

# A Systematic Study of Mental Disorders in Primary Health Care: Their Frequency and Diagnosis in Gulf Countries

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## Abstract

**Background:** Mental health issues are becoming serious issues for personal, community and global healthcare. As among most prevalent health issues are also linked with mild to severe mental health disorders. Like other countries, Arab Region especially Gulf Region is also facing the same issue.

**Aim:** To evaluate mental disorders in primary healthcare settings. Also, evaluate the frequency and diagnosis of mental disorders among the primary healthcare in Gulf countries.

**Method:** A systematic search of databases, including PubMed, Scopus, Web of Science, and CINAHL, was conducted to classify important studies published between 2019 and 2023. The inclusion criteria for this study consisted of selecting articles written in English that specifically examined the mental disorders, mental health challenges and frequency of mental disorders among them. Additionally, the chosen articles had to use well-established scales for measurement and provide valuable data on team dynamics. After initial screening and quality assessment, ten studies were included in the synthesis.

**Results:** Within this systematic literature, four subthemes have been identified as Mental health-challenged Mental Health challenges due to long hours of work; due to burnout; due to workplace violence; due to frequent night shifts; different mental disorders such as anxiety, depression, stress, aggression and burnout. It also identifies the frequency mental disorders among the female primary healthcare providers.

**Conclusion:** It is concluded that the primary healthcare experiences the different psychological disorders such as anxiety, depression and stress, which linked with workload, shifts and long hours. It is also frequently found among the primary healthcare who are experiencing the violence within the work setting. Migrant's primary healthcare found to be more depressed and anxious due to different cultural changes and burnout. It is also examined in the systematic review that female primary healthcare experience more mental disorders and challenges than the male.

**Keywords:** Mental health • Healthcare providers • Challenges • Frequency of mental disorders • Gulf countries • Systematic review

## Introduction

Mental disorders vary from individual to individual and life experience to life experience. The understanding of the nursing staff about mental illness or mental disorders depends on their knowledge and training, which determine the

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nursing staff's attitude toward the patient with mental health issues [1]. Aside from society and culture, the prevalence of discrimination against people with mental illnesses in the Arab world can also be explained by the absence or inefficiency of mental health rules and regulations within the healthcare context. Although incorporating mental health providers into the traditional healthcare system is being introduced progressively as an advance toward the destigmatization of psychological disorders, more must be done to improve health personnel's stigmatizing conduct toward mental illness [2]. During COVID-19, frontline healthcare staff experienced psychological distress, most commonly in Saudi Arabia. The frequency of serious psychological discomfort was greater than 27% in KSA. In multiple regression analyses, factors linked with severe mental health issues were male gender, performing long hours, ages, and years of expertise, area, and use of psychological services. The findings lay the groundwork for providing specialized psychological healthcare services at both the individual and organizational levels to avoid the progression of mental disease [3]. Healthcare professionals have first-hand experience with probable and confirmed cases inside any previously stated establishments. Workers are subjected to great stress, worry, and sadness. Hospital employees, particularly those working in the hospital's emergency room, critical care unit,

and infections ward, are more likely to experience depressive disorders, anxiety, and psychological problems [4]. During the COVID-19 pandemic in China, Kang et al. said that maintaining medical personnel's mental health is critical for managing the worldwide outbreak and protecting their health. The most current local study documenting the emotional impact among nursing in Riyadh, KSA, revealed that professionals who were men were significantly more inclined to be impacted by the psychosocial burden associated with the COVID-19 pandemic [5].

Among health professionals during COVID-19, death anxiety is inversely but significantly correlated with life satisfaction and optimism. More optimistic health professionals displayed higher levels of life satisfaction. Among health professionals, optimism strongly mediates the relationship between life satisfaction and fear of death. Male health workers demonstrated better levels of life satisfaction and optimism than female health workers, although female health workers were shown to have a higher prevalence of death worry [6]. Also, the anxiety about contracting COVID-19 and depression in female undergraduate nursing students was significantly correlated with family support, family income, past experiences of psychological illness, and fear of getting infected. The degree of stress among students was predicted by parental support. Conclusion: Female undergraduate nursing students had moderate anxiety, depression, and stress [7]. Psychiatric nurses frequently experience stress and despair. The treatment of violent, aggressive patients, recurring relapses, and the dismal prognosis of mental diseases are only a few of the stressful situations that psychiatric nurses encounter. The findings showed that psychiatric nurses had varying work-related stress, sadness, and coping mechanisms [8].

Al Ammari et al. state that long shift hours are linked to poor health care and life satisfaction. The cross-sectional study had 1563 nursing participants from different departments. The result suggested that long hours working and night shifts link to poor life satisfaction, poor social life and exhaustion. The night shifts and long hours of more than 12 hours are linked to chronic fatigue and the accidents most frequently reported by nursing. These accidents were caused by drowsiness [9]. Mental health stigma is also carried on in the healthcare setting. A study concluded that their other nursing staff stigmatizes nurses who experience psychological disturbance and have a negative attitude toward them. Many nursing staff experience depression or anxiousness but do not report it as they fear being labelled because they perceive their other nursing staff has a stigma regarding mental health issues [10].

A cross-sectional study conducted by Almazan et al. [11] on the night shift impact on psychological and socialization among the KSA nursing staff. 1521 nursing staff have participated in the study. The result suggested that females assigned night duties scored less on psychological well-being than nursing staff who were given day or fewer hours' duties. A correlational study was conducted by Alsharari et al. [12], which aimed to explore the impact of the night shift on the psychological issues and life satisfaction of the nursing staff of KSA. 1256 nurses participated in the survey. The result suggested that negative correlation between the night shift or long working hours and the quality of life among the

nurses' staff of KSA. Moreover, many physical, emotional, and mental stresses are linked to the clinical setting, which has been considered stressful. Significant sources of stress for nurses were the workplace itself, demanding long shifts, job overload, and interactions with patients and their families—these results aligned with earlier research from Riyadh [11].

Precisely, it is shown that nursing staff experience different mental disorders such as stress, anxiety and depression, but due to a lack of knowledge or stigma, they avoid seeking any treatment for it [12].

## Method

### Research objective

The objective of the research is to evaluate mental disorders in primary healthcare. Also, evaluate the frequency and diagnosis in Gulf countries (Table 1).

### Research question

The research questions of this systematic review are following:

- What mental disorders do primary healthcare providers experience in Gulf countries?
- What is the frequency and diagnosis among the healthcare provider in Gulf countries?

### Literature search strategy

A comprehensive and systematic search of academic databases was shown to identify relevant studies published in peer-reviewed journals. The databases to be searched included PubMed, Scopus and Web of Science. The search terms were carefully chosen to encompass relevant concepts, such as "Mental Healthcare," "Mental Disorder," "Healthcare Providers," "Nurses," "Mental Health challenges," and "Gulf countries" (Table 2).

Three renowned databases Scopus, PubMed and Web of Science were used to find pertinent research publications the chosen search to ensure currency and relevance concentrated on papers published between 2019 and 2023. According to the findings, Scopus produced the most research articles, totaling 19,764. PubMed added 5,691 items to the initial pool, whereas Web of Science added 5574. These data highlight the exhaustiveness of the literature search and establish a strong foundation for the succeeding stages of the systematic review (Figure 1).

### Inclusion and exclusion criteria

The inclusion and exclusion criteria are the fundamental standards for research that show how certain studies are used and how they are not used in this literature review. The inclusion requirements include using English-language communications, having full-text papers published between 2019 and

**Table 1.** Syntax search.

Syntax 1	"Mental health," "Primary healthcare provider," "Gulf countries:"
Syntax 2	"Mental health issues," "Mental disorders", "Primary healthcare provider," "Gulf countries:"
Syntax 3	"Mental health," "Mental disorders", "Frequency of disorder", "Primary healthcare provider," "Gulf countries:"
Syntax 4	"Mental health Challenges," "Mental disorders", "Primary healthcare provider," "Gulf countries:"

**Table 2.** Statistics from the data base.

No	Database	Syntax	Year	No of Researches
1	PubMed	Syntax 1	2019 - 2023	2224
		Syntax 2		2455
		Syntax 3		580
		Syntax 4		432
2	Scopus	Syntax 1		5,616
		Syntax 2		5,550
		Syntax 3		5,844
		Syntax 4		2,754
3	Web of Science	Syntax 1		1,809
		Syntax 2		1.68
		Syntax 3		1649
		Syntax 4		436

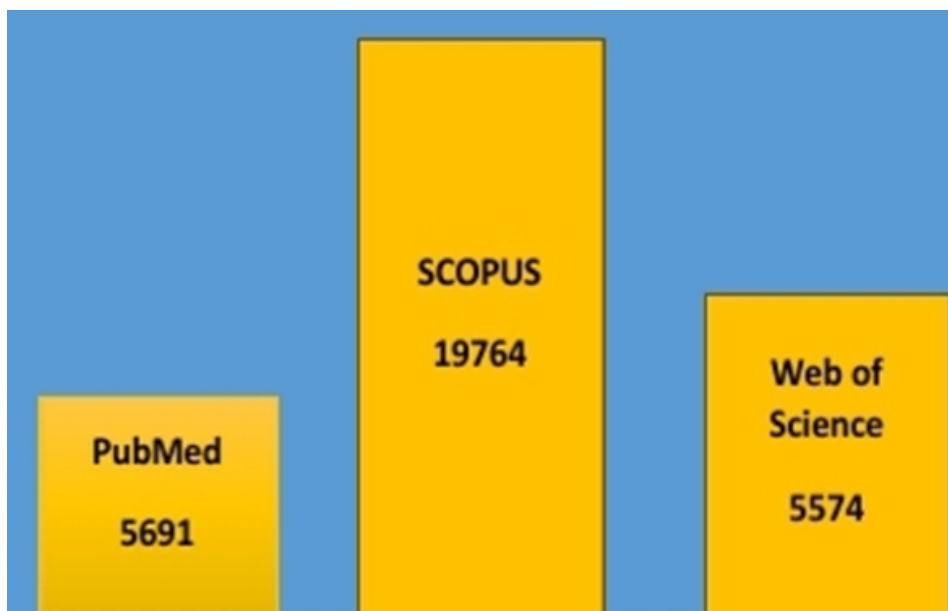


Figure 1. Pictorial representation of research data base.

Table 3. Selected studies for SR (Systematic Review)

No	Author	Research	Year
1	Hasan, Elsayed & Tumah	Occupational stress, coping strategies, and psychological-related outcomes of nurses working in psychiatric hospitals.	2019
2	Alyousef & Alhamidi	Exploring experiences of workplace violence and attempts to address violence among mental health nurses in the Kingdom of Saudi Arabia.	2022
3	Zaghloul et al	Mental health status of expatriate nurses in northcentral Saudi Arabia.	2019
4	Alsolais et al	Risk perceptions, fear, depression, anxiety, stress and coping among Saudi nursing students during the COVID-19 pandemic.	2021
5	Al Ammari et al	Mental health outcomes amongst health care workers during COVID 19 pandemic in Saudi Arabia	2021
6	Sultan et al	Impact of COVID-19 pandemic on psychological health of a sample of the health care workers in the western region of Kingdom of Saudi Arabia.	2022
7	Aruta et al	Measuring mental well-being among frontline nurses during the COVID-19 crisis: Evidence from Saudi Arabia	2023
8	El-Tallawy et al	Prevalence and risk factors associated with mental health symptoms among anaesthetists in Saudi Arabia during the COVID-19 pandemic.	2022
9	Titi, Wahabi & Elmorshed	Mental health impact of the first wave of COVID-19 pandemic on healthcare workers in 12 Arab countries	2022
10	Aldhamin & Al Saif	The mental health of healthcare workers in GCC countries during the COVID-19 pandemic: A systematic review and meta-analysis.	2022

2023, and writing about nursing violence.

Additionally, all research that does not address the function of nurses in preoperative assessment, is not written in English literature, is older than the year range of 2019, and uses grey articles for limited edition papers that do not include all the material is excluded from consideration.

### Study selection

Data search is built on data identification, monitoring, maintenance, formulation, and synthesis principles. The selection of studies and the identification of the search engine form the basis of the first stage of the data search. Identification is performed with inclusion and exclusion criteria. The research uses several databases, search engines, and literary libraries. For literature searches, the syntax can be entered into the search field (Table 3).

### Identification of studies via databases and registers

The solution to the countless literary conundrums is the foundation for quality evaluation. This thorough literature evaluation contains much information on research methodology and the study to exert pressure lies. The concept is based on systematic evidence and the caliber of the selected study, including

data from the literature, peer-reviewed journals, total evaluation, and quality management (Figure 2).

### Data extraction

Extracting data requires using a tool with specific inclusion and exclusion criteria. These goals provide complete details on the empirical evidence and specifics about the chosen scholars. The extracted data included study characteristics (e.g., authors, year of publication, study design), participant characteristics (e.g., sample size, healthcare profession), measures used to assess job satisfaction and burnout, and key findings related to job satisfaction, burnout levels, and their impact on team dynamics (Table 4).

### Quality assessment

The included studies' methodological quality and bias risk were evaluated using relevant quality assessment tools adapted to various study designs. This process ensured that the research was a compact and trustworthy source of knowledge.

The studies included in the systematic review have appropriate descriptions about studies, and the method section is described clearly and properly. Overall,

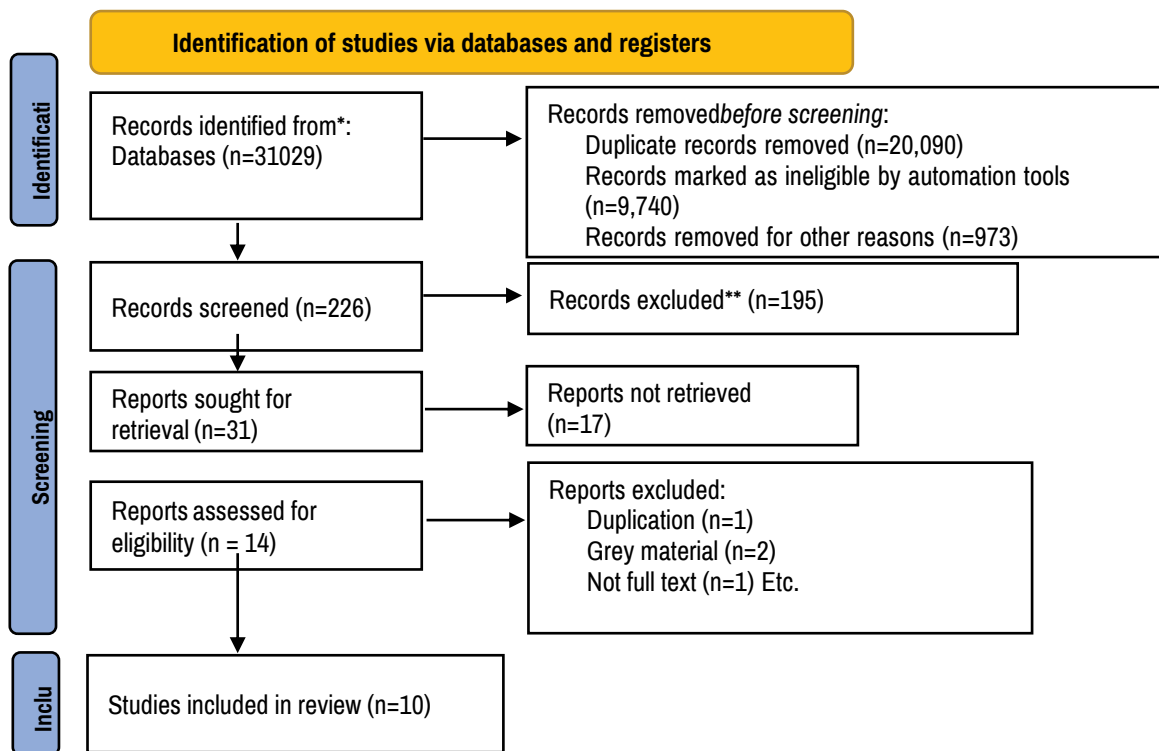


Figure 2. Identification of studies via database.

Table 4. Research matrix.

Author, year	Aim of study	Methodology	Sample	Setting	Result
Hasan, a. A., elsayed, s., & tumah, h. (2019).	The aim of the study was to assess workplace stress, coping strategies, and levels of depression among psychiatric nurses	A descriptive correlation design was conducted	70 psychiatric nurses working in mental health settings	Port-said, Egypt	The results revealed that psychiatric nurses had moderate levels of work-related stress and depression, and exhibiting different coping strategies. Stress and depression are prevalent among psychiatric nurses.
Alyousef, s. M., & alhamidi, s. A. (2022).	This study explores the experiences of mental health nurses with work-related violence and attempts to combat this violence in the context of inpatient mental health facilities in Saudi Arabia.	This research comprises a qualitative exploratory study consisting of semi structured interviews	16 participants	Kingdom of Saudi Arabia	This study reveals that nurses experience violence in accordance with two main themes and subthemes: experiences of workplace violence, the influence of violence on work settings, and efforts required to combat violence.
Zaghloul, M. S., Saquib, J., almazrou, A., & Saquib, N. (2019).	Mental Health Status of Expatriate Nurses in Northcentral Saudi Arabia	Electronic survey	Nurses (n =999) were from India (54.1%), the Philippines/Indonesia (37.0%), Pakistan (4.9%) and Arab countries (4.0%).	Governmental hospitals in Al-Qassim, Saudi Arabia	Arab nurses were five times (OR = 5.65; 95% CI 2.40-13.31) more likely to suffer from severe depression compared to Filipino/Indonesian nurses (reference group). Results were similar for stress. Depression and stress varied significantly by nationality among expatriate nurses.
Alsolais, a., alquwez, n., alotaibi, k. A., alqarni, a. S., almalki, m., alsolami, f., & cruz, j. P. (2021).	This study assessed the perceptions of risk, fear, mental health status, and coping strategies among Saudi student nurses amid the covid-19 pandemic.	Using an online survey, the mental health of the students was assessed by the depression, anxiety and stress scale short form version, whereas the coping was assessed by the brief-coping orientation of problem experienced scale.	A total of 1057 nursing students were eligible for the study.	KSA	The students had modest risk perception and fear of contracting covid-19. "Religion" was reported as the most frequently used coping strategy. Approximately 43.3%, 37.2%, and 30.9% of the respondents manifested some degree of depression, anxiety, and stress, respectively. Poor covid-19 knowledge, perceived seriousness of covid-19 in Saudi Arabia, perceived risk of covid-19 infection, and the use of some coping strategies were predictors of fear. Knowing someone infected with covid-19, fear, and several coping strategies predicted students' mental health.
Al ammari, m., sultana, k., thomas, a., & al swaidan, l., & al harthi, n. (2021).	Aimed to assess the mental health outcomes and associated factors among health care workers during covid 19 in Saudi Arabia.	A cross-sectional survey of health care workers from tertiary care and ministry of health centres across the central, eastern, and western regions of Saudi Arabia. There were 1,130 participants in the survey, and we collected demographic and mental health measurements from the participants.	, here were 1,130 participants in the survey, and we collected demographic and mental health measurements from the participants.	In Saudi Arabia.	The scores on the phq-9 showed that the largest proportion of health care workers (76.93%) experienced only normal to mild depression (50.83 and 26.1%, respectively). The scores on the gad-7 showed that the largest proportion of health care workers (78.88%) experienced minimal to mild anxiety (50.41 and 28.47%, respectively). The scores on the isi showed that the largest proportion of health care workers (85.83%) experienced absence to subthreshold insomnia (57.08 and 28.75%, respectively). The risk factors for depression in health care workers were Saudi, living with family, working from an isolated room at home and frontline worker. For anxiety, being female was risk factor and for insomnia, being frontline worker was risk factor.

Sultan, s., bashar, a., nomani, i., tabassum, a., iqbal, m. S., fallata, e. O., ... & rheem, s. (2022).	The aim of the study was to evaluate the impact of the covid-19 pandemic on the psychological health of health care workers	Completed a survey containing measures of depression, anxiety and stress (using depression anxiety and stress-21 scale [dass-21]) and questions regarding potential predictors such as the role of covid-19 perception, availability of mental health support and work-related factors. Pearson $\chi^2$ test revealed factors associated with the presence of significant psychiatric symptoms.	During the months of November and December, 283 health care workers participated	In the kingdom of Saudi Arabia.	Among the participants, 17.3% screened positive for depression, 26.2% for anxiety and 17.3% for stress. Nurses reported significantly more depression, anxiety and stress than doctors. Those who received mental health support reported significantly lesser depression, anxiety and stress. Those who felt that quality of life was heavily impacted due to covid-19 reported significantly high depression, anxiety and stress.
Aruta, j. J. B. R., almazan, j. U., alamri, m. S., adolfo, c. S., & gonzales, f. (2023).	The objective of this study was to examine the structural validity, convergent validity, and reliability of the warwick-Edinburgh mental well-being scale (wemwbs) in professional nurses amidst the covid-19 crisis	Survey design	Data were collected from 413 nurses in Saudi Arabia using a cross-sectional online survey	In Saudi Arabia.	Consistent with the original version, results of the confirmatory factor analysis revealed a unidimensional structure of the wemwbs. Support for convergent validity was found as the wemwbs significantly correlated with measures of burnout and compassion satisfaction. In terms of reliability, all wemwbs items yielded high internal consistencies suggesting that the 14 items were robust indicators of mental well-being. In response to the challenges of the covid-19 crisis, the current study offers a psychometrically sound instrument that can be utilized in screening the mental well-being of nurses in the days of a public health crisis.
El-tallawy, s. N., titi, m. A., ejaz, a. A., abdulmomen, a., elmorshedy, h., aldammas, f., ... & alqatari, a. (2022).	Aimed to evaluate mental health problems among anaesthetists in Saudi Arabia by quantifying the severity of distress, anxiety, and depression symptoms.	The study is a cross-sectional, hospital-based online survey. Distress symptoms were assessed using the impact of event scale-revised questionnaires (ies-r), and depression and anxiety symptoms were assessed using the patient health questionnaire-4 (phq-4). Multivariate logistic regression was used.	A total of 296 respondents completed the survey.	In Saudi Arabia	Our findings highlight the mental health vulnerabilities of anaesthetists in Saudi Arabia. Lack of confidence in infection control measures, as well as stigmatization, were found to be risk factors for distress, anxiety, and depression symptoms during the pandemic.
Titi, m., wahabi, h., & elmorshedy, h. (2022).	The present systematic review to evaluate the overall prevalence of depression in migrant workers	A systematic review of Saudi, gulf cooperation council (gcc) search was conducted in 2022 for English articles on the prevalence of depression in migrant workers, published in the scientific information database (sid), PubMed, Scopus, and web of science.	-10 studies	Gulf cooperation council (gcc).	The pooled depression prevalence among the migrant workers in the gcc was 21%. The review findings identified some risk factors contributing to the high depression prevalence among migrant workers. Some of the contributing factors identified by various studies include workload, stressful working environment, outstanding loans, substance use, and language barriers.
Aldhamin, r. A., & al saif, a. Z. (2022).	The aim of this study was to summarize the available evidence on the prevalence of stress, burnout, anxiety and depression among healthcare providers	A systematic review and meta-analysis. Searched PubMed, psycinfo, Scopus, and google scholar for related studies published between January 2020 and April 2021	19 studies	In the gulf cooperation council (GCC) countries (KSA, Bahrain, Kuwait, Oman, Qatar, and the united Arab emirates	The pooled estimate of prevalence for moderate to severe anxiety as reported using gad-7 was 34.57% (95% ci = 19.73%, 51.12%), that for moderate to severe depression using phq-9 was 53.12% (95% ci = 32.76%, 72.96%), and that for moderate to severe stress using the 10-item perceived stress scales was 81.12% (95% ci = 72.15%, 88.70%). Meta-analysis was not performed for burnout due to the small number of identified studies and the different tools used; however, the highest prevalence was reported at 76% (95% ci = 64%, 85%). Overall, a positive trend was observed over time for moderate to severe anxiety and depression, $p = 0.0059$ and $0.0762$ , respectively.

Table 5. Assessment of the literature quality matrix.

Sr.	Author	Are the selection of studies described appropriately	Is the literature covered all relevant studies	Does the method section describe?	Were findings clearly described?	Quality rating
1	Hasan, Elsayed & Tumah	Yes	Yes	Yes	Yes	Good
2	Alyousef & Alhamidi	Yes	Yes	Yes	Yes	Good
3	Zaghloul et al	Yes	Yes	Yes	Yes	Good
4	Alsolais et al	Yes	No	Yes	Yes	Good
5	Al Ammari et al	Yes	Yes	Yes	Yes	Good
6	Sultan et al	Yes	Yes	Yes	Yes	Good
7	Aruta et al	Yes	Yes	Yes	Yes	Good
8	El-Tallawy et al	Yes	Yes	Yes	Yes	Good
9	Titi, Wahabi & Elmorshedy	Yes	Yes	Yes	Yes	Good
10	Aldhamin & Al Saif	Yes	Yes	Yes	Yes	Good

most of the studies included a clear description of the selection process, adequate coverage of the literature, and a detailed methodology section.

Furthermore, the majority of the time, the study's findings was clearly stated. As a result, these studies were given a "Good" quality rating (Table 5).

**Table 6.** Themes and sub-themes for the results of the systematic review.

Themes	Sub-themes
1	Mental health-challenged
	1.1 Mental Health challenges due to long hours of work
	1.2 Mental Health Challenges due to burnout
	1.3 Mental health Challenges due to workplace violence
	1.4 Mental health Challenges due to frequent night shifts
2	Mental Disorders among the Primary Healthcare during Pandemic
	2.1 Anxiety among the Primary Healthcare
	2.2 Depression among the Primary Healthcare
	2.3 Stress among the Primary Healthcare
	2.4 Psychotic Features of the Psychiatric Primary Healthcare
	2.5 Aggression among the Primary Healthcare
3	Mental Disorders among the Migrant Primary Healthcare
4	Frequency of Mental Disorders among the Female Primary Healthcare

## Results

The following sub-themes have been observed among the studies, including in the systematic review (Table 6).

## Discussion

Gulf Cooperation Council (GCC) members are the Gulf nation of Qatar, Saudi Arabia, the United Arab Emirates, Oman, Kuwait, and Bahrain. These countries are located in the Middle East and are considered high-income. They share many social, religious, and ethnic characteristics. Furthermore, the GCC countries confront numerous identical health issues and possibilities.

Inadequate spending for mental health services may impede the promotion of psychological health services and meeting community needs. A recent systematic analysis of mental health issues among the population in the KSA during the pandemic found a lower incidence than in our study. Depression, stress, and anxiety were all reported to have more than 20% rates. The discrepancy between previously published data and the current findings could be attributed to a different search time range.

According to a study, migrant healthcare workers are more likely to experience psychological distress. According to the study, migrants have faced various social, cultural, economic, and psychological consequences due to their migration. The migration of humans is defined as the relocation of people from one region to another to permanently or temporarily reside in a new location (a geographic area). The most common type of human movement worldwide is internal.

Furthermore, various psychiatric illnesses have been discovered in basic care. The depression frequency in the present investigation was below the range of earlier estimates published among comparable populations in other Gulf nations, such as Bahrain, where (more than 10%) many migrant workers were depressed. According to Hasan et al. (8), the total frequency of depressive disorders among migrant workers in Qatar was 39% in 2021.

All four studied mental health outcomes (anxiety, stress, depressive disorders, and burnout) had a wide prevalence range in the current study. This could be clarified through various factors, including the timing of data collection. For example, the lowest recorded frequency of anxiety was in research done in February 2020 in KSA before the arrival of the first occurrence in the country.

Furthermore, the manifestation of psychological wellness challenges, emotional discomfort, and even clearly defined mental diseases varies considerably in difficulties, intensity, complexity, related disability, duration, and hazards. In most circumstances, a diagnosis cannot be easily equated with the requirement for immediate intervention. Due to the substantial comorbidity that is usual for mental disorders, the GP may encounter even more difficulties determining the association between certain conditions and evidence in favour of specific treatments.

Female healthcare workers are more likely than the general population to be confronted with various risks related to psychological disorders, including inconsistent doctor-patient relationships, frustration at the prospect of a patient passing away, and greater government control of professional activities.

Furthermore, COVID-19 places an extra psychological load on healthcare personnel, such as fear of infection, social isolation, and a sense of urgency at work. Previous research has revealed that healthcare staff face considerable emotional burdens and psychological illnesses as a result of the COVID-19 epidemic. One key pandemic problem is reducing the mental health damage caused by COVID-19. However, research has mostly concentrated on analysing the mental reactions of the complete medical staff, with little emphasis paid to primary healthcare professionals [5].

## Limitations

As only published papers were considered, this systematic review is constrained by the possibility of publication bias. This can lead to removing unpublished or grey material, which might have offered insightful information about emergency planning and response capability in Gulf countries.

## Suggestions

To minimize this restriction, future research can include utilizing unpublished data and reports from governmental and non-governmental organizations and consulting subject-matter experts. It is also suggested to identify the factors associated with the mental health challenges face by the primary healthcare.

## Recommendations

It is recommended that future researchers explore the factors associated with the migrants 'mental health. Also, identify the frequency of mental health disorders among the gender, age and qualification of primary healthcare. Also, consider the gap of research to explore a more authentic link with psychological assessment and reduce the complications experience by them.

## Conclusion

It is concluded that the primary healthcare experiences the different psychological disorders such as anxiety, depression and stress which linked with workload, shifts and long hours. It is also frequently found among the primary healthcare who are experiencing the violence within the work setting. Migrant's primary healthcare found to be more depressed and anxious due to different cultural changes and burnout. It is also examined in the systematic review that female primary healthcare experience more mental disorders and challenges than the male.

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