government to support businesses and employment during the pandemic. Managers should also encourage the workers to take sick or annual leave even during the lockdown (Yu et al., 2021).

Companies can also use rotation (Wang et al., 2020) by offering workers the possibility to stay within the business and not lose their jobs.

Conclusion and practical implications

The research has several significant practical implications. First, it demonstrated how critical it is to investigate employees' stressors during a pandemic. New stressors related to the pandemic were identified. Therefore, managers should update their coping strategies to cope with pandemic stressors. For example, managers should involve all organization members, particularly employees with a limited tolerance for uncertainty, in planning and developing an emergency plan that helps them build their capacity to deal with future occurrences and improve their well-being (Su, 2022; Zhuo et al., 2021). Managers can also implement measures to limit infection risk, increase workplace hygiene, and boost employee mental health and well-being. While on lockdown, managers should urge staff to take sick or yearly leave, improving their mental health and reducing the stress level related to the lack of security (Lima et al., 2020; Wang et al., 2020; Warth et al., 2022; Yu et al., 2021). Second, traditional stressors related to the hospitality industry were also cited by most of the interviewees during the pandemic. As a result, hospitality industry managers should identify and investigate new and effective solutions for reducing occupational stress. Indeed, proper human resources management can significantly reduce the existing stressors and prevent the occurrence of new stressors caused by the pandemic (Bao et al., 2020; Bhushan, 2018; Holmes et al., 2013). Therefore, redesigning precise tasks, responsibilities, and explicit procedures aids in fixing and maintaining an adequate workload and reduces workplace stress (Feroz et al., 2020; Kim, Umbreit, 2007). A flexible schedule allows managers to be more empathetic toward employees who may have kids or other responsibilities at home, which could help employees to balance their professional and personal lives and reduce workplace stress.

Strengths and limitations

The study's main goal is to explore in-depth the occupational stressors in Bahrain's hospitality and tourism industry during the pandemic. The findings of the study have diverse academic and practical implications. First, this study is the first empirical study to examine the influence of a typical pandemic on the mental health and well-being of hospitality and tourism industry workers in Bahrain during the COVID-19 epidemic. Second, it helps to identify new and specific occupational stressors: "the pandemic stressors," compared to the previous research that has mentioned only "traditional stressors." Third, the study's results were consistent with the literature related to psychological and physical impacts. The findings showed that stressed-out employees suffered from anxiety, sleep disorders, headaches, loss of appetite, and more.

However, this qualitative study does have some limitations. First, the sample size of 18 is relatively small and may not be generalizable to other populations, particularly those who lost their jobs during the pandemic. Moreover, the study should take into consideration the nationality of the employees. In fact, from April 2020, the Bahrain government supported the citizens and paid all private-sector employees' salaries for six months to mitigate the economic impact of the outbreak. However, the expatriates were not supported and experienced demotion, salary reductions, and suppression of the usual accommodations (rent, insurance packages, etc.). Due to closure and travel restrictions, expatriate workers were also forced to stay in the country even after losing their jobs, which affected their mental health and stress levels. Therefore, the results presented in this study may not reflect the numbers and perceptions of the employees working in the hospitality and tourism industry in

the Kingdom. Future research should explore the workplace stressors of expatriates working in the hospitality and tourism industries.

References

- Asmundson, G. J. G., & Taylor, S. (2020). How health anxiety influences responses to viral outbreaks like COVID-19: what all decision-makers, health authorities, and health care professionals need to know. *Journal of Anxiety Disorders, 71*. <https://doi.org/10.1016/j.janxdis.2020.102211>
- Ayari, A., (2019). Stress in the workplace: Women academics in the university of Bahrain. *Journal of Advanced Research in Dynamical and Control Systems, 11*(4), 2582–2586.
- Badrfam, R., Zandifar, A., Arbabi, M. (2020). Mental health of medical workers in COVID-19 Pandemic: restrictions and barriers. *Journal of Research in Health Sciences, 20*(2), 1–2. <https://doi.org/10.34172/jrhs2020.16>
- Bao, Y., Sun, Y., Meng, S., Shi, J., Lu, L. (2020). 2019-nCoV epidemic: address mental health care to empower society. *Lancet, 22*(395), 37–38. [https://doi.org/10.1016/S0140-6736\(20\)30309-3](https://doi.org/10.1016/S0140-6736(20)30309-3)
- Bardin, L. (2007). *L'analyse de contenu*: Paris, Quadrigue/Puf, 291.
- Bhushan, S. (2018). Stress in hotel industry: a study of the causes and stress management techniques. *Journal of Management Research and Analysis, 5*(2), 221–224.
- Braun, V., Clarke, V. (2006). Using thematic analysis in psychology. *Qualitative Research in Psychology, 3*(2), 77–101. <https://dx.doi.org/10.1191/1478088706qp063oa>
- Carleton, R. N. (2016). Into the unknown: A review and synthesis of contemporary models involving uncertainty. *Journal of Anxiety Disorders, 39*, 30–43. <https://doi.org/10.1016/j.janxdis.2016.02.007>
- Choi, Y., Dickson, D. R. (2009). A case study into the benefits of management training programs: Impacts on Hotel employee turnover and satisfaction level. *Journal of Human Resources in Hospitality and Tourism, 9*(1), 103–116. <https://doi.org/10.1080/15332840903336499>
- Corbin, J., Strauss, A. (2007). *Basics of qualitative research: Techniques and procedures for developing grounded theory* (3rd ed.). Thousand Oaks, CA: Sage.
- Duan, L., Zhu, G. (2020). Psychological interventions for people affected by the COVID-19 epidemic. *Lancet Psychiatry, 7*(4), 300–302. [https://doi.org/10.1016/S2215-0366\(20\)30073-0](https://doi.org/10.1016/S2215-0366(20)30073-0)
- Durodié, B. (2020). Handling uncertainty and ambiguity in the COVID-19 pandemic. *Psychological Trauma: Theory, Research, Practice, and Policy, 12*(S1), 61–62. <https://doi.org/10.1037/tra0000713>
- Feroz, A. S., Ali, N. A., Feroz, R., Meghani, S. N., Saleem, S. (2020). Impact of the COVID-19 pandemic on mental health and well-being of communities: an exploratory qualitative study protocol. *Protocol, 1*–4. Retrieved from: https://ecommons/aku/edu/pakistan_fhs_mc_chs_chs|841.
- Gössling, S., Scott, D., Hall, M. (2020). Pandemics, tourism, and global change: a rapid assessment of COVID-19. *Journal of Sustainable Tourism, 29*(1). 1–20. <https://doi.org/10.1080/09669582.2020.1758708>
- Grupe, D. W., Nitschke, J. B. (2013). Uncertainty and anticipation in anxiety: An integrated neurobiological and psychological perspective. *Nature Reviews Neuroscience, 14*(7), 488–501.
- Hashimoto, K., Jia, Y., Wang, H., Wang, R., Liu, C., Yang, C. (2020). Vicarious traumatization in the general public, members, and non-members of medical teams aiding in COVID-19 control. *Brain, Behavior, and Immunity, 10*(20), 916–919. <https://doi.org/10.1016/j.bbi.2020.03.007>
- Holmes, E. A., O'Connor, R. C., Perry, V. H., Tracey, I., Wessely, S., Arseneault, L., Ballard, C., Christensen, H., Silver, R. C., Everall, I., Ford, T., John, A., Kabir, T., King, K., Madan, I., Michie, S., Przybylski, A. K., Shafran, R., Sweeney, A., Worthman, C. M., Yardley, L., Cowan, K., Cope, C., Hotopf, M., Bullmore, E. (2020). Multidisciplinary research priorities for the COVID-19 pandemic: a call for action for

- mental health science. *Lancet Psychiatry*, 7(6), 547–560. [https://doi.org/10.1016/S2215-0366\(20\)30168-1](https://doi.org/10.1016/S2215-0366(20)30168-1)
- Hon, A. H. Y., Chan, W. W. H., & Lu, L. (2013). Overcoming work-related stress and promoting employee creativity in hotel industry: The role of task feedback from supervisor. *International Journal of Hospitality Management*, 33, 416–424. <https://doi.org/10.1016/j.ijhm.2012.11.001>
- Hwang, T. J., Rabheru, K., Peisah, C., Reichman, W., Ikeda, M. (2020). Loneliness and social isolation during the COVID-19 pandemic. *International Psychogeriatrics*, May 26, 1–4. <https://doi.org/10.1017/S1041610220000988>
- Irmer, J. P., Kern, M., Schermelleh-Engel, K., Semmer, N. K., Zapf, D., (2019). The instrument for stress-oriented task analysis (ISTA). A Meta-Analysis. *Zeitschrift für Arbeits- und Organisationspsychologie A&O*, 63(4), 217–237. <https://doi.org/10.1026/0932-4089/a000312>
- Karatepe, O. M., Yavas, U., Babakus, E., Deitz, G. D. (2018). The effects of organizational and personal resources on stress, engagement, and job outcomes. *International Journal of Hospitality Management*, 74, 147–161. <https://doi.org/10.1016/j.ijhm.2018.04.005>
- Karatepe, O. M., Uludag, O. (2008). Role stress, burnout and their effects on frontline hotel employees' job performance: evidence from Northern Cyprus. *International Journal of Tourism Research*, 10(2), 111–126. <https://doi.org/10.1002/jtr.645>
- Kim, H. J. (2008). Hotel service providers' emotional labor: The antecedents and effects on burnout. *International Journal of Hospitality Management*, 27, 151–161. <https://doi.org/10.1016/j.ijhm.2007.07.019>
- Kim, H. J., Shin, K., Umbreit, T. (2007). Hotel job burnout: the role of personality characteristics. *International Journal of Hospitality Management*, 26(2), 421–434. <https://doi.org/10.1016/j.ijhm.2006.03.006>
- Kim, S. S., Im, J., Hwang, J. (2015). The effects of mentoring on role stress, job attitude, and turnover intention in the hotel industry. *International Journal of Hospitality Management*, 48, 68–82. <https://doi.org/10.1016/j.ijhm.2015.04.006>
- Kvale, S. (1996). *Interviews: An introduction to qualitative research interviewing*. Sage. Thousand Oaks. [https://doi.org/10.1016/S1098-2140\(99\)80208-2](https://doi.org/10.1016/S1098-2140(99)80208-2)
- Lazarus, R. S. (1991). Psychological stress in the workplace. In P. L. Perrewé (Ed.), *Handbook of job stress. Journal of Social Behavior and Personality*, 6, 1–13.
- Li, Z., Ge, J., Yang, M., Feng, J., Qiao, M., Jiang, R., Bi, J., Zhan, G., Xu, X., Wang, L., Zhou, Q., Zhou, C., Pan, Y., Liu, S., Zhang, H., Yang, J., Zhu, B., Hu, Y., Liem, A., Wang, C., Wariyanti, Y., Latkin, C. A., Hall, B. J. (2020). The neglected health of international migrant workers in the COVID-19 epidemic. *Lancet Psychiatry*, 7(4), 1. [https://doi.org/10.1016/S2215-0366\(20\)30076-6](https://doi.org/10.1016/S2215-0366(20)30076-6)
- Lima, C. K. T., Carvalho, P. M. M., Lima, I. A. A. S., Nunes, J. V. A. O., Saraiva, J. S., de Souza R. I., da Silva, C. G. L., Neto, M. L. R. (2020). The emotional impact of Coronavirus 2019-nCoV (new coronavirus disease). *Psychiatry Research*, 287, 1–2. <https://doi.org/10.1016/j.psychres.2020.112915>
- Liu, S., Yang, L., Zhang, C., Xiang, Y. T., Liu, Z., Hu, S., Zhang, B. (2020a). Online mental health services in China during the COVID-19 outbreak. *Lancet Psychiatry*, 7(4), 17–18. [https://doi.org/10.1016/S2215-0366\(20\)30077-8](https://doi.org/10.1016/S2215-0366(20)30077-8)
- Liu, Y., Li, J., Feng, Y. (2020b). Critical care response to a hospital outbreak of the 2019-nCoV infection in Shenzhen, China. *Critical Care*, 24(1), 56. <https://doi.org/10.1186/s13054-020-2786-x>
- Liu, Y., Wei, S., Xu, J. (2021). COVID-19 and women-led Business around the world. *Finance Research Letters*, 1–10. <https://doi.org/10.1016/j.frl.2021.102012>
- Lovibond, S. H., Lovibond, P. F. (1995). *Manual for the Depression Anxiety Stress Scales*. 2nd Edition, Psychology Foundation, Sydney.

- Manzoor, A., Awan, H., Mariam, S. (2011). Investigating the impact of work stress on job performance: A study on textile sector of Faisalabad. *Asian Journal of Business and Management Sciences*, 2(1), 20–28. <https://doi.org/10.22610/jebms.v9i2.1647>
- McLeod, J., Erving, C., Caputo, J. (2014). Health Inequalities. In: J. McLeod, E. Lawler, M. Schwalbe (Eds.) *Handbook of the Social Psychology of Inequality. Handbooks of Sociology and Social Research*. Springer, Dordrecht. https://doi.org/10.1007/978-94-017-9002-4_28
- Murali, S. B., Basit, A., Hassan, Z. (2017). Impact of job stress on employee performance. *International Journal of Accounting & Business Management*, 5(2), 13–33. <https://doi.org/10.1002/epa2.1091>
- Naumann, E., Mohring, K., Reifenscheid, M., Wenz, A., Rettig, T., Lehrer, R., Krieger, U., Juhl, S., Friedel, S., Fikel, S., Cornesse, C., Blom, A.G. (2020). COVID-19 policies in Germany and their social, political, and psychological consequences. *European Policy Analysis*, 6(2), 191–202. <https://doi.org/10.1002/epa2.1091>
- O'Neill, J.W., Davis, K. (2011). Work stress and well-being in the hotel industry. *International Journal of Hospitality Management*, 30, 385–390. <https://doi.org/10.1016/j.ijhm.2010.07.007>
- Rajkumar, R. P. (2020). COVID-19 and mental health: A review of the existing literature. *Asian Journal of Psychiatry*, 52, 1–5. <https://doi.org/10.1016/j.ajp.2020.102066>
- Rasool, S. F., Wang, M., Tang, M., Saeed, A., Iqbal, J. (2021). How toxic workplace environment effects the employee engagement: the mediating role of organizational support and employee wellbeing. *International Journal of Environmental Research and Public Health*, 18(5), 1–17. <https://doi.org/10.9790/487X-161150106>
- Roy, J., Jain, R., Golamari, R., Vunnam, R., Sahu, N. (2020). COVID-19 in the geriatric population, *International Journal of Geriatric Psychiatry*, 35, 1437–1441. <https://doi.org/10.1002/gps.5389>
- Ruyter, K., Wetzels, M., Feinberg, R. A. (2001). Role stress in call centers: Its effects on employee performance and satisfaction. *Journal of Interactive Marketing*, 15(2), 23–35. <https://doi.org/10.1002/dir.1008>
- Shah, S. S. H., Aziz, J., Jaffari, A-R., Waris, S., Ejaz, W., Fatima, M., Sherazi, S. K. (2012). Impact of stress on employee's performance: a study on teachers of private colleges of Rawalpindi. *Asian Journal of Business Management*, 4(2), 101–104.
- Shigemura, J., Ursano, R. J., Morganstein, J. C., Kurosawa, M., Benedek, D. M. (2020). Public responses to the novel 2019 coronavirus (2019-nCoV): mental health consequences and target populations. *Psychiatry and Clinical Neurosciences*, 74(4), 281–282. <https://doi.org/10.1111/pcn.12988>
- Siegrist, J. (2010). A Theory of occupational stress. In J. Dunham (Ed.), *Stress in the workplace* (52–66), Philadelphia, PA: Whurr.
- Sigala, M. (2020). Tourism and COVID-19: Impacts and implications for advancing and resetting industry and research. *Journal of Business Research*, 117, 312–321. <https://doi.org/10.1016/j.jbusres.2020.06.015>
- Su, C. J. (2022). Post-pandemic studies in tourism and hospitality. *Service Business*, 30 May, 1–4. <https://doi.org/10.1007/s11628-022-00495-8>
- Tan, S. Y., Yip, A. (2018). Hans Selye (1907–1982): Founder of the stress theory. *Singapore Medical Journal*, 59, 170–171. <https://doi.org/10.11622/smedj.2018043>
- Wang, C., Pan, R., Wan, X., Tan, Y., Xu, L., Ho, C. S., Ho, R. C. (2020). Immediate psychological 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(5), 1–25. <https://doi.org/10.3390/ijerph17051729>
- Wang, Z., Zaman, S., Rasool, A. F., Zaman, Q. U., Amin, A. (2020). Exploring the relationships between a toxic workplace environment, workplace stress, and project success with the moderating effect

- of organizational support: Empirical evidence from Pakistan. *Risk Management Healthcare Policy*, 13, 1055–1067.
- Warth, R. V. D., Nau, A., Rudolph, M., Stapel, M., Bengel, J., Glattacker, M., (2022). Treatment beliefs in patients with mental disorders in psychosomatic rehabilitation. A qualitative analysis. *European Journal of Health Psychology*, 29(2), 107–117. <https://doi.org/10.1027/2512-8442/a000087>
- Wiss, Z. G. (2020). Stress and burnout in health care workers during COVID-19 pandemic: validation of a questionnaire. *Nature Public Health Emergency Collection*, 30(3), 531–536. <https://doi.org/10.1007/s10389-020-01313-z>
- Xiao, H., Zhang, Y., Kong, D., Li, S., Yang, N. (2020). Social capital and sleep quality in individuals who self-isolated for 14 days during the coronavirus disease 2019 (COVID-19) outbreak in January 2020 in China. *Medical Science Monitor*, 26, 1–8. <https://doi.org/10.12659/MSM.923921>
- Yu, J., Park, J., Hyun, S. S. (2021). Impacts of the COVID-19 pandemic on employees' work stress, well-being, mental health, organizational citizenship behavior, and employee-customer identification. *Journal of Hospitality Marketing & Management*, September, 98, 1–21. <https://doi.org/10.1016/j.ijhm.2021.103020>
- Zacher, H., Rudolph, W. (2021). Individual differences and changes in subjective wellbeing during the early stages of the COVID-19 pandemic. *American Psychologist*, 76(1), 50–62. <https://doi.org/10.1037/amp0000702>
- Zhuo, L., Wu, Q., Le, H., Li, H., Zheng, L., Ma, G., Tao, H. (2021). COVID-19-related intolerance of uncertainty and mental health among back-to-school students in Wuhan: The moderation effect of social support. *International Journal of environmental Research and Public Health*, 8(3), 11. <https://doi.org/10.3390/ijerph18030981>

Received 20.07.2022

Качественное исследование профессионального стресса в индустрии гостеприимства и туризма в Бахрейне во время COVID-19

АЯРИ Асма

ORCID: 0000-0002-2134-0624

Университет Бахрейна, Сахир, Королевство Бахрейн

Аннотация. *Цель.* Стресс на рабочем месте является большой проблемой для сотрудников и организаций. В этом исследовании изучаются факторы стресса у сотрудников, работающих в индустрии гостеприимства и туризма Бахрейна во время пандемии COVID-19. *Дизайн исследования.* Сначала среди 172 сотрудников была распространена анкета, которая помогла оценить уровень стресса сотрудников. Затем было проведено 18 полуструктурированных интервью, а данные проанализированы с помощью качественного контент-анализа. Следуя обычному методу контент-анализа, была создана аналитическая сетка путём переключения между текстом и определением категорий. *Выводы.* Результаты исследования выявили новые профессиональные стрессоры: «пандемические стрессоры» и их влияние на бахрейнских специалистов в области туризма и гостеприимства. Стрессовые факторы пандемии COVID-19 более специфичны для контекста кризиса в области здравоохранения, например, нетерпимость к неопределённости, изоляция и социальное дистанцирование, риск заражения и гарантия занятости. *Ценность результатов.* Результаты этой статьи выявили различные стрессоры, связанные с работой, и стрессоры, характерные для пандемии. Выводы помогут руководителям реализовать превентивные меры для снижения распространения инфекции, защиты работников и улучшения их самочувствия в условиях пандемии. Результаты также могут помочь в создании процедур для управления кризисами в будущем.

Ключевые слова: стресс; психическое здоровье; пандемия COVID-19; индустрия гостеприимства и туризма.