



Effects of the covid-19 pandemic on the mental health of hotel housekeeping staff.

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ABSTRACT: This research aimed to understand the effects of the Covid-19 pandemic on the mental health of workers of hotel housekeeping departments in the city of João Pessoa/PB. A quantitative analysis was carried out, to measure the information gathered from workers of three medium-sized hotels in the capital of the state of Paraíba, using a questionnaire to gather data, and descriptive analysis for the data analysis. It was found that the Covid-19 pandemic had caused impacts on the mental health of workers in this area, mainly in terms of financial worries; fear of losing their jobs; fear of contracting the disease while at work; and fear that if infected, they might pass it on to other members of the family. Added to this were physical fatigue, obsession with cleaning, and stress.

Keywords:

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INTRODUCTION

In December 2019, China officially notified the World Health Organization (WHO) of the appearance, in its territory, of a new disease caused by a virus of the coronavirus family (SARS-CoV-2-19). Soon afterwards, other cases appeared outside the country; however, the emergency decrees and actions were only presented by the WHO on March 11, after the declaration of the pandemic outbreak was confirmed. In Brazil, the first cases of COVID-19 were confirmed in the middle of the 2020 carnival (Sanar, 2020). These cases were people who had recently traveled to Europe. That meant the WHO alert – that the disease had spread beyond China's borders – was confirmed.

Tourism was seen as a major factor for the dissemination of the virus. According to the Brazilian National Civilian Aviation Body – ANAC (2020) between January and March 2020, over five million tourists took international flights arriving in, or departing from Brazil.

With the declaration of the pandemic and the implementation of the necessary restrictive measures, due to the worsening and accelerated increase of cases of infection and deaths, there were sharp consequences arising from the imposition of social restrictions, particularly in tourism, with increased numbers of canceled flights, and the closure of hotels and tourism attractions. The World Tourism Organization estimated a downturn in visitors of 60-80% in 2020, compared with 2019 (OMT, 2020).

This social context had unprecedented impacts on the livelihoods of those who relied on tourism as their source of income; the entire tourism production chain was significantly impacted, and many workers were either made redundant or had their contracts suspended, furthering adding to the numbers of unemployed during the pandemic. The World Travel & Tourism Council (WTTC) (2020) estimated that over 75 million jobs were at risk in the tourism sector – alarming data, as it shows the true extent of the crisis on the sector and its professionals.

After a period of more strict restrictive measures, the restrictions began to be lifted, in phases, all over Brazil, nonetheless this was done in a tentative way, with little hope of returning to normality any time soon. Tourism companies, especially hotels, the focus of this study, have since been able to recover their operations, but the effects of the pandemic on tourism and travel continues to generate psychological effects on workers that go beyond the financial impacts and the downturn in demand (Yan et al., 2021).

According to psychology professionals, any form of social deprivation, confinement, fear, changes in the

daily routine, work overload, and loss of income (due to the number of people who lost their jobs or had their salaries reduced) will cause, in some form or other, effects on people's mental health (Zanon et al., 2020).

These effects can range from a fear of contracting the virus at work, or while traveling, as well as the anxiety that the entire situation has created, with problems such as sleeplessness, depression, panic, high levels of fatigue (due to the reduction in the number of employees), increased need for hygiene control measures and especially, the fear of unemployment and the lack of income. During the pandemic, many families had one of more members with loss of income, causing growing anxiety about the future, for those still in work (Oswaldo Cruz Foundation, 2020).

Epidemiological crises and pandemics are nothing new. History records the Spanish flu outbreak (1918-1919), which was considered the "mother of all pandemics" (Taubenberger & Morens, 2006, p. 15) and was the first to be viewed as a modern-day pandemic due to its common characteristics: large groups of animals or humans in one place, and the sudden increase in people moving around the world, due to more effective travel (Taubenberger & Morens, 2006; Johnson & Mueller, 2002; Ujvari, 2011; Gosling, Scott & Hall, 2020).

In the period from 2000 to 2015, the world experienced situations that shattered the normality of people's daily lives, with the appearance of the acute respiratory syndrome - SARS (2002-2003), Swine flu (2009), Middle East Respiratory syndrome - MERS (2012-2015) and Ebola (2013-2014) (Gosling, Scott & Hall, 2020).

Tourism is accustomed to facing different types of adverse circumstances, and throughout its history, it has proven resilient in the face of against wars, infectious diseases, crises and political and economy recessions, disasters and extreme natural events, terrorist attacks, bad reputation, among others (Maphanga & Henama, 2019). But it has always been to be able to revive and reinvent itself, overcoming adverse situations. Much of this is related to the ability of the human being to mold him/herself in face of adversities, and tourism professionals are no exception, as they need to deal with external effects on a continual basis.

As regards the Covid-19 pandemic, a lot has been spoken about its impacts on Tourism, quantifying the losses and the negative impacts on the economy; but it is also important to focus on the tourism professionals themselves, particularly in the hotel sector, as they live with the daily uncertainty of losing their jobs (Yan et al.2021). Also, there is the risk of coming into constant contact with people who might be infected with the virus.

On this matter, and drawing a parallel with the health professionals, the Oswaldo Cruz Foundation -FIOCRUZ

(2021) reported that 43.2% of professionals do not feel protected at work, and for 23% of these, the main reason given was the lack of personal protection equipment (PPE) or its ineffectiveness (64% said they had to improvise their own PPE). The research participants also reported a generalized fear of being contaminated at work (18%), the absence of proper structure to perform the activity (15%), and inefficient flows of admission (12.3%). The lack of technical preparedness of professionals to work during the pandemic was cited by 11.8%, while 10.4% reported managers' insensitivity to their professional needs (FIOCRUZ, 2021).

Research around health focusing on the mental health of professionals as a direct result of dealing with Covid-19 has become important for understanding these behaviors considering the worldwide scenario. However, there is also a need studies on those professionals who face uncertainty and fear of losing their jobs, and the effects on their mental and physical health, and who constitute a sector which has been highly compromised, i.e., tourism.

This study examines the effects of the Covid-19 pandemic on the mental health of hotel workers, especially those linked to the housekeeping sector, given that this is sector is concerned with cleaning and sanitizing the rooms of the hotel and catering for guests' internal and private demands.

The choice of this theme was due to its social relevance presented in all the abovementioned data, and the important academic contribution that students in this area can make to developing research on the effects of the pandemic on tourism, particularly in the hotel sector. This importance is even more significant due to the present lack of studies on this topic, focusing on a sector that is considered "the backbone of the economy"; tourism and its production chain (WTTC, 2020, p.1).

Thus, this study aimed to understand the effects of the Covid-19 pandemic on the mental health of workers of the housekeeping departments of hotels in the city of João Pessoa/PB.

THEORETICAL BACKGROUND

From the Spanish flu to Ebola: a brief history of epidemiology and its relationship with tourism

Crises have always existed around the world, some with more dire consequences than others, e.g., economic crises, armed conflicts, environmental catastrophes, epidemics, and pandemics.

In relation to epidemics and pandemics, history relates that the Spanish flu (1918-1919) could be considered "the mother of all pandemics" (Taubenberger & Morens, 2006, p. 15); it was the first modern-day pandemic to be characterized by its rapid spread, due to

the following ingredients: large groups of animals or humans in one place, and the sharp rise in effective means transport around the world (Taubenberger & Morens, 2006; Johnson & Mueller, 2002; Ujvari, 2011; Gosling, Scott & Hall, 2020).

The Spanish flu brought three waves of contamination over a twelve-month period (Taubenberger & Morens, 2006; Johnson & Mueller, 2002), resulting in an estimated one hundred million deaths and five hundred million people infected around the world (Taubenberger & Morens, 2006).

In 1957, a new virus appeared; Asian flu, and in 1968, the so-called Hong Kong flu emerged. These viruses were responsible for nearly two million and one million deaths worldwide, respectively (Auerbach et al., 2013).

In the period from 2000 to 2015, the world went through similar situations, again shattering the normality of people's daily lives, this time with the appearance of severe acute respiratory syndrome – SARS (2002-2003), Swine flu (2009), Middle East Respiratory Syndrome - MERS (2012-2015) and Ebola (2013-2014) (Gosling et al., 2020).

SARS (2002-2003), a totally new coronavirus to the human body, was probably derived from markets in the province of Guangdong, due to the consumption of a small wild mammal from the Asian Southeast forests, called Civet or Musky Cat, according to Ujvari (2011). The author states that feces and secretions from this animal were full of the virus, and when they were slaughtered in the kitchens of Chinese restaurants, which lacked proper hygiene, workers of those establishments became contaminated when touching their mouths, eyes and noses.

In human beings, the virus managed to adapt and go unrecognized for nearly two months after the first contamination (Ujvari, 2011), but once the human body is contaminated, the virus can reach the respiratory mucosa and lungs. With symptoms like the flu or any other respiratory disease; affected individuals continued with their daily lives, transmitting the virus to other people. And so, SARS became widespread, until it was recognized by the health authorities, doctors and scientists that this was a deadly disease, with a 10% fatality rate and a high rate of transmission (Ujvari, 2011).

In 2009, the world saw another pandemic; swine flu, repeating the same scenario that occurred with other pandemics like the Spanish flu and SARS: a ban on large gatherings, lock-downs, isolation of areas and people, closure of schools, cancelation of festivities, meetings, and religious and sporting events, cities looking abandoned, with people unable to go out to work, travel bans, closure of borders, economic shut-down, chaos in the public health system, and the implementation of strict sanitary protocols (Ujvari,

2011). The World Health Organization reported over 18,000 fatal cases throughout the world related to swine flu (2010).

Another serious pandemic that hit humanity in the 21st century was MERS (2012), another virus of the human coronavirus group, which began in Saudi Arabia, with a high lethality rate (Gosling et al., 2020). MERS represented a "significant threat to human health" (Berry et al., 2015, p. 996).

And in 2013, a new virus appeared that claimed nearly 50% of patients (Gosling et al., 2020), i.e. a very high rate of lethal cases; the Ebola virus, which mainly affected the countries of Africa, due to the "lack of essential supplies in the implementation of measures of infection control in health establishments; lack of health professionals in the management of rising of cases; and the absence of epidemiological surveillance" (Chowell et al., 2014, p. 1) in those countries.

All these epidemiological crises were linked to the increase in the population and the close concentration of people and households. Other factors were also responsible for the rapid spread of the diseases; the movement of people around the world, particularly through tourism, due to the ease of travel by land, air and sea, and the increase and the importance that tourism had gained in society.

Tourism is used to facing shocks of different kinds, but these have only served to increase its resilience (Maphanga et al., 2019). And it has always been able to recover and reinvent itself, overcoming the crises, much of this due to the ability of the human being in mold him/herself in face of adversities, especially the tourism professional, who must always deal with external effects. However, it is undeniable that contagious diseases have extremely negative effects (Maphanga et al., 2019) on the economy and consequently, on tourism, as social isolation and travel bans are the usual measures taken during a pandemic/epidemic.

And even after the crises have passed, and tourism and travel are made possible again, people's fear of becoming contaminated while traveling, or at the destination, causes them to stay away from such places until greater trust can be established, which demands great effort and unity of all stakeholders.

Therefore, even after travel was banned, the destination image, especially where the outbreaks of infectious diseases occurred, is compromised for some time, further exacerbating the situation: bankruptcies, rising unemployment rates, and loss of income and profit for the places affected.

Mental health

Discussions and concepts of mental health are influenced by historical social-political contexts, and by the evolution of practices in health. In the last centuries, the discourse on mental health has gone beyond the

field of medicine, in the understanding that mental disorders may also be caused by physical and social aspects (Gaino et al., 2018).

In 1946, the WHO defined mental health as "a state of complete physical, mental and social well-being". For Gaino et al. (2018), this definition of "complete well-being" is impossible to achieve if we consider that social, economic, cultural and environmental aspects all influence this process.

In May 2013, the WHO adopted the action of Saúde Mental Abrangente 2013-2020 (Broad Mental Health 2013-2020). This was the first plan of action related to the theme, which up until that point had the principle of "there is no health without mental health" (WHO, 2013). From that point on, the definition of mental health was perceived as "a state of well-being", in which each person, with their own individuality, would be able to handle tensions and stress, and be able to work productively and contribute to the community.

Discussions on mental health in the workplace have been increasing. This interest is directly related to the rise in the number of cases of mental disorders and work-related symptoms. According to the WHO (2017), problems of physical and mental health among workers can be related to a negative work environment.

Within this perspective, it is worth reflecting on this situation regarding workers in the field of Tourism, especially in the hotel sector, as according to Sant'anna, Carneiro & Lescura (2021), this is a sector with "unfavorable working conditions" (p.51), due to the "ergonomics of the activity; long working hours; high demands; absence of control over the work; absence of social support, and discrimination"(Sant'anna, Carneiro & Lescura, 2021, p.51).

According to the literature, these factors can culminate in pain in various parts of the body, stress, reduced productivity, absenteeism, and relationship difficulties, among other effects.

In the Context of the Covid-19 pandemic, such situations were intensified, as reported by the International Work Organization – IWO (2020)

"The organization and conditions of work have changed drastically, bringing new psycho-social challenges for the health and well-being of workers – whether in the front line, in essential services, or those working from home, or after the loss of their business and jobs" (IWO, 2020, p.6)

Such challenges were often due to the increased working hours, leaving little time for rest, as well as to fear of contracting and transmitting the virus to third parties, mainly family members, fear of losing their job, administration of pay cuts, reduction of work benefits, higher exposure to the virus, and mourning the loss of loved ones, among other aspects, in other words, all these factors "may have a severe impact on the mental health" of workers (IWO, 2020, p.6).

According to the IWO (2020), such situations can lead

to physical symptoms and physical reactions, such as “bad mood, low motivation, exhaustion, anxiety, depression, burnout and suicidal thoughts [...] digestive problems, changes in appetite or weight, skin reactions, cardiovascular diseases, and musculoskeletal issues [...]” (IWO, 2020, p.6-7).

Therefore, to be able to fulfill Goal 8 of the 2030 Agenda of the United Nations Organization – UNO (2015), which aims to “promote sustained, inclusive and sustainable economic growth, full and productive employment and decent work for all”, it is important to consider the impacts that an unfavorable work environment cases for the mental health of workers and consequently, for the economic growth of a sector like Tourism, basic premises of which are hospitality and well-being.

Covid-19 and tourism

As it is still a recent crisis, there is still much to be discovered through research, particularly on the effects that the Covid-19 pandemic will continue to have on tourism activity once the WHO declares the pandemic is over.

What is already clear is that the pandemic will leave lasting marks on tourism activity, and it will take a long time for the sector to return to normal, given the abrupt interruption and the suspension of the entire production chain worldwide, across countless economy sectors, leading to huge loss of income and jobs.

Tourism needs to make use of the constitutional right to come and go, so that it can effectively take place and bring social and economic gains to a certain location, region or country. But with the international ban on travel, closure of borders, lockdowns, and social isolation, tourism lost notoriety and became disjointed. In addition, people need certain economic security and overall security of their health and that of their family members, for tourism to be possible. But these conditions were suppressed due to Covid-19, whether through the loss of jobs and income, or to the need to preserve the human life (Santana et al., 2021).

To try and quantify the losses and impacts of the pandemic on society and tourism as though it were now over would be too hasty, bearing in mind that the pandemic is still ongoing, following its path, infecting people and causing victims all over the world, even in countries and cities that have already seen a great wave of contamination, new outbreaks occur repeatedly. Any study on the impacts of the Covid-19 pandemic and tourism should take this into consideration, as the scenario of impacts is still preliminary, uncertain, and unprecedented (Gosling et al., 2020). All this will require further research in the future.

What can be already effectively be said is that the arrival of Covid-19 had an immediate and surprising im-

pact on the cities and their attractions, such as the Trevi Fountain in Rome, Times Square in New York, Paulista Avenue in São Paulo, the Eiffel Tower in Paris, and the Venice Canals in Italy, among others, which are usually bustling with crowds of people but were suddenly completely empty, as registered by several media outlets (Traveller, 2020).

However, although preliminary, and based on projections, it is still possible to analyze the impacts of the pandemic on the work and income of those whose livelihoods depend on tourism, based on data that can be accessed and/or estimated from official government statistics, which present the incomes and the numbers of people in employment in the sector to date.

In Brazil, according to data from the Central Bank (Tourism Ministry, 2020), there was a variation of -6.2% in the volume of tourism activities in the 1st trimester of 2020, a deficit of 1.47% in foreign exchange income from tourism compared to the same period of 2019, which was 2.51%; a fall in federal revenues from tourism-related activities; and according to the General Registry of Employed and Unemployed - CAGED (Brazilian Ministry of the Economy, 2020), in the 1st trimester of 2020, there was rate of admissions in the accommodation sector of 267,468. However, there were also 322,961 dismissals. In the month of June 202 alone, there were only 17,257 new job positions, as opposed to 52,597 of dismissals: a total of -35,340 jobs lost (Ministry of the Economy, 2020).

All these data add up to significant economic losses in Gross Domestic Product (GDP) in the tourism sector in 2020. It is estimated that the GDP from the sector was around R\$165.5 billion in 2020; when compared to the tourism GDP in 2019, representing a reduction of 38.9%. All these losses were due to the Covid-19 pandemic (Fundação Getúlio Vargas, 2020). However, despite these projections, it is important to determine the real impacts on income and work for those whose daily lives depend on tourism in Brazil; tourism professionals, measuring this directly, with the professionals themselves giving their opinions about the situation.

In view of this scenario, it is essential to be aware of the challenges faced by staff of hotel housekeeping departments, as this sector is responsible for providing a good hosting service, through the quality of its cleaning, sanitizing and organizing the accommodation units and communal areas of the hotels where they work.

These are also the staff who come into direct contact with surfaces, objects and materials that could be contaminated with the Covid virus. Therefore, the work of the housekeeping staff is very important for ensuring a healthy environment and preventing the contamination and spread of the virus in this new scenario, which requires new processes and security protocols to protect people’s health within the hotel environment.

METHODOLOGICAL PROCEDURES

In terms of methodology, this is a descriptive study, as it aims to describe certain characteristics of a particular group, individual, phenomenon or variable (Gil, 2002).

As to the approach, this research has quantitative attributes, as it uses statistical methods to measure data from the study. The bibliographic review was carried out by searching journals in CAPES, Google scholar, national and international journal databases, and digital archives of the UFPB sector library.

To perform this study, we selected medium-sized hotels located along the coastal area of the city of João Pessoa that continued to remain open and receive tourists even during the pandemic. The research universe consisted of staff of the housekeeping departments of those establishments. Within the universe of hotels invited to take part in this research, of a total of five, only three agreed to take part. Even after explaining the purpose of the research and sending out a document with information about the study, the other two hotels did not show interest or returned the calls.

The respondent public of the three hotels that agreed to take part in the study consisted of staff of the housekeeping departments, with a total of 31 individuals: 3 housekeepers; 18 chambermaids; 2 porters; 2 housekeeping assistants; 4 general service staff; and 2 maintenance staff. The data collection was carried out from September 30 to October 18, 2021.

The data collection instrument was a questionnaire elaborated by the authors, based on theoretical references. It was composed of 17 yes/no questions and 5 open-ended questions regarding the respondent's profile. For the data analysis, descriptive statistics was used to obtain the results.

DATA ANALYSIS AND RESULTS

One of the first issues addressed by the questionnaire was the length of service in the company, as we wanted to find out the impact that Covid-19 had had on the employees.

Therefore, it was important to clarify the length of service at the hotel. The respondents were asked whether they were already working at the hotel prior to March 2020; 20 said yes, they were, and 11 said no, they had only started in May 2021, a period compatible with the period of greater flexibilization and more intense recovery of tourism, due to the positive effects of vaccination programs worldwide and the imposition of health precautions.

The respondents were also asked whether their work contracts had been suspended due to the Covid-19 pandemic; of the 20 who had already been working for the company since March 2020, 10 said yes, their con-

tracts had been suspended and 10 said no, their contracts had remained active throughout the most critical period of the Covid pandemic. Of the 11 respondents who did not work at the company during the period investigated, 5 said their contracts had been suspended – it was not hypothesized, but these people had probably worked at other companies before moving to the hotel in question – and 6 stated that they contracts had not been suspended. From this, we may infer two situations: either they were not working in the field of tourism at that time, or if they were, their contracts were maintained, facts that were not considered in this study.

Another question was whether the respondents had feared losing their jobs at any time, due to Covid-19; 25 said yes, and 6 said no. On this subject, the IWO found that there were over 25 million of job losses in 2020 during the period of compulsory isolation. Therefore, the fear of unemployment was a major factor of impact in this research, as unemployment makes it difficult for people to meet their basic needs (Santos et al., 2018).

The questionnaire also asked whether, at the time of data collection, the respondents were still afraid of losing their jobs; 8 said yes and 23 said no. This shift in responses may be due to the perception that things were returning to "normal", and that hotel occupancy rates were once again rising.

The fear of being infected by Covid-19 while at work was a relevant fact addressed in the literature. Responding to this question, 19 of the participants said yes, 11 said no, and 1 chose not to answer the question. When asked whether they were afraid of dying from Covid-19, 19 said yes and 12 said no; these data are comparable with the numbers who said they were afraid of becoming infected by Covid-19, leading us to wonder whether those afraid of catching Covid-19 might believe that once infected, they might not be cured, but might die.

Another question asked whether the respondents were afraid that they might catch Covid-19 while at work and pass it on to other family members; 23 said yes and 8 said no, suggesting that among those who said they were not afraid of dying themselves, their fear for other members of their families was greater. And when questioned whether they were afraid of isolation once infected, 15 stated that yes, 15 that no, and 1 preferred not to answer.

The statement "the Covid-19 pandemic caused xxx in me" was used to check for signs of any changes in psychological state perceived by the respondents. For each psychological state, the respondents were asked to use this statement to evaluate the following: Covid-19 caused symptoms of depression (6 said yes, 25 said no); Symptoms of Anxiety (13 yes, 17 no); Money worries (24 yes, 6 no, 1 declined to answer); Fear of not having enough food in the home (25 yes, 4 no, 1 de-

clined to answer); Obsession with cleaning (15 yes, 16 no); Difficulty getting to sleep/insomnia (9 yes, 21 no, 1 declined to answer); Extreme physical fatigue (15 yes, 16 no); Feeling angry (6 yes, 25 no).

The participants were then asked to respond to the statement: "Covid-19 and the hygiene measures in my work place caused xxx", followed by the statements: Increased workload (19 said yes, 12 said no); Work overload (19 yes, 12 no); Smaller work teams (26 yes, 5 no); Stress (16 yes, 15 no); Anger (7 yes, 24 no); Problems with the work team (31 no); Salary decrease (14 yes, 17 no).

Considering the obligation to follow sanitary protocols, particularly for those working directly in the areas of cleaning and sanitation, and those who come into direct contact with guests and their belongings, such as the housekeeping department, the participants were asked whether they felt that the safety and hygiene standards protected them from Covid-19; 27 said yes, 3 said no, and one declined to answer.

Well-being in the workplace is considered an important condition from increasing the quality of the service, increasing productivity, and lowering absenteeism. Therefore, we asked the participants whether they were happy in the work environment; 29 said yes, and 2 said no. Another similar aspect is whether the work environment is friendly, to which all the respondents answered yes, which is a positive aspect for harmony and good rapport among work colleagues and has a positive effect on the quality of the service. Following on from this, the respondents were asked about job satisfaction; 29 said yes, they were satisfied with their jobs, and 2 said no, they were not.

Motivation is an aspect that promotes well-being and boosts the good performance; 27 participants stated that they feel motivated to perform their jobs better, while 4 said they did not. According to Silva & De-Marchi (1997), motivation creates better resistance to stress, more emotional stability and consequently, more efficiency at work.

To understand the perceptions of the housekeeping staff, they were asked whether they believed psychological problems had affected their personal and professional performance, as according to Cabral (2020), psychological issues, such as fear, fatigue, excessive workload, and worry can directly affect individuals' quality of life and also their professional performance and productivity at work. Only 5 of the participants in this study believed that psychological issues were affecting their personal performance, while 25 said it was not, and 1 declined to answer.

The length of service among the 31 participants ranged from 1 month to 25 years. In relation to sex, 6 were men, 24 were women, and 1 preferred not to answer. The age range was 21 to 62 years.

In relation to level of education, only one respondent (in the position of housekeeper) had completed higher

education, while the other two housekeepers had not. Among the other employees, 17 had completed high school, 4 had not; 4 respondents had completed elementary school, 1 had not, and 2 declined to answer. In summary, of the 3 housekeepers interviewed, only one had college degree, indicating that companies do not require a degree when recruiting for this position. In terms of marital status, of the 31 participants, 12 were single, 12 married, 5 divorced, 1 a widower, and 1 declined to answer.

Table 1: Summary of the results

VARIABLES	RESULTS
Position	3 Housekeepers; 18 chambermaids; 2 valets; 2 housekeeping assistants; 4 general service
Were you already working for the company in March	20 yes/11 no
Was contract suspended? (Of the 20 who were already working for the company)	10 yes/10 no
Were you afraid of losing your job at any time?	25 yes/6 no
Are you afraid of losing your job now?	8 yes /23 no
Are you afraid of being infected by Covid in the work-	19 yes/11 no/1 declined to answer
Are you afraid of dying from Covid?	19 yes/12 no
Are you afraid of contracting Covid and infecting family	23 yes/8 no
Are you afraid that you may need to self-isolate?	15 yes/15 no/1 declined to answer
The Covid pandemic caused...	25 people said fear of not having enough food at home; 24 respondents said money worry; 15 said physical fatigue; 15 said obsession with cleaning; 13 said anxiety symptoms; 9 people reported difficulty getting to sleep (insomnia); 6 stated depressive symptoms; and 6, feelings of anger.
Covid and hygiene measures in my work environment caused...	26 people said smaller work teams; 19 people said increased workload; 19 said work overload; 16 stresses; 14 a reduction in salary; 7 angers.



Do you feel protected in your work environment due to the hygiene measures?	27 yes/3 no / 1 declined to answer
Do you feel happy in your work environment?	29 yes/2 no
Is your work environment friendly?	31 yes
Are you satisfied in your job?	29 yes/2 no
Do you feel motivated?	27 yes/4 no
Are there any psychological problems that affect your personal and professional performance?	5 yes/25 no/1 declined to answer
Length of service with the company	Between 1 month – 25 years
Sex	6 men; 24 women; 1 declined to answer
Level of education	1 complete higher education; 2 incomplete higher education; 17 high school; 4 incomplete high school; 4 elementary school; 1 incomplete elementary school; 2 declined to answer
Marital status	12 singles; 12 married; 5 divorced; 1 widow; 1 refrained

Source: Elaboration by the authors

FINAL CONSIDERATIONS

2020 will probably be marked as the year when all territorial borders disappeared and a virus was able to circulate freely among nations, claiming lives, paralyzing operations, closing schools and universities, causing streets and avenues to become empty, and affecting various sectors and services. In this scenario, besides the many problems of a social and economic nature, issues of a psychological nature have also been observed by several researchers, with such problems having developed directly or indirectly because of Covid-19.

It is important to understand the psychological impacts of the pandemic on people, particularly on workers in tourism, an activity that suffered huge great losses, as this type of damage can last much longer than the disease itself and its physical symptoms.

In view of all the issues raised in this study, it is considered that the proposed goal was reached. It was also found that the pandemic had widespread impact on the dynamics of tourism, and its employees.

Based on the data analysis and on psychology theory, it is concluded that the Covid-19 pandemic had impacts on the mental health of hotel housekeeping profes-

sionals, such as fear of losing their job; fear of contracting the disease at work; and an even greater fear that if infected, they might infect other family members. It is worth mentioning that all the participants reported other symptoms due to the Covid pandemic, such as money worries, fear of not having enough food at home, physical fatigue, and an obsession with cleaning. In addition, they stated that Covid and hygiene measures in the workplace had led to an increased workload, work overload, smaller work teams, and stress, all of which corroborate the literature.

When questioned whether psychological issues had affected their personal performance, 5 participants said yes, 25 said no, and 1 declined to answer. This led the researchers to wonder whether these respondents were really aware what psychological problems are, and the damage they cause in all spheres of life.

Regarding the protocols for good hygiene and cleaning practices, it was said that these are being encouraged to promote the safety of employees and guests (Sousa, 2020). However, there were also reports of claims of reduced work teams, together with the perception of increased workload and work overload, situations that, according to Psychology professionals, will have some effect on the mental health of professionals, causing anxiety, depression and stress (Zanon et al., 2020). This issue can be investigated for future research, to determine whether it affects the execution and satisfactory performance of sanitary protocols? Or whether sanitary protocols are carried out in the way the health authorities and hotel managers describe, and whether they can keep workers and guests safe?

Due to the importance of this discussion, especially in the current context, many of the data found in this study is in line with what is discussed by the WHO, the IWO, and the field of psychology. It is hoped that this study will contribute to furthering this discussion, contributing to the theory the best practice. Which means, that this study may somehow contribute to increasing the concern over the mental health of workers in tourism.

Concerning the limitations of this study, we can mention difficulties contacting those responsible for the hotel housekeeping sectors, as the first contact was made by calling the hotel receptions, and not in person, due to the pandemic. But it was difficult to establish contact with the head housekeepers, perhaps because they were too busy, or because they did not want to take part in the research.

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