



Phenomenology of COVID-19 Pandemic Effects on the Behavior of Staff in the Banking Industry

Sadegh Hedayati^{1*} | Hossein Damghanian² | Mohsen Farhadinejad³ | Abbas Ali Rastgar⁴

1. Corresponding Author, Department of Management, Faculty of Economics, Management and Administrative Sciences, Semnan University, Semnan, Iran. Email: sadegh.hedayati@semnan.ac.ir
2. Department of Management, Faculty of Economics, Management and Administrative Sciences, Semnan University, Semnan, Iran. Email: hdamghanian@semnan.ac.ir
3. Department of Management, Faculty of Economics, Management and Administrative Sciences, Semnan University, Semnan, Iran. Email: farhadi@semnan.ac.ir
4. Department of Management, Faculty of Economics, Management and Administrative Sciences, Semnan University, Semnan, Iran. Email: a_rastgar@semnan.ac.ir

ARTICLE INFO

Article type:
Research Article

Article History:
Received 20 October 2021
Revised 01 July 2022
Accepted 04 July 2022
Published Online 28 February 2023

Keywords:
Behavior of staff,
Consequences of COVID-19,
Phenomenology,
Qualitative research methodology.

ABSTRACT

The banking industry staff gained valuable experience during the COVID-19 epidemic. The aim of this study was to investigate the consequences of Coronavirus on employee behavior in the COVID-19 epidemic. To achieve this goal, a study with a qualitative approach and with a phenomenological strategy was conducted. In this study, two main categories of intrapersonal reactions and interpersonal responses were characterized, with the former including six subcategories (negative emotions, change in structure of needs, obsession, stress, fear, and disruption in organizational commitment) and the latter involving three subcategories (abnormal social behavior, abnormal occupational behavior, and abnormal communicative behavior). The variables of fear, stress, burnout, and aggression were exposed to the highest frequency. This study showed that upon the occurrence of novel crises, the organizations should take strategies based on crisis management, e.g., immunizing the workplace, showing emotional and financial support to the personnel, and asking the personnel to change their behavior as members of the community.

Cite this article: Hedayati, S., Damghanian, H., Farhadinejad, M., Rastgar, A. A. (2023). Phenomenology of COVID-19 Pandemic Effects on Behavior of staff in the Banking industry. *Iranian Journal of Management Studies (IJMS)*, 16 (2), 481-500.
DOI: <http://doi.org/10.22059/ijms.2022.332704.674804>



1. Introduction

A new virus emerged in Wuhan, China, at the end of 2019 and caused an infectious respiratory disease that quickly influenced societies worldwide. The speed and range of fatality of Coronavirus astonished all the governments in the world. Based on the published statistics, this virus has led more than 4'480'625 people to death by the date of posting the present article, August 26th, 2021 (World meter, 2021). The pandemic of COVID-19 suddenly changed all daily facts of the world and influenced jobs and businesses worldwide. One of the sectors drastically affected by this crisis was the countries' banking industry. Due to the importance and performance of the banking industry in the financial cycle and the survival of the businesses, it seemed infeasible to close branches of the banks and suspend their services like other occupations. Hence the personnel of this sector experienced an exclusive condition. The staff of banks was directly exposed to Coronavirus; therefore, a study on the consequences of COVID-19 disease on the behavior of this group of staff might highly contribute to the evaluation and management of personnel's behavior and, subsequently, organizational resilience rather than the production of scientific content. The status of Iran is incomparable with other countries in this regard. The economy of Iran encountered the pandemic of Coronavirus while the strictest international sanctions was in a critical condition, which deprived the government of any facilities for implementing economic survival plans and supplying essential goods to the affected groups. To prevent bankruptcy and economic catastrophe, Iran must keep some sectors of its economy active, such as medical centers, service organizations, factories, and banks, to reduce heavy human mortalities.

The conditions of the employees in Iranian banks have been so different from other personnel. The employees of Iranian banks had to perform their administrative duties without any knowledge of the disease and protective equipment. Meanwhile, due to infrastructure problems and insufficient investment in the previous years, digital and electronic banking in Iran has made little progress, and banking operations in Iran are based on the presence of customers in the branches. Although some mobile and internet banking services are available in Iran, they are still far from digital banking and lack the key businesses and technical bases for implementing digital banking (Gholipour Soleimani et al., 2019). Regarding the expansion of Covid-19 disease throughout the world and its tremendous impact on organizations, studying and recognizing the effects and consequences of the pandemic on the personnel of other organizations seems to have absolute priority of organizational researchers now (Rudolph et al., 2021). What adds to the importance of the studies like the present research is the functional aspects in the assessment and regulation of the relations among staff and perceived behaviors of the team in the organization (Chanana, 2021a). Despite the importance of studies and the requirement for the investigation of the effects of Coronavirus on the organizations, particularly the banking system in Iran, such studies are rare in academic resources. There are four critical gaps in the studies in the section on the consequences of this crisis on staff behavior in the banking industry.

Primarily, there are insufficient experimental investigations about the influences on the behavior of the banking industry staff in the critical conditions in Iran. The studies designed based on individuals' lived experiences are the studies regarded as crucial to the newly-emerged phenomenon (Alkaissi et al., 2022; Liu & Liu, 2021). Based on the implemented analyses, the critical events directly threatening human health may bring about inevitable consequences for all the organizations (Adzic & Al-Mansour, 2021; Kramer & Kramer 2020). It seems to have catastrophic adverse effects on customer-oriented service organizations such as the banking industry (Marcu, 2021). Secondly, reviewing the literature on previous crisis management demonstrates that the world's research ecosystems have never forecasted the prevalence of a contagious disease in the global area. Hence, it has not been ready to confront it, either. Planning has a vital role in effective accountability to crisis and the feasibility of improving quick performance in the post-crisis term (Hassankhani et al., 2021). Providing an effective response requires familiarity with the dimensions of the COVID-19 crisis. Therefore, identifying the behavioral consequences of this crisis on personnel is a vital research issue for crisis management in the Iranian banking industry.

Thirdly, this crisis is deemed a unique, influential event in world history from a typology viewpoint. In the absence of concepts and data in the literature, this research intends to identify the consequences of COVID-19 on the personnel's behavior using inductive analysis. Fourthly, the banking industry in Iran now encounters three simultaneous crises of international sanctions, a collapse in the market of assets and stock, in addition to the prevalence of the COVID-19 pandemic

(Abdoli, 2020). Hence, by studying the rendered research and the exclusive conditions of the banks in Iran, the research gap and relative insufficiency of research are evident about the impact of this disease besides the aforementioned crises on the behavior of staff in the banking industry during COVID-19. While the consequences of COVID-19 may differ from any country, organization, and industry to others, and considering the mentioned research gap, the main issue of the present study recognizes the influence of the COVID-19 pandemic on the behavior of the staff in the banking system of Iran. Confronting the Coronavirus crisis, having the researchers directly involved in the research problems, making close observations, and deepening the behavior of personnel have led to the formation of the research questions as follows:

- 1) What are the effects of COVID-19 disease on personnel's behavior in an organization?
- 2) How must staff respond to the consequences of this pandemic disease?
- 3) What are the personnel's expectations and supportive policies in their organization?
- 4) How did personnel's behavior change during the pandemics?

Finding responses to these questions may be assumed as a model for policy-makers in human resources and managers concerning unexpected crises in the workplace and staff. As a result of quick morbidity due to Coronavirus, all organizations and jobs lost their common working trend (Faraj et al., 2021). They started their formal work via a digital process with the aid of technology, which was a great challenge for the organizations to be capable of controlling and managing the impact of morbidity of COVID-19 disease simultaneously (Chick et al., 2020; Thomas et al., 2021). At the same time, their staff could also guarantee their survival according to organizational goals (Kaushik & Guleria, 2019). Furthermore, while the final stage of this pandemic is already unknown, it is expected that the present study could assist the policy-makers and determiners of the banking system of the countries in handling and managing the present and future crises.

2. Research Literature

COVID-19 disease is much beyond a health crisis, and it can be considered an unprecedented socioeconomic crisis (Shoss et al., 2021). Focusing on each country in direct contact with the pandemic diseases, we find that these trends may create destructive economic and political impacts with severe and long-term social injuries. Yu et al. (2021) perceived in a quantitative study titled "Impacts of the Pandemic on Employees' Work Stress, Well-Being, Mental Health, Organizational Citizenship Behavior, and Employee-Customer Identification" that the employees who have to be in direct contact with customers due to the nature of their job and in the process of serving others experience mental burden and great stress resulting from four concerns: physical concerns, mental concerns, financial concerns and the anxieties related to social view leading to stress and performance reduction. The pressure resulting from the probability of infection, conveying the disease to family and friends, income decrease (such as unsustainable employment, unpaid leave), and negative approach to the society contribute to service-providing occupations. Such occupational stress creates a negative relation between the occupational viewpoint of personnel, job performance, and the function of the hotel company (Yu, 2021). Through a cross-sectional survey, Shechter et al. (2020) questioned the medical service provided at the peak of the COVID-19 pandemic in New York. The achievements of their study demonstrated that approximately 75 percent of the participants had symptoms of moderate insomnia, 74 percent were anxious about transferring COVID-19 to their families and beloved ones, and 65 percent felt significant loneliness. In addition, more than 60 percent of the participants had some concerns such as the health of family/friends, keeping social distance from family, no control or no assurance, and no confidence about the situation of COVID-19 among their colleagues. Moreover, the participants expressed their sadness regarding a shortage of personal protection equipment, deficiency in diagnostic test facilities, and lack of health instructions to treat COVID-19. Furthermore, medical service providers adopted confrontational behavior such as sports activities, involvement with region, and spirituality based on belief and dialogue to handle stress (Shechter, 2020).

Sahni (2020) discussed the impact of COVID-19 on the behavior of staff of public services industries, compliance methods of organizations, and individuals in Saudi Arabia with such changes and challenges. While expressing that the impact of Coronavirus on the human body is recognized well and more researches are in progress, the researcher believes that it is not evident how this virus could influence human behavior and social and mental status. The findings of the research show that

all participants' stress levels were moderate to high due to the fear of unknowns, communication problems, non-assurance about the present and future, and loss of resources such as time and energy. These points may frustrate the staff's mental health, leading to long-term stress or psychosomatic diseases. The research achievements support the idea that there is a crucial need for psychosocial support, community support, and an effective system of organizational support to protect the emotional and mental health of personnel (Sahni, 2020). Probst et al. (2020) reviewed the stressful economic factors and the behaviors to prevent COVID-19. To fight the prevalence of Coronavirus in the USA, a list of preventive health behaviors has been provided, including social distancing, washing hands frequently, and limiting unnecessary trips. The research demonstrated that occupational and financial insecurity negatively affect the execution of the recommended instructions. Compared to their counterparts suffering from economic insecurity, employees with more financial security probably observed the said instructions. The achievements emphasized developing the policies to review the public health crisis and simultaneously protecting personnel to control the stressful economic factors (Probst et al., 2020).

Abbas et al. (2021) discussed the mental-economic effects of occupational insecurity among the personnel of the tourism industry in Pakistan during the COVID-19 pandemic. The results showed that occupational insecurity negatively relates to self-esteem and positively to economic deprivation. In addition, social support was found to significantly influence occupational insecurity, mainly mental health, self-esteem, economic self-efficiency, and life satisfaction (Abbas et al., 2021). Many psychological disorders have been reported in this era, such as confusion, depressed spirit, memory disorder, fear, anxiety, depression, distress, unrest, and even suicide (Rogers et al., 2020). The isolation caused by social distancing can be assumed as a social problem and a severe challenge for public organizations. The constant isolation and lack of social interaction may also be related to a group of risk factors for health, e.g., adverse healthcare consequences, rising premature mortality, and suicide (Roychowdhury, 2020). In a phenomenological study done at the University of Medical Sciences in Spain, negative mood and temperament, uncertainty, nervousness, and fear were reported in the analysis of emotions of the students of nursing discipline that joined voluntarily to give services in Spain's healthcare system (Collado-Boira et al., 2020). Conducting a study on the experiences of healthcare service providers in Wuhan city during this crisis denotes burnout due to overworking, lack of protective equipment, fear of infection and transferring the disease to others, a feeling of disability in addressing the status of patients, and the administration of relations under such stressful conditions (Liu et al., 2020).

Hao et al. (2020) have summarized nurses' experiences in the healthcare unit for COVID-19 in a hospital specified to care for COVID-19 patients in China in four groups. The first group included negative emotions existing in the first phase, such as burnout, nervousness, helplessness due to working at a high level, fear, anxiety, and concern for patients and family members. The second group comprised self-copying styles such as psychological adaptation, life, and humanitarian measures, team support, and logical cognition. The third group was growth under stress that included rising emotion and acknowledgment, development of professional responsibility, and self-contemplation. Finally, the research found that positive emotions coincided with negative emotions in nurses (Hao et al., 2020). Following the morbidity of Coronavirus throughout the world and two cases of mortality in Qom city on February 19th, the Iranian authorities notified morbidity of Coronavirus in this country. Ministry of Health, Treatment, and Medical Sciences did not assume any suspicious death relating to Coronavirus before the above-said date. The morbidity of Coronavirus was spread very quickly in Iran, and the virus-infected all 31 Iranian provinces by March 5th, 2020. The coincidence of COVID-19 with its worrisome results in Iran and the highest unilateral punishments imposed by the U.S. on Iran created many barriers in the Iranian national healthcare and treatment sector (Raofi et al., 2020). Iran is also a country that has been highly affected by Coronavirus pandemic; the Iranian national healthcare and treatment sector encountered a problem fighting against the pandemics because of imposed international sanctions in recent years (Jin, 2020). The shortage of medical, pharmaceutical, and laboratory equipment in Iran has led to an overload of epidemics and a multiplicity of fatalities (Tengilimoğlu et al., 2021).

Some factors have increased public anxiety levels in Iran, including lack of definitive treatment, distribution of improper information, general unawareness of the importance of the virus, and shortage

of medical healthcare equipment such as antiseptics and masks (Shahriarirad et al., 2021). A survey carried out in Rafsanjan city suggested that at least 35 percent of participants reported symptoms of anxiety, sleep disorder, and concern for death (Hossini Rafsanjanipoor et al., 2021). There are few studies regarding staff's behavioral impact and mental health in Iranian organizations during the COVID-19 pandemic. The findings from an investigation conducted among medical students showed that this group was subject to a high risk of mental diseases because of their lesser experience than professional medical staff. In fact, very intensive anxiety was observed among the participants (Vahedian-Azimi et al., 2020). The conclusion of previous studies indicates that the design and performance of a survey on behavioral consequences of COVID-19 disease are vital in the banking system because staff's psychological and behavioral responses may play an essential role in managing the current crisis (Balkhi et al., 2020; Mohammadi et al., 2020; Parlapani et al., 2020).

A phenomenological study was conducted to examine the experiences of the nurses in the coronary care unit in Indonesian hospitals. Negative psychological feelings, the need for more self-preparation, and physical and intellectual support were highlighted (Sutejo et al., 2022). In a study made on the employees of Hong Kong Airlines during the pandemic, it was observed that the stress level and the adverse effects on the employees' mental health increased (Kim et al., 2022). A study conducted to examine the emotional and behavioral situation of Japanese adolescents during Covid-19 pandemic demonstrated that this disease led to an increase in anxiety and depression (Bera et al., 2022). The results of a study conducted to assess behavioral health and quality of life during the COVID-19 epidemic in the United States showed that in addition to addressing concerns about the physical health consequences of COVID-19, the long-term accumulation of stressors should be considered. More attention should be paid to the disturbing impact of this crisis on behavioral health and quality of life (Hansel et al., 2022). A similar study by Indian healthcare professionals demonstrated a high prevalence of depressive and anxiety symptoms and poor quality of life during the COVID-19 epidemic (Suryavanshi et al., 2022). A study conducted in Iran to respond psychologically to the COVID-19 crisis demonstrated that during the COVID-19 epidemic, the fear and anxiety caused by COVID-19 could affect individuals' psychological-behavioral responses in a way that there was a significant positive correlation between perceived stress of COVID-19 and psycho-behavioral responses. Those who perceived high pressure followed the guidelines more. The death of a family member due to COVID-19 infection has also been recognized as a significant source of stress (Sharif Nia et al., 2022).

3. Research Methodology

The researchers selected methodology based on interpretative philosophy presupposition (as a concept derived from social interactions) for conducting this study (Allen-Collinson & Evans, 2019 ; Lukka, 2014). Naturally, these assumptions are examined via a qualitative exploratory approach with the related procedures (Bhattacharjee, 2012; Lune et al., 2017). This exploratory viewpoint relied on the judgment and comments of researchers. This approach needs a road map or phenomenological plan. It uses the hidden tactic of content analysis of interviews as an implemented text, and this leads researchers to qualitatively analyzing data within a coding framework (Bengtsson, 2016). The researchers considered phenomenology a practical roadmap and designed a strategy for the current study concerning the research sample based on the researchers' judgment of the conscious experience of ordinary subjects. Phenomenology is one of the strategies of qualitative studies focused on sharing a lived experience in a specific group. This strategy mainly aims to describe the nature of any particular phenomenon (Abakpa et al., 2017; Neubauer et al., 2019). Following Strauss and Corbin school, researchers took the three-step systematic approach to open, selective, and axial coding in this field by integrating newer techniques (Vollstedt & Rezat, 2019).

Finally, they analyzed the validity and reliability of the results of this qualitative research by a checklist Guba and Lincoln (Gholipour Soleimani et al, 2019). As usual, interviews were performed with a group of individuals that possessed first-hand information about an event, situation, or experience. Subjectivity and knowledge are considered important in perception and interpretation based on participants' viewpoints in the investigations of phenomenological studies (Qutoshi, 2018). Four judgment criteria were utilized to analyze the validity and accuracy of research data: credibility, transferability, dependability, and confirmability, as suggested by Guba and Lincoln (Singh et al.,

2021). Credibility denotes the reality of research descriptions and findings (Cypress, 2017). Researchers were involved in collecting literature and specifying research gaps in this field for about ten months. Then the processes of research design and constant consultation with the experts, especially academic teachers, and also the personal interest of researchers for solving this problem led to the involvement of advisors, participants, subject literature, etc., in data. This constant involvement and regular study of various research dimensions helped researchers to derive new concepts from these analyses. Likewise, credibility was achieved in this study via analysis of results by participants or interviewees. To this end, after the execution and implementation of the interviews, a text with the discussion coding was put at the disposal of the interviewees to ensure the accuracy of the given data in the interviews. Transferability means the potential for the generalization of results to other fields and subjects. Using systematic techniques presented by Strauss and Corbin school and Charmaz school along with initial coding, axial coding and categorization, and other means, researchers ensured the transferability of the given concepts (Low & Hyslop-Margison, 2021; Schwandt et al, 2007).

To realize dependability and pursuant to methods and conclusions of researchers in the section of research findings under any category, quotations of the same participants' speeches were presented. Similarly, the supervision of expert colleagues was utilized for a more accurate analysis of coding processes. Conformability means trying to achieve an objectivity index in a study (Moon et al., 2016). To provide confirmability, researchers tried not to include their judgments and biases in work as much as possible, and all notes, documents, recordings and revisions, and necessary documentation were made. Following Creswell and Báez (2020), the following measures were taken to improve reliability in this study: Detailed and precise noting upon interview, a high-quality sound record of accurately inscribed statements, and confidence about not-losing valuable data, utterances, points, pauses, and details that may be usually missed, and finally the presentation of the text of interviews to two experts in behavioral sciences for coding (Creswell & Báez, 2020).

3.1 Studied Subjects

The studied research population included employees in one of the Iranian national banks from February 20th, 2020 through November 20th, 2020. To select a sample in this study, an accessible purposive sampling method was utilized. According to the research problem, participants were chosen from among the employees who exhibited an inclination to express their attitudes, emotions, and experiences about this disease. The research inclusion criterion was determined as inclination in presence in this study, employment, and understanding of suffering from COVID-19 (happened either to them or their first-rate relatives). To fulfill the objectives of the current study, 19 employees were interviewed from one of the banks in Iran. Interviewing ceased once it became apparent that theoretical saturation was achieved in the dataset. Concerning the composition of observed frequency among participants, males formed 85%, and females constituted 15% of participants in the current qualitative research. The educational level of participants in this study included a high school diploma (43%), a B.A. degree (26%), and an M.A. degree (31%).

3.2 General Plan of Interview

An interview is often the most prevalent technique for data collection in phenomenological studies. The influential phenomenological researcher Giorgi (1997) mentioned that the questions should be generally prepared as open-ended so that the interviewee could have adequate opportunity to express their attitude (Bevan, 2014). Data are read and reread to determine similar phrases and themes and collected and then grouped to form a semantic bloc (Hoffding & Martiny, 2016). Through this process, researchers can represent the situation and experience and acquire a more profound perception of the phenomenon. The literature and comments of relevant experts were employed for designing interviewing questions. The main interview questions were as follows:

- (1) Which feeling was created in you following to morbidity of Coronavirus diseases? (The primary psychological emotions were designated for banking service providers.)
- (2) What were your tackling strategies?
- (3) What is your insight when exposed to pandemics?
- (4) What was your main problem or challenge at the workplace and in the community?

In addition, concerning conditions in any interview, researchers also mentioned the following questions: How did the occurrence of this disease affect you? What was the most significant impact on you by this disease? How did you respond to it? How do you feel or think about this disease? What has changed in your personal and occupational life? How do you cope with changes in your business and life? Is there any other idea or comment you like to express?

3.3 Moral Considerations

All participants were informed about the study details. Participation was voluntary, and staff could abandon the study without related consequences. The anonymity of participants was guaranteed, and a code was given to each participant to ensure confidentiality. Research data were available only to the researchers.

3.4 Data Collection

Concerning the nature of the problem and its phenomenological strategy, in-depth interview with ordinary participants was the data collection tool in the current research to extract rich data by judgment (Groenewald, 2004; Khan, 2014). Initially, any interview was done, then initial analysis and coding were performed with categorization, and interviewed questions were corrected using interview feedback. This process was frequently repeated, so we finally obtained a comprehensive and valid computation. Due to the prevention of disease morbidity, interviews were conducted with observance of healthcare guidelines and social distancing. Interviews were performed without a third party to ensure privacy, and a sound recorder was utilized. Any close-ended interview lasted for 20-30 minutes, depending on given conditions. All data were stored quite confidentially.

3.5 Data Analysis

The use of software to analyze various types of qualitative data is deemed a relatively new field of development in the qualitative methodology. Regarding to the advantages of the utilization of qualitative data analysis software, it is recommended to qualitative researchers to use the software in analyses of qualitative studies. These advantages include not having to analyze manually, time-saving, ability to utilize huge amounts of qualitative data, increase in flexibility, and improvement of validity and controllability of studies (Kuckartz & Radiker, 2019; Marjaei et al., 2019). Researchers selected MAXQDA 2018 software pack because it presents many benefits to qualitative researchers.

4. Findings and Discussion

Data analysis led to the emergence of 2 main categories and 9 subcategory topics with 34 primary codes as described in Tables 1 and 2. The structure in Maxmaps, designed by MAXQDA software, is shown here (Figure I shows the model used in this study).

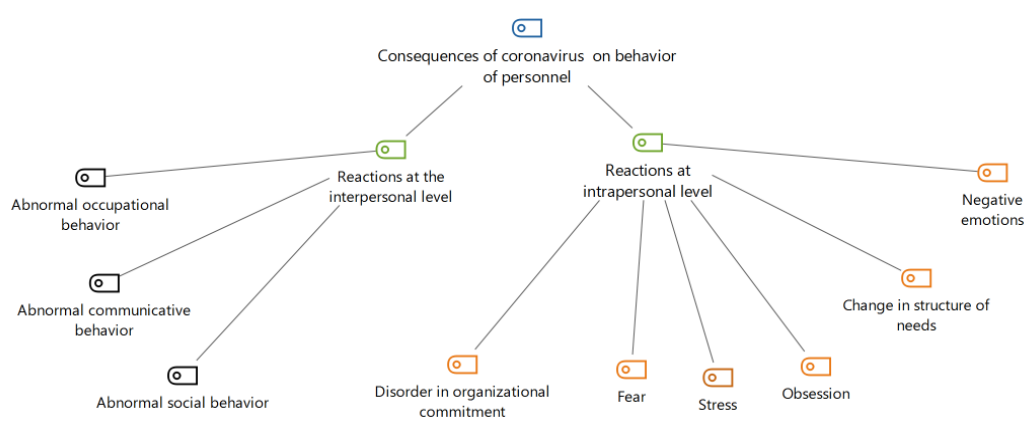


Figure 1. Categories, Subcategories, and Axial Codes

4.1 The first main category:

The first main category is staff reactions at an intrapersonal level in an organization. In the following, we explain subcategories of reactions at the intrapersonal level (Table 1 presents results of the intrapersonal level analysis of this research).

Table 1. The First Part of Initial Codes, Main Categories, Subcategories, and Axial Codes for Reactions at the Intrapersonal Level

Axial code	Main category	Subcategories	Initial codes
Consequences of Coronavirus on the behaviors of personnel	Reactions at intrapersonal level	Negative emotions	Losing mental composure
			Sense of sadness
		Change in structure of needs	Sense of uncertainty
			Excessive introversion
			Sense of internal weakness
		Obsession	Sense of isolation, loneliness, and seclusion
Sense of burnout			
Stress	Rising need to emotional support from colleagues		
	Rising needs at a physiological level		
Fear	Rising needs for salaries and wage		
	Rising needs for digital businesses		
Disorder in organizational commitment	Obsession		
	Stress	Stress caused by communication with customers and colleagues	
Fear	Stress	Stress caused by transferring disease from workplace to family environment	
	Disorder in organizational commitment	Work accumulation stress	
Fear	Disorder in organizational commitment	Workplace stress	
	Disorder in organizational commitment	Fear of threats to personal and familial health	
Disorder in organizational commitment	Disorder in organizational commitment	Fear from unawareness about and recognition of disease	
	Disorder in organizational commitment	Fear of infection risk and death-fear	
Disorder in organizational commitment	Disorder in organizational commitment	Fear from colleagues as disease vectors	
	Disorder in organizational commitment	Fear from communication in formal and informal situations	
Disorder in organizational commitment	Disorder in organizational commitment	Incompatibility with organizational objectives	
	Disorder in organizational commitment	Reduced inclination to remain in the organization	
Disorder in organizational commitment	Disorder in organizational commitment	Avoidance of hardworking for organization	

Negative emotions: The negative feelings such as a sense of sorrow and sadness, uncertainty feeling, a sense of seclusion and loneliness and isolation, intensified introversion, sense of internal weakness, and loss of mental serenity are assumed to be the individual reactions to the incidence of COVID-19 disease. This finding is consistent with studies conducted by Ardebili et al. (2021), Fofana et al. (2020) and et al., (2020).

The health-related behaviors of individuals, social distancing, traffic restrictions and prohibition of trips, lack of potential for performing group sports, and phobia of morbidity of disease and mortality in personnel led to an increase a group of negative and unpleasant feelings in personnel. As Philpot et al. (2021) have predicted, restrictions caused by COVID-19 resulted in creating new norms and changes in the model of relations in the organizations. Participant No. 18 implied:

The human is naturally a social organism. Therefore, social isolation is unpleasant. Feasts, group sports, meetings, and dialogue with colleagues have been limited. I was involved along with my friends in collective sports such as soccer and volleyball, and this issue led to the discharge of negative energies and reduced stress.

Interviewee No. 16 expressed: “

I was tired from the inside, and COVID-19 has slowed working rhythm. Wearing multilayer masks caused hypoxia and intensified tiredness. Works are done but not lively, unlike the past; work is a conflict between death and life. In my opinion, COVID-19 has black color and is gloomy and sorrowful.

It is evident that the frightening consequences of COVID-19 have created collective sadness in the organization, and this trend needs to be managed. One could avoid it by observing healthcare procedures, frequently washing hands, and staying home. Still, one of the significant occupational issues for personnel in national banking networks is encountering banking notes and bills that may transfer

Coronavirus. The incidence of Coronavirus has made it more challenging to be present next to others. Contact with family and friends, execution of social activities, and spending leisure time have been limited. This issue may cause a feeling of loneliness in individuals. This is a feeling the majority of inhabitants on the Earth planet have experienced during the incidence of COVID-19 (Bao et al., 2021).

Change in the structure of needs: Nowadays, having jobs and fulfilling their requirements are significant parts of human life, and physical requirements are provided by selecting a target job, identity, and income-earning. The need for organizational personnel is affected by environmental conditions and situations (Berkup, 2014). This study observed well that a change in conditions had modified personnel's requirements and preferences, and they have not followed fixed and classic patterns. The participants have explicitly emphasized the rising need for emotional support from colleagues, increased needs at a physiological level, rising demand for salaries and wages, and advanced digital requirements. For example, participant No. 3 expresses: *"When I caught COVID-19, no one asked about my status while working in this group for 27 years, and I caught it in the workplace, and no one asked me about my status. No mental support was provided to me."* Likewise, participant No. 4 implied: *"The organizational task has become more prominent under the incidence of COVID-19. Namely, it should be planned for the patient employee during disease period and [the same should be done for] their return to workplace and normalization of plan conditions."* Participant No. 9 mentioned:

I expected the organization to show it practically that it attaches value to the employee. For example, it should be able to strengthen employees mentally and motivationally. For instance, under these conditions, the rise in salaries and wages or planning for the health of my family and me will be more beneficial to me than acknowledgements or specific positions. Most of the time, I think the organization has provided many services to the family of most of my colleagues who left their homes in the morning to go to the workplace and return home with COVID-19 but are not currently present among us. If the organization thinks about their children, e.g., hiring one of the personnel's children who goes to the workplace for the sake of people and then loses their life. Humans may ignore many things. The level of our expectation from the organization has been lowered to the minimum living conditions, and it is maybe due to economic problems that caused our expectation level to become low. Today, staying alive and living is more important than anything else. I saw many high-rank directors and officials eliminated.

Obsession: Obsession is a behavior done to neutralize the threatening effects of COVID-19 (Benatti et al., 2020). Since the outset of the incidence of COVID-19, preservation of social distance, respiratory health by wearing a mask, washing hands with soap, and sterilization of surfaces have been recommended as preventive measures against infection by World Health Organization (WHO). Almost all the people follow these recommendations, but the shreds of evidence suggest extremist behaviors of personnel and the creation of obsession among them so that persistence in excessive washing of hands and use of antiseptics have led to physical damages to the personnel. This subject is consistent with the findings of Alsaidan et al. (2020).

Stress: Types of stresses, which originated mainly from the transference of viruses from an unsafe working environment to the family, have been identified in the present study, including tension in an unsafe working environment, stress caused by the relationship with customers and colleagues, stress for the transference of disease from working environment to family environment, and occupational stress due to work accumulation. Stress may affect the psychological health and welfare of personnel in the workplace and the community (Zimmermann et al., 2021). Undoubtedly, the prevalence of COVID-19 as a mental health challenge has created the most stressful conditions for organizations in the current century. Rising stress levels may lead to physical and mental complications. Psychological reactions may include depression, occupational burnout, and physical reactions, e.g., digestive problems and appetite changes. This condition was visible in participants. For example, participant No. 9 expressed: *"I encountered nervous complications and some pains at this period,"* and participant No. 13 emphasized, *"I suffer from stress for my job and possible transference of disease to the family, and I am mainly tired with a headache."* Participant No. 18 implied: *"I often follow psychological topics and think I go toward depression."* Similar findings have been reported by Shen et al. (2020), Shah et al. (2021), and Kar et al. (2021).

Phobia: Phobia is an adaptive reaction to excite energy for tackling potential threats. As the danger is insecure and continuous in cases such as COVID-19, a phobia may become chronic and burdensome. If dread is excessive, this may be followed by detrimental effects at individual and social levels. On the other hand, if there is insufficient phobia due to public ignorance, it may be accompanied by some damage to the individuals and community (Mertens et al., 2020). Participants implied types of phobia in the present study, including fear from communication under formal and informal situations, phobia from threatening personal and familial health, fear from lack of awareness and recognition of the disease, fear from the risk of infection and mortality phobia, and fear from the colleagues and vectors of disease. For example, participant No. 5. Mentioned,

A tangible point from the outset of this disease is the hidden aspect of this virus. Namely, it is not clear how it gets to you and at what time, and also, it will be latent in the body for 15 days, and this is a tremendous fear per se that I can be a vector of this disease.”

Participant No. 7 expressed, “I feel death bird now flies around heads of all of us.” Participant No. 14 emphasized, “I mainly fear that people around me, such as my old parents, suffer from the disease.” The presented results are consistent with findings from Harper et al. (2021) and Galehdar et al. (2020).

Disruption in organizational commitment: Incompatibility with corporate objectives reduced inclination to stay at the organization, and decrease in hardworking for the organization was reported by the participants. The results aligned with the studies by Said & El-Shafei(2021) and Zhang et al. (2022). For several years, the studies were focused on positive outcomes of organizational commitment and related elements in the organization, and many scholars have described the organizational commitment as a favorable and powerful tool to connect personnel to the organization and to increase the given productivity and effectiveness (Geneviciute & Endriulaitiene, 2014).

The organizational commitment may play an essential role in determining if an employee will stay in the organization longer and work eagerly to achieve corporate objectives. Occupational performance, job insecurity, and similar features may determine the level of commitment to the job in an employee. The banking network personnel in Iran are excluded from measures and vacations foreseen under COVID-19 conditions, and they regularly and constantly give services under extraordinary threatening conditions. This issue, along with the lack of virtual banking platforms and inflexibility of banking activities, has exerted double pressure on the body of banking networks in Iran. Some statistics signify that the personnel of banks are among the top victims of Coronavirus at their workplace. Fear from the morbidity of disease, transference of the disease to the family, and lack of adequate social support indicate signs of rising motives for temporary job quitting. As personnel encounters many risks such as COVID-19, they lose interest in their career and do not accept going to the workplace as an internal commitment under emergent conditions. Participant No 17. Implies:

I would like to leave it and recede away from this condition and then return three or four months or one year later, and I do not look at the financial dimension of this measure, so I only like to leave the workplace and come back as conditions become normal. I have lost my enthusiasm for working. I think it necessitates me to become distant from this system regarding the mental dimension and the stress I would probably suffer from COVID-19 today or tomorrow. If I catch it, my child also suffers from the disease. Business is valuable if someone is healthy.”

Participant No. 18 declared, “I like to be retired soon.” Participant No. 14 mentioned, “*I got more interested in going to the organization during recent years.*”

4.2 The second major category:

The reactions at the extra-personal level are the second main category. Thus we explain the categories of responses at an extra-personal level in the following lines (Table 2 presents results of the interpersonal level analysis of this research).

Table 2. The Second Part of Initial Codes, Main Category, Subcategories, and Axial Codes for Reactions at the Interpersonal Level

Axial code	Main category	Subcategories	Initial codes
Consequences of Coronavirus for the behaviors of the staff	Reactions at an interpersonal level	Abnormal social behavior	Reduced social involvement
			Reduced altruism
			Excessive social distance
			Social repulsion
			Reduced functional coordination
			Social disaffection
		Abnormal communicative behavior	Avoidance of communication
			Adjustment of oral communications between personnel
		Abnormal occupational behavior	Aggression
			Reduced meta-role behaviors
			Non-observance of professional principles

Abnormal social behavior: The new Coronavirus and related disease, COVID-19, has caused unprecedented social disruption (Kofman & Garfin, 2020). When personnel interact with each other, social structures form over time. These behavioral patterns are sustainable and necessary for organizational survival and achievement. Personnel behaviors may play a significant role in creating a social network in the organization. Perception of thoughts and behaviors of others are requisite and vital for occupational and organizational success. Despite the importance of socially acceptable behaviors in an organization, by exerting limitations and creating distance, the subject of the responsible behaviors of personnel has been exposed to severe challenges in the organization. In the present study, participants emphasized reduced altruism, social disaffection, decreased social involvement, excessive social distance, reduced functional coordination, and social abandonment. This subject has added to the intensity of change in personnel's behavior. The research findings are consistent with studies done by Onal et al. (2021), Feng et al. (2020), and Sher (2020). Some problems, such as an increase in the general level of prices and the falling trend of stock exchange in Iran, coincided with the morbidity of the pandemic disease. For example, interviewee No. 9 expressed:

I never sacrifice myself and my family to the others. You might observe what competition emerged for exchange rate and the dollar, and opportunists acquired great benefits and easily exited from the stock market. Today, anyone only thinks about their benefit. Thus, with this small salary, we have to present further work under these Coronavirus conditions.

Participant No 15 emphasized, "COVID-19 has created an ambiguous and unclear future for our organization. If our organization cannot afford our salaries or it is postponed for one month, I will have many personal problems."

Abnormal communicative behavior: Under normal conditions, the major part of the time of personnel is devoted to communication with superior officials, subordinates, colleagues, customers, or suppliers. Communications are related to giving information and transparency to the tasks, method of doing tasks, and improving the performance of personnel in the organization. Preservation of communication network and continuance of data flow in the organization is one of the organizational strategies as the basis for planning. Despite the extraordinary importance of this issue, communications have undergone the most significant damage because of the incidence of COVID-19, and personnel, directors, and customers meet each other with covered faces. Regarding the subject of abnormal communicative behaviors in the present study, some categories appeared, including avoidance of communication and mitigation of oral communications between personnel, as shown in the following comments from participants in this investigation. Participant No. 4 expressed:

Concerning the effect of COVID-19 on me in terms of organizational dimension, I can say that our communications have been affected, especially because our communications were done vis-à-vis. Now, this communication is done with distance via phone, correspondence, and letter-writing, and this subject has reduced intimacy in social relations between colleagues, and these communications have become slightly slower and decreased. This reduction in communications may create a series of problems. For

example, we could not properly guide the customers, and this may negatively affect the quality of work to a great extent.

Participant No 15 emphasized, "My colleagues working as eight persons in a group and I tried to minimize collective communications, and even congregational prayer has been stopped." Participant No. 11 mentioned, "Following the first cases of pandemics in the country, the first reaction, which formed in the workplace, was a reduction of relationship with customer and colleagues and rising distance, and the reduction of this distance led to a negative reaction."

Abnormal occupational behaviors: Constant mask-wearing, use of healthcare accessories, social distance preservation, and a range of unpleasant feelings and a group of concerns and expectations will be adequate to change human behavior and abnormal reactions (Wasserman et al., 2020). Lack of prediction for critical conditions has also added more to the intensification of the subject, and the organization has encountered a challenge in giving the needed response to the conditions created by the incidence of COVID-19. In fact, the official and physical structure of the organization has not also anticipated such a crisis in managing customers and personnel (Rai et al., 2021). Participants emphasized non-observance of occupational principles of job, reduction of extra-role behaviors, and aggression. Participant No. 7 implied, "*During COVID-19 incidence, my greatest change was that I quickly became furious. I got displeased from the commands given by boss a few days ago, and I unwantedly gave an unsuitable response to his order.*" Similarly, participant No. 10 expressed, "*I do not tolerate hearing many questions asked by customers and other colleagues.*" Participant No. 1 also implied, "*I never accept to do any task rather than my role and duty these days.*" Participant No. 7 expressed, "*COVID-19 removed the relations between colleagues for counseling sessions or negotiations or making a decision. It seems the concept and meaning of working together have been eliminated.*"

5. Discussion and Conclusion

COVID-19 pandemics noticeably affected individuals' personal life, daily life, socioeconomic conditions, relations, feelings, and physical and mental health. We explored the effect of COVID-19 on personnel behavior in the banking industry. We intended to identify the consequences of the COVID-19 crisis on personnel's behavior. To investigate these consequences, qualitative methodology was adopted to analyze personnel experiences in the banking industry at the peak point of COVID-19 pandemics. This study's results are assumed to be very important for evaluating the consequences of the crisis and giving professional support from personnel to improve tackling stressful situations caused by similar crises and what happened during the COVID-19 pandemic. This study has been derived from a sample of employees in the banking industry in Iran, presenting a few key findings. Banks and financial institutes are considered highly important to preserve economic activities and meet basic public needs under crisis conditions (Ichsan et al., 2021).

Following the closure of some jobs and imposition of limitations in businesses, the Iranian government took unique financial plans under the title of Postponement in collecting non-current liabilities, and giving some minor facilities to weak members of community based on the activities of banks and in line with supporting the damaged jobs to prevent from disastrous socioeconomic consequences. However, the potential of operational employees has been damaged in most of the financial institutes following COVID-19 crisis, and this led to undermining of service-giving to customers (Li, L et al., 2020). Participants saw the pandemic disease as a hazardous event that had created a group of mental and physical consequences for them. The following minor sections have explained these findings' theoretical, practical, and managerial concepts.

5.1 Theoretical Implications

The perceptions of the personnel of banking industry about the risk of COVID-19 morbidity in their workplaces is the first case in the present study. This disease spreads mainly through direct or close contact with infected subjects (Chaurasia et al., 2020), and for the bank personnel it should be considered as an important matter because they deal with paper money and bank cards and are in close contacts with the customers. numerous studies have been conducted regarding perceived concerns by personnel in the tourism industry, universities and healthcare centers (Hao et al., 2020; Korth et al., 2020). However, the conducted studies are rare concerning behavioral consequences of bank

personnel. Therefore, the current study is one of the first cases that have revealed the behavioral effects of personnel's conduct in the bank during the pandemics. Similarly, the findings of this study present new key insights into the literature on organizational behavior and the personnel's experience upon the occurrence of a crisis. By the identification of two groups of interpersonal and extra-personal reactions, this study adds to the literature on organizational behavior at the time of exposure to the pandemic disease.

This study's findings indicate that banks' personnel perceive the pandemics as a damaging event, which may lead them to a range of unpleasant and destructive emotional reactions. These negative feelings lead to losing mental composure, a sense of sadness, feeling of uncertainty, intensified introversion, and consistency of tiredness in the individual. We have made prominent the hidden key subjects dominating the employees' perceptions. The COVID-19 crisis showed that personnel need to get more emotional and physiological supports, have an increase in their salaries and a technology-based working system. Paying attention to the needs of personnel in the organization is essential because today, organizations should be vigilant and adaptive to the unpredicted events such as external crises, e.g., COVID-19, to overcome them at the right time and by new solutions for challenges caused by the crisis (Carnevale & Hatak, 2020). Excessive, irrational behavior was observed under the obsession with preventive measures and excessive washing of hands among personnel in many studies during the COVID-19 period (Chen et al., 2021; Kumar et al., 2021; Restauri & Sheridan, 2020).

However, stress originated from the relationship with customers and colleagues and the possible transference of diseases from the workplace to family space in the personnel of bank branches. Fear from threat to health, phobia caused by lack of recognition, fear from patient colleagues, fear of relation, and death-phobia were emphasized in this study, as they are found in the existing literature (Ren et al., 2020; Tsang et al., 2021). While the results of many studies suggest an increase in the level of organizational commitment (Chanana, 2021b; Faramawy et al., 2022; Shayestehazar et al., 2022). Similar to our investigation, some studies have focused on reducing organizational commitment (Agbay & Akbudak, 2021; Ozberk & Yagcan, 2022).

Participants have commented on the variables of incompatible organizational objectives, reduced inclination to stay in the organization, and avoidance of hardworking for the organization in our paper. The COVID-19 epidemic disease has exerted some limitations on individuals' social behavior. Unlike many studies in Iran, we have witnessed reduced affection and social involvement, excessive social distance, and a lack of social coordination. As some participants have implied, the lack of knowledge and awareness of the disease and economic problems caused by unbridled inflation in Iran was the origin for the emergence of this behavior after the U.S. left the Joint Comprehensive Plan of Action (JCPOA). The results differed from the study by Hajek and Konig (2022) about the level of empathy and altruism during the COVID-19 pandemic disease in Germany. Communication at the workplace is deemed the center of data and ideas exchange in an organization, and good contact at the workplace is necessary for practical and constructional work in companies (Cooren et al., 2011; Reed, 2010).

Interpersonal communication has been highly affected during the COVID-19 pandemic disease. Social distancing and mask-wearing are necessary to fight against the viral contagion, but this has posed several challenges to communication in organizations. Mask hides facial features. In fact, following the requirement for mask-wearing in public environments, interactions are done between mask-wearing strangers (Marini et al., 2021; Mheidly et al., 2020). This has become prominent as two categories of avoidance of communication and mitigation of oral communication among personnel in our study. Based on participants' comments in our study, non-formation of communication has been effective in the failure of group activities, disruption in organizational learning, and a sense of disappointment per se. Many studies have predicted a rising level of aggressiveness and reduced extra-role behaviors and non-professional behaviors during the COVID-19 period (Killgore et al., 2020; Sommovigo et al., 2022). Bias in the workplace is one of the main reasons for concern for organizations, and it may lead to an unpleasant workplace and reduction of productivity as well as financial and credit loss for the organization (Malik et al., 2021). However, after the COVID-19 epidemic disease began, many organizations were totally or partially closed. Due to the non-implementation of digital banking and shortage of personnel, the employees in the banking system of Iran have continued giving services incessantly. The personnel's concerns for their immunity, family, and lack of equipment have led to discriminatory behavior, e.g., aggressiveness.

5.2 Managerial and Practical Implications

By identifying the consequences of COVID-19 for personnel in this study, we not only showed that the pandemics directly lead to inner and outer psychological threads on personnel, but also we indirectly showed what measures could mitigate the impact of the psychological crisis created among personnel. We express that the following practical consequences will accompany this study. Firstly, managers should prefer personnel's health and safety during the pandemics. Organizations should provide adequate personal protection equipment such as handwashing products, gloves and masks, and antiseptic sprays; organize social and physical distancing, especially teleworking if possible; and measure employees' body temperature before and after work. The safe workplaces and management techniques in response to COVID-19 may protect personnel against infection and contribute to the relaxation of personnel and improve the quality of their service. Finally, it enables banks to overcome the problems and maintain their productivity. Innovative technology such as auto-teller machines and auto-receiver and contact-free payment systems may be utilized to minimize direct and indirect contact between employees and customers of the banks.

Secondly, the crisis management committee should address problems caused by COVID-19, including behavioral consequences of this disease in the organization, to help the personnel change, adapt, and remove a sense of disappointment by identifying sources of phobia and anxiety. Organizations should establish a pervasive crisis committee and create a full range of scenarios for tackling the spreading pandemics. A proper system of crisis management methods may reduce negative feelings, general stress, and occupational stress in personnel; keep motivation in personnel at the front line; and facilitate positive occupational behaviors (Abbas, 2021; Guenther, 2012). Third, organizations should train branch personnel about taking preventive efforts to minimize infection risk. The organization should propose adequate safety training programs to enable personnel to assess risks in the workplaces and know how to prevent spreading pandemics and to protect themselves. Organizations should employ technology and technological tools to improve online and remote learning as a requisite during times of social lockdowns and distancing because of the COVID-19 pandemic. Fourthly, management may upgrade domestic communications regarding the spread of pandemics and ways of protection against them by newsletter, email, and domestic social networks. Organizations should inform the personnel about existing forged news and ways of access to official and reliable data. Under current conditions, this approach can be valuable in reducing the fear of personnel from COVID-19 in terms of psychological dimension (Cazzola et al., 2021). Finally, organizations may also try to present a powerful supporting system to reduce anxiety in personnel, such as giving vacations (leaves) with additional salaries, guaranteeing occupational security, and allocating more resources to protect personnel's health. It is necessary for the organization to increase support from the personnel who are more exposed to the risk of disease morbidity. Based on the findings of our study, we present the following practical proposals and recommendations for practical management of personnel in the banking industry.

First, managers should consider the feelings of personnel to prevent spreading negative feelings in the workplace. Specifically, creating a clear perception in personnel about COVID-19 may reduce their phobia because fear often emerges from unawareness (Naeim et al., 2021). We recommend that managers try to decrease negative feelings among personnel from different viewpoints, including giving support, providing instructions, training skills, etc. In addition, we suggest the managers try to present safety and mental support to personnel against the impacts of COVID-19. For example, supervisors should frequently notify safety instructions and create standard working methods and procedures for safety concerns. Security glassy sheets can be installed to reduce possible infection without removing vis-à-vis interactions. Cleaning and sterilization of surfaces regularly in the workplace are also advised. Likewise, management should convey a solid approach to protection from customers and personnel and, simultaneously, create a workplace in which all personnel and customers could feel a sense of security.

Using lesser power and coercion in the organization and taking a transparent, honest, empathetic, and plain approach to personnel and definition of break time and showing flexibility in the implantation of norms and protocols may lead to reduced negative feelings in personnel. In an international study that Hofmeyer and Taylor conducted (2021) among the nurses, it was revealed that emphatic dialogues with nurses at the frontline might be vitally necessary to identify specific needs,

sources of anxiety, and supportive preferences (Hofmeyer & Taylor, 2021). Similarly, in a study performed in 193 UN member states, it was recommended to give personnel leave of absence by schedule with salaries during the COVID-19 pandemic to protect them. This would be in contrast with the leaves that were often given without salaries and wages before the incidence of this disease (Wontorczyk & Roznowski, 2020).

Second, rise in the risk perception may increase psychological disorders and reactions (Jum'ah et al., 2021). One of the other managerial concepts is to reduce perceived threats by personnel with the observance of healthcare protocols. Organizations should focus their efforts on raising personnel's awareness about diseases, mask-wearing, and the social distance of their personnel. The banks may execute a plan for granting medical leave with flexible salaries and allow employees to stay and rest at home without insecurity concerns. Managers should treat flexibly with the working schedule of personnel at the frontline within pandemic conflict and enable them to use absence leave for disease or taking care of patient members of the family. The qualification standards for benefits could be reduced during pandemics to help keep benefits for personnel if possible. Third, bank personnel who attended the workplaces without vacation at the peak point of Coronavirus pandemics, never achieved the position of providers of medical services. In particular, they were not prioritized during the vaccination process. Undoubtedly, ignoring this point by the government has led to a bad experience for many employees in the banking system, which participants have clearly emphasized in the current study. If managers intend to support the banking industry, they should prioritize life and sustenance of human resources in their decision-making processes and assume the bank employees as necessary personnel. While the crisis is expected to continue, even after removing the quarantines and opening economies, the effect of such measures has not been recognized in the banking sector to a great extent (Demirguc-Kunt et al., 2021). Thus, it is suggested that future researchers study the management of personnel's behavior during the post-Coronavirus period and behavioral crisis management caused by COVID-19 diseases.

6. Limitations

The key strength and limitation of this research is the methodological framework and time for executing this research. Interpretive phenomenology based on a reflective and precise approach leads to the knowledge of the phenomenon by perceiving people's actual experiences in everyday life. In this study, using qualitative research, the points contributed by a few participants about their experience was deeply evaluated since applying phenomenology for providing rich and precise reports from participants' experiences requires a small sample. However, it was infeasible to collect all possible varieties from the personnel of banks. Secondly, it should be noted that data are gathered in one country, and different results may be obtained depending on the cultural context in other countries. Since the number of participants is small and selected from one culture, the results could not be generalized properly. Researchers suggest that the study should be planned and conducted in future with more extensive and more diverse samples from different cultural contexts. On the other hand, the time of data collection in the present study seems to be a strength. It is essential to examine employees' feelings and reactions during the peak of the Coronavirus pandemic, since over time the Coronavirus becomes a catastrophic but commonplace issue in everyday life. Therefore, it is suggested that the present study be repeated after the termination of Coronavirus pandemic, and its results be compared and analyzed with the present study.

References

- Abakpa, B., Agbo-Egwu, A. O., & Abah, J. (2017). We emphasize phenomenology as a research paradigm for interpreting growth and development in mathematics education. *ABACUS*, 42(1), 391-405.
- Abbas, J. (2021). Crisis management, transnational healthcare challenges, and opportunities: The intersection of COVID-19 pandemic and global mental health. *Research in Globalization*, 3(1), 1-7.
- Abbas, M., Malik, M., & Sarwat, N. (2021). Consequences of job insecurity for hospitality workers amid COVID-19 pandemic: Does social support help? *Journal of Hospitality Marketing & Management*, 30(8), 957-981.
- Abdoli, A. (2020). Iran, sanctions, and the COVID-19 crisis. *Journal of Medical Economics*, 23(12), 1461-1465.
- Adzic, S., & Al-Mansour, J. (2021). The negative impact of covid-19 on firms: Insights from Serbia. *Eastern European Economics*, 59(5), 472-486.
- Agbay, N. C., & Akbudak, N. (2021). Understanding the Perception of organizational commitment during COVID-19 pandemic: Senior hotel managers' perspective. *Journal of Tourism and Gastronomy Studies*, 9(4), 2398-2415.
- Alkaissi, A., Zaben, F., Abu-Rajab, M., & Alkony, M. (2022). Lived experiences of Palestinian patients with COVID-19: A multi-center descriptive phenomenological study of recovery journey. *BMC Public Health*, 22(1), 1-11.
- Allen-Collinson, J., & Evans, A. B. (2019). To be or not to be phenomenology: That is the question. *European Journal for Sport and Society*, 16(4), 295-300.
- Alsaidan, M. S., Abuyassin, A. H., Alsaeed, Z. H., Alshmmari, S. H., Bindaaj, T. F., & Alhababi, A. A. A. (2020). The prevalence and determinants of hand and face dermatitis during COVID-19 pandemic: a population-based survey. *Dermatology research and practice*, 2020, 1-8.
- Ardebili, M. E., Naserbakht, M., Bernstein, C., Alazmani-Noodeh, F., Hakimi, H., & Ranjbar, H. (2021). Healthcare providers' experience of working during the COVID-19 pandemic: A qualitative study. *American Journal of Infection Control*, 49(5), 547-554.
- Gholipour Soleimani, A., Arsanjani, A., Delafrooz, N., & Taleghani, M. (2019). Challenges of the Iranian E-Banking Business Model in Digital Transformation. *Journal of Money and Economy*, 14(3), 389-419.
- Balkhi, F., Nasir, A., Zehra, A., & Riaz, R. (2020). Psychological and behavioral response to the coronavirus (COVID-19) pandemic. *Cureus*, 12(5), 1-15.
- Bao, L., Li, W. T., & Zhong, B. L. (2021). Feelings of loneliness, mental health needs, and service utilization among Chinese residents during the COVID-19 epidemic. *Globalization and Health*, 17(1), 1-8.
- Benatti, B., Albert, U., Maina, G., Fiorillo, A., Celebre, L., Girone, N. ... & Dell'Osso, B. (2020). What happened to patients with obsessive compulsive disorder during the COVID-19 pandemic? A multicentre report from tertiary clinics in northern Italy. *Frontiers in Psychiatry*, 11, 720.
- Bengtsson, M. (2016). How to plan and perform a qualitative study using content analysis. *NursingPlus open*, 2, 8-14.
- Bera, L., Souchon, M., Ladsous, A., Colin, V., & Lopez-Castroman, J. (2022). Emotional and behavioral impact of the COVID-19 epidemic in adolescents. *Current psychiatry reports*, 24(1), 37-46.
- Berkup, S. B. (2014). Working with generations X and Y in generation Z period: Management of different generations in business life. *Mediterranean journal of social Sciences*, 5(19), 218-229.
- Bevan, M. T. (2014). A method of phenomenological interviewing. *Qualitative Health Research*, 24(1), 136-144.
- Bhattacharjee A. (2012) Social Science Research: Principles, Methods, and Practices. *Tampa: Open University Press*.
- Carnevale, J. B., & Hatak, I. (2020). Employee adjustment and well-being in the era of COVID-19: Implications for human resource management. *Journal of Business Research*, 116, 183-187.
- Cazzola, M., de Novellis, V., Bianco, A., Rogliani, P., & Matera, M. G. (2021). Disputes over the production and dissemination of misinformation in the time of COVID-19. *Respiratory Medicine*, 182, 1-5.
- Chanana, N. (2021a). Employee engagement practices during COVID-19 lockdown. *Journal of Public Affairs*, 21(4), 1-8.
- Chanana, N. (2021b). The impact of the COVID-19 pandemic on employee's organizational commitment and job satisfaction with gender differences. *Journal of Public Affairs*, 21(4), 1-12.
- Chaurasia, S., Sharma, N., & Das, S. (2020). COVID-19 and eye banking. *Indian Journal of Ophthalmology*, 68(6), 1215-1216.
- Chen, H. M., Liu, C. C., Yang, S. Y., Wang, Y. R., & Hsieh, P. L. (2021). Factors related to care competence, workplace stress, and Intention to stay among novice nurses during the coronavirus disease (COVID-19) pandemic. *International Journal of Environmental Research and Public Health*, 18(4), 2122.
- Chick, R. C., Clifton, G. T., Peace, K. M., Propper, B. W., Hale, D. F., Alseidi, A. A., & Vreeland, T. J. (2020). Using technology to maintain the education of residents during the COVID-19 pandemic. *Journal of Surgical Education*, 77(4), 729-732.

- Collado-Boira, E. J., Ruiz-Palomino, E., Salas-Media, P., Folch-Ayora, A., Muriach, M., & Baliño, P. (2020). "The COVID-19 outbreak"—an empirical phenomenological study on perceptions and psychosocial considerations surrounding the immediate incorporation of final-year Spanish nursing and medical students into the health system. *Nurse Education Today*, 92, 1-6.
- Cooren, F., Kuhn, T., Cornelissen, J. P., & Clark, T. (2011). Communication, organizing, and organization: An overview and introduction to the special issue. *Organization Studies*, 32(9), 1149-1170.
- Creswell, J. W., & Báez, J. C. (2020). 30 essential skills for the qualitative researcher. *Sage Publications*.
- Cypress, B. S. (2017). Rigor or reliability and validity in qualitative research: Perspectives, strategies, reconceptualization, and recommendations. *Dimensions of Critical Care Nursing*, 36(4), 253-263.
- Demircuc-Kunt, A., Pedraza, A., & Ruiz-Ortega, C. (2021). Banking sector performance during the covid-19 crisis. *Journal of Banking & Finance*, 133(1), 1-22.
- Faraj, S., Renno, W., & Bhardwaj, A. (2021). Unto the breach: What the COVID-19 pandemic exposes about digitalization. *Information and Organization*, 31(1), 1-7.
- Faramawy, M. A. E. A., & Abd El Kader, A. I. (2022). COVID-19 anxiety and organizational commitment among front-line nurses: Perceived role of nurse managers' caring behavior. *Nursing Practice Today*, 9(1), 37-45.
- Feng, Y., Zong, M., Yang, Z., GU, W., Dong, D., & Qiao, Z. (2020). When altruists cannot help: The influence of altruism on the mental health of university students during the COVID-19 pandemic. *Globalization and Health*, 16(1), 1-8.
- Fofana, N. K., Latif, F., Sarfraz, S., Bashir, M. F., & Komal, B. (2020). Fear and agony of the pandemic leading to stress and mental illness: An emerging crisis in the novel coronavirus (COVID-19) outbreak. *Psychiatry Research*, 291(1), 1-3.
- Galehdar, N., Kamran, A., Toulabi, T., & Heydari, H. (2020). Exploring nurses' experiences of psychological distress during care of patients with COVID-19: A qualitative study. *BMC psychiatry*, 20(1), 1-9.
- Geneviciute - Janoniene, G., & Endriulaitiene A. (2014). Employees' organizational commitment: Its negative aspects for organizations. *Procedia-Social and Behavioral Sciences*, 140(1), 558-564.
- Groenewald, T. (2004). A phenomenological research design illustrated. *International Journal of Qualitative Methods*, 3(1), 42-55.
- Guenther, D. (2012). Emergency and crisis management: Critical incident stress management for first responders and business organisations. *Journal of Business Continuity & Emergency Planning*, 5(4), 298-315.
- Hajek, A., & König, H. H. (2022). Level and correlates of empathy and altruism during the Covid-19 pandemic. Evidence from a representative survey in Germany. *Plos One*, 17(3), 1-10.
- Hansel, T. C., Saltzman, L. Y., Melton, P. A., Clark, T. L., & Bordnick, P. S. (2022). COVID-19 behavioral health and quality of life. *Scientific Reports*, 12(1), 1-10.
- Hao, F., Xiao, Q., & Chon, K. (2020). COVID-19 and China's hotel industry: Impacts, a disaster management framework, and post-pandemic agenda. *International Journal of Hospitality Management*, 90(1), 1-11.
- Harper, C. A., Satchell, L. P., Fido, D., & Latzman, R. D. (2021). Functional fear predicts public health compliance in the COVID-19 pandemic. *International Journal of Mental Health and Addiction*, 19(5), 1875-1888.
- Hassankhani, M., Alidadi, M., Sharifi, A., & Azhdari, A. (2021). Smart city and crisis management: Lessons for the COVID-19 pandemic. *International Journal of Environmental Research and Public Health*, 18(15), 1-18.
- Wontorczyk, A., & Roznowski, B. (2022). Remote, Hybrid, and On-Site Work during the SARS-CoV-2 Pandemic and the Consequences for Stress and Work Engagement. *International journal of environmental research and public health*, 19(4), 1-22.
- Hoffding, S., & Martiny, K. (2016). Framing a phenomenological interview: What, why and how. *Phenomenology and the Cognitive Sciences*, 15(4), 539-564.
- Hofmeyer, A., & Taylor, R. (2021). Strategies and resources for nurse leaders to use to lead with empathy and prudence so they understand and address sources of anxiety among nurses practicing in the era of COVID-19. *Journal of Clinical Nursing*, 30(2), 298-305.
- Hossini Rafsanjanipoor, S. M., Zakeri, M. A., Dehghan, M., Kahnooji, M., Sanji Rafsanjani, M., Ahmadiania, H., & Zakeri, M. (2022). Iranian psychosocial status and its determinant factors during the prevalence of COVID-19 disease. *Psychology, Health & Medicine*, 27(1), 30-41.
- Ichsan, R., Suparmin, S., Yusuf, M., Ismal, R., & Sitompul, S. (2021). Determinant of Sharia Bank's Financial Performance during the Covid-19 Pandemic. *Budapest International Research and Critics Institute-Journal (BIRCI-Journal)*, 4(1), 298-309.
- Jin, L. (2020). Iran's COVID-19 fight: Domestic and external implications. *Asian Journal of Middle Eastern and Islamic Studies*, 1-12.
- Jum'ah, A. A., Elsalem, L., Loch, C., Schwass, D., & Brunton, P. A. (2021). Perception of health and educational risks amongst dental students and educators in the era of COVID-19. *European Journal of Dental Education*, 25(3), 506-515.

- Kar, N., Kar, B., & Kar, S. (2021). Stress and coping during COVID-19 pandemic: Result of an online survey. *Psychiatry Research*, 295(1), 1-5.
- Kaushik, M., & Guleria, N. (2019). Employee relations and engagement during covid-19. *Employee Relations*, 2(3), 1-11.
- Khan, S. N. (2014). Qualitative research method-phenomenology. *Asian Social Science*, 10(21), 298-310.
- Killgore, W. D., Cloonan, S. A., Taylor, E. C., & Dailey, N. S. (2020). Loneliness: A signature mental health concern in the era of COVID-19. *Psychiatry Research*, 290, 1-2.
- Kim, S., Wong, A. K. F., Han, H., & Yeung, M. W. (2022). Airline employees' stress amidst the COVID-19 pandemic and its job-related consequences. *Asia Pacific Journal of Tourism Research*, 27(1), 30-47.
- Kofman, Y. B., & Garfin, D. R. (2020). Home is not always a haven: The domestic violence crisis amid the COVID-19 pandemic. *Psychological Trauma: Theory, Research, Practice, and Policy*, 12(1), 199-201.
- Korth, J., Wilde, B., Dolff, S., Anastasiou, O. E., Krawczyk, A., Jahn, M., & Herrmann, A. (2020). SARS-CoV-2-specific antibody detection in healthcare workers in Germany with direct contact with COVID-19 patients. *Journal of Clinical Virology*, 128(1), 1-4.
- Kramer, A., & Kramer, K. Z. (2020). The potential impact of the Covid-19 pandemic on occupational status, work from home, and occupational mobility. *Journal of Vocational Behavior*, 119 (1), 1-4.
- Kuckartz, U., & Radiker, S. (2019). *Analyzing qualitative data with MAXQDA* (pp. 1-290). Cham: Springer International Publishing.
- Kumar, P., Kumar, N., Aggarwal, P., & Yeap, J. A. (2021). Working in lockdown: The relationship between COVID-19 induced work stressors, job performance, distress, and life satisfaction. *Current Psychology*, 40(12), 6308-6323.
- Li, L., Strahan, P. E., & Zhang, S. (2020). Banks as lenders of the first resort: Evidence from the COVID-19 crisis. *The Review of Corporate Finance Studies*, 9(3), 472-500.
- Liu, Q., Luo, D., Haase, J. E., Guo, Q., Wang, X. Q., Liu, S., & Yang, B. X. (2020). The experiences of healthcare providers during the COVID-19 crisis in China: A qualitative study. *The Lancet Global Health*, 8(6), 790-798.
- Liu, W., & Liu, J. (2021). Living with COVID-19: A phenomenological study of hospitalised patients involved in family cluster transmission. *BMJ open*, 11(2), 1-10.
- Low, J., & Hyslop-Margison, C. (2021). Kathy Charmaz: Theory, method, and scholarly identity. *Symbolic Interaction*, 44(3), 632-664.
- Lukka, K. (2014). Exploring the possibilities for causal explanation in interpretive research. *Accounting, Organizations and Society*, 39(7), 559-566.
- Lune, H., & Berg, B. L. (2017). *Qualitative research methods for the social sciences*. Pearson.
- Malik, A., Sinha, S., & Goel, S. (2021). A qualitative review of 18 years of research on workplace deviance: New vectors and future research directions. *Human Performance*, 34(4), 271-297.
- Marcu, M. R. (2021). The impact of the COVID-19 pandemic on the banking sector. *Management Dynamics in the Knowledge Economy*, 9(2), 205-223.
- Marini, M., Ansani, A., Paglieri, F., Caruana, F., & Viola, M. (2021). The impact of facemasks on emotion recognition, trust attribution, and re-identification. *Scientific Reports*, 11(1), 1-14.
- Marjaei, S., Yazdi, F. A., & Chandrashekhara, M. (2019). MAXQDA and its Application to LIS Research. *Library Philosophy and Practice*, 1(1), 1-10.
- Mertens, G., Gerritsen, L., Duijndam, S., Salemin, E., & Engelhard, I. M. (2020). Fear of the Coronavirus (COVID-19): Predictors in an online study conducted in March 2020. *Journal of Anxiety Disorders*, 74(1), 1-8.
- Mheidly, N., Fares, M. Y., Zalzale, H., & Fares, J. (2020). Effect of face masks on interpersonal communication during the COVID-19 pandemic. *Frontiers in Public Health*, 8(1), 1-6.
- Mohammadi, M. R., Zarafshan, H., Bashi, S. K., Mohammadi, F., & Khaleghi, A. (2020). The role of public trust and media in the psychological and behavioral responses to the COVID-19 pandemic. *Iranian Journal of Psychiatry*, 15(3), 189-204.
- Moon, K., Brewer, T. D., Januchowski-Hartley, S. R., Adams, V. M., & Blackman, D. A. (2016). A guideline to improve qualitative social science publishing in ecology and conservation journals. *Ecology and Society*, 21(3), 1-20.
- Naeim, M., Malekpour, A., & Rezaeisharif, A. (2021). Ignorance has turned COVID-19 into a social stigma. *Addictive Disorders & Their Treatment*, 20(4), 386-387.
- Neubauer, B. E., Witkop, C. T., & Varpio, L. (2019). How phenomenology can help us learn from the experiences of others. *Perspectives on Medical Education*, 8(2), 90-97.
- Sharif Nia, H., She, L., Kaur, H., Boyle, C., Khoshnavay Fomani, F., Kohestani, D., Rahmatpour, P. (2022). A predictive study between anxiety and fear of COVID-19 with psychological behavior response: the mediation role of perceived stress. *Frontiers in Psychiatry*, 13(1), 1-11.

- Onal, G., Güney, G., & Huri, M. (2021). Quality of life and occupational performance of children with cancer in the era of the COVID-19 pandemic in terms of rehabilitation. *Quality of Life Research*, 30(10), 2783-2794.
- Ozberk, H., & Yagcan, H. (2022). A descriptive cross-sectional study is a factor that affects the perceived stress and organizational commitment of women nurse academicians in the COVID-19 pandemic. *Health Care for Women International*, 1, 1-16.
- Parlapani, E., Holeva, V., Voitsidis, P., Blekas, A., Gliatas, I., Porfyri, G. N., Golemis, A., Papadopoulou, K., Dimitriadou, A., Chatzigeorgiou, A., Bairachtari, V., Patsiala, S., Skoupra, M., Papigkioti, K., Kafetzopoulou, C., Diakogiannis, I. (2020). Psychological and behavioral responses to the COVID-19 pandemic in Greece. *Frontiers in psychiatry*, 11(1), 1-17.
- Philpot, L. M., Ramar, P., Roellinger, D. L., Barry, B. A., Sharma, P., & Ebbert, J. O. (2021). Changes in social relationships during an initial “stay-at-home” phase of the COVID-19 pandemic: A longitudinal survey study in the US. *Social Science & Medicine*, 274, 1-7.
- Probst, T. M., Lee, H. J., & Bazzoli, A. (2020). Economic stressors and the enactment of CDC-recommended COVID-19 prevention behaviors: The impact of state-level context. *Journal of Applied Psychology*, 105(12), 1397-1407.
- Qutoshi, S. B. (2018). Phenomenology: A philosophy and method of inquiry. *Journal of Education and Educational Development*, 5(1), 215-222.
- Rai, S. S., Rai, S., & Singh, N. K. (2021). Organizational resilience and social-economic sustainability: COVID-19 perspective. *Environment, Development, and Sustainability*, 23(8), 12006-12023.
- Raofi, A., Takian, A., Sari, A. A., Olyaeemanesh, A., Haghghi, H., & Tengilimoğlu, D., Zekioglu, A., Tosun, N., Işık, O., & Tengilimoğlu, O. (2021). Impacts of COVID-19 pandemic period on depression, anxiety, and stress levels of the healthcare employees in Turkey. *Legal Medicine*, 48(1), 1-8.
- Reed, M. (2010). Is communication constitutive of an organization? *Management Communication Quarterly*, 24(1), 151-157.
- Restauri, N., & Sheridan, A. D. (2020). Burnout and posttraumatic stress disorder in the coronavirus disease 2019 (COVID-19) pandemic: Intersection, impact, and interventions. *Journal of the American College of Radiology*, 17(7), 921-926.
- Rogers, J. P., Chesney, E., Oliver, D., Pollak, T. A., McGuire, P., Fusar-Poli, P., & David, A. S. (2020). Psychiatric and neuropsychiatric presentations associated with severe coronavirus infections: A systematic review and meta-analysis with comparison to the COVID-19 pandemic. *The Lancet Psychiatry*, 7(7), 611-627.
- Roychowdhury, D. (2020). 2019 novel coronavirus disease, crisis, and isolation. *Frontiers in Psychology*, 11(1), 1-6.
- Rudolph, C. W., Allan, B., Clark, M., Hertel, G., Hirschi, A., Kunze, F., & Zacher, H. (2021). Pandemics: Implications for research and practice in industrial and organizational psychology. *Industrial and Organizational Psychology*, 14(1-2), 1-35.
- Sahni, J. (2020). Impact of COVID-19 on employee behavior: Stress and coping mechanism during WFH (Work from Home) among service industry employees. *International Journal of Operations Management*, 1(1), 35-48.
- Said, R. M., & El-Shafei, D. A. (2021). Occupational stress, job satisfaction, and intent to leave: Nurses working on front lines during COVID-19 pandemic in Zagazig City, Egypt. *Environmental Science and Pollution Research*, 28(7), 8791-8801.
- Schwandt, T. A., Lincoln, Y. S., & Guba, E. G. (2007). Judging interpretations: But is it rigorous? Trustworthiness and authenticity in naturalistic evaluation. *New Directions for Evaluation*, 2007(114), 11-25.
- Shah, S. M. A., Mohammad, D., Qureshi, M. F. H., Abbas, M. Z., & Aleem, S. (2021). Prevalence, psychological responses, and associated correlates of depression, anxiety, and stress in a global population, during the coronavirus disease (COVID-19) pandemic. *Community Mental Health Journal*, 57(1), 101-110.
- Shahriarirad, R., Erfani, A., Ranjbar, K., Bazrafshan, A., & Mirahmadizadeh, A. (2021). The mental health impact of COVID-19 outbreak: A Nationwide Survey in Iran. *International Journal of Mental Health Systems*, 15(1), 1-13.
- Shayestehazar, M., Heydarian, S., Gharib, M., Ghaffari, S., Fateh, S., Ghadiri, A., & Rezapour, M. (2022). Influential factors in job retention and organizational commitment among the nurses working in COVID-19 outbreak. *Journal of Nursing and Midwifery Sciences*, 9(1), 58-65.
- Shechter, A., Diaz, F., Moise, N., Anstey, D. E., Ye, S., Agarwal, S., & Abdalla, M. (2020). Psychological distress, coping behaviors, and preferences for support among New York healthcare workers during the COVID-19 pandemic. *General Hospital Psychiatry*, 66(1), 1-8.
- Shen, X., Zou, X., Zhong, X., Yan, J., & Li, L. (2020). Psychological stress of ICU nurses in the time of COVID-19. *Critical Care*, 24(1), 1-3.
- Sher, L. (2020). The impact of the COVID-19 pandemic on suicide rates. *QJM: An International Journal of Medicine*, 113(10), 707-712.
- Shoss, M. K., Horan, K. A., DiStaso, M., LeNoble, C. A., & Naranjo, A. (2021). The conflicting impact of COVID-19's health and economic crises on helping. *Group & Organization Management*, 46(1), 3-37.

- Singh, N., Benmamoun, M., Meyr, E., & Arikan, R. H. (2021). Verifying rigor: analyzing qualitative research in international marketing. *International marketing review*, 38(6), 1289-1307.
- Sommovigo, V., Bernuzzi, C., & Setti, I. (2022). Investigating the association between patient verbal aggression and emotional exhaustion among Italian health care professionals during the COVID-19 pandemic. *Journal of Nursing Management*, 30(6), 1713-1723.
- Suryavanshi, N., Kadam, A., Dhumal, G., Nimkar, S., Mave, V., Gupta, A., & Gupte, N. (2020). Mental health and quality of life among healthcare professionals during the COVID-19 pandemic in India. *Brain and Behavior*, 10(11), 1-12.
- Sutejo, J., Setiawan, S., & Syam, B. (2022). The experience of nurse managers implementing a nursing management system in COVID-19 wards: A descriptive phenomenology study. *Jurnal Keperawatan Padjadjaran*, 10(1), 73-82.
- Tengilimoğlu, D., Zekioglu, A., Tosun, N., Işık, O., & Tengilimoğlu, O. (2021). Impacts of COVID-19 pandemic period on depression, anxiety and stress levels of the healthcare employees in Turkey. *Legal Medicine*, 48(1), 1-8.
- Thomas, M. J., Lal, V., Baby, A. K., James, A., & Raj, A. K. (2021). Can technological advancements help to alleviate COVID-19 pandemic? A review. *Journal of Biomedical Informatics*, 117(1), 1-22.
- Tsang, S., Avery, A. R., & Duncan, G. E. (2021). Fear and depression linked to COVID-19 exposure a study of adult twins during the COVID-19 pandemic. *Psychiatry Research*, 296(1), 1-9.
- Vahedian-Azimi, A., Moayed, M. S., Rahimibashar, F., Shojaei, S., Ashtari, S., & Pourhoseingholi, M. A. (2020). Comparison of the severity of psychological distress among four groups of an Iranian population regarding the COVID-19 pandemic. *BMC Psychiatry*, 20(1), 1-7.
- Vollstedt, M., & Rezat, S. (2019). An introduction to grounded theory with a special focus on axial coding and the coding paradigm. *Compendium for early career researchers in mathematics education*, 13(1), 81-100.
- Wasserman, D., van der Gaag, R., & Wise, J. (2020). The term “physical distancing” is recommended rather than “social distancing” during the COVID-19 pandemic for reducing feelings of rejection among people with mental health problems. *European Psychiatry*, 63(1), 1-2.
- 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*, 30(5), 529-548.
- Zhang, S. X., Chen, J., Afshar Jahanshahi, A., Alvarez-Risco, A., Dai, H., Li, J., & Patty-Tito, R. M. (2022). Succumbing to the COVID-19 pandemic—healthcare workers are unsatisfied and intend to leave their jobs. *International Journal of Mental Health and Addiction*, 20(2), 956-965.
- Zimmermann, P., Pittet, L. F., & Curtis, N. (2021). How common is long COVID in children and adolescents? *The Pediatric infectious disease journal*, 40(12), 482-487.