Review Article

### Challenges and opportunities for nurses during COVID-19 pandemic

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#### **ABSTRACT**

**Background:** Pandemic of COVID-19 coincided with the year of Nurses and Midwives 2020. In war against invisible that has been ongoing during this pandemic, nurses play crucial role. As of June 2020, more than 600 nurses have lost their lives due to COVID-19. Nursing practice takes patients' safety at paramount through continuum of testing, quarantine and isolation. Thus, there is need to review challenges that pandemic has posed as well as the avenues of opportunities that it has opened for nurses.

**Method:** Review of existing literature on nurses, their challenges and opportunities during COVID-19 was done using electronic database. Freely accessible literatures in English language that clearly mentioned on challenges and opportunities of nurses during COVID-19 were included in the study.

**Result:** One of thechallenges that nurses face during COVID-19 is workforce shortage. With increasing number of people infected with COVID-19, it outstretches the existing nursing health workforce, and disproportionately in the low and middle incomes countries. They are at risk of infection and have high job demand. The incidents of suicide among nurses are representation of physical distress and psychological trauma. Role of nurses in patients care during COVID-19 can be under-rated and stigmatized. Internationally trained nurses and minorities nurses are at increased risk of discrimination. Despite these challenges, COVID-19 puts forward opportunities for nurses on implementing humanistic theory in practice, self-esteem and sharing of real time stories, contingency management and creativity. It opens platform for leading infection prevention measures and advocacy of profession.

**Conclusion:** Being the pertinent stakeholders in patient care, nurses' faces different challenges as well as some opportunities. COVID-19 has opened avenues for advocacy of nursing profession to get acknowledged for their dedication, perseverance, high morale and contribution during the pandemic management.

Keywords: Challenges of Nurses, COVID-19 Pandemic, Nurses, Opportunities of Nurses

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### **INTRODUCTION**

The world today is set in a war against the invisible with all of its efforts of science and technology. It is in the race of possible vaccine development against the SARS-CoV-2 that has caused the pandemic of COVID-19. Public health and social measures like- travel restrictions, physical distancing to proper use of mask, hand hygiene and respiratory hygiene are being implemented globally to flatten the curve of the pandemic. At the same time, there are teams of health care providers for whom the rush has been more than ever before. The nurses make up the largest part of professional health workforce. Nursing, the profession that links with lady with the lamp, has been guided by footprints of Nightingale and continued developing from environment theory of hers.2World Health Organization marked 200th birthday of Florence Nightingale by celebrating year 2020 as the year of Nurses and Midwives. This coincided with COVID-19 pandemic; remarking high time to realize the crucial role of the nurses in health care team. The slogan of International Nurses Day on May 12, 2020, "Nurses: A Voice to Lead - Nursing the World to Health" has so much to put together amid COVID-19 pandemic that has placed nurses in the role of warriors against the invisible. Since the onset of the disease, it is estimated that as of June 2020, more than 600 nurses lost their lives due to COVID-19 while a central database with the status of the nurses and health care workers during this pandemic is still lacking.<sup>3</sup> Nursing practice takes patients' safety at paramount and integral to it throughout the continuum of testing, quarantine and isolation to contain the virus. Thus, there is need to review the challenges that pandemic has posed upon nurses as well as the avenues of opportunities that it has opened.

### **MATERIAL AND METHODS**

The review of the existing literature on nurses and COVID-19 pandemic, their challenges and opportunities was done. The search was based on electronic database and the search engine used were Google Scholar, PubMed, Google and the search terms used were "Nurses and COVID-19", "Challenges and COVID-19", "Opportunities and

COVID-19" in different combinations. The Boolean operator AND and OR, and quotation marks were used to refine search of literature. The literature that clearly mentioned on the challenges and opportunities of nurses during COVID-19 and their references were retrieved.

**Inclusion criteria:** The literatures that mentioned about challenges and/or opportunities for nurses and COVID-19 pandemic were included in the study.

**Exclusion criteria:** The literatures that mentioned in general about health care workers but not specific to nurses were excluded. The literatures in other than English language and/or requiring fees for retrieval were excluded in the study.

#### **RESULT**

## Challenges of Nurses during COVID-19 Shortage of workforce

It was forecasted that there will be shortage of approximately 7.61 million nurses and midwives globally in 2030. And migrating nurses mainly form low and middle income countries are one of the major source of fulfillment of the need of high income countries. With this background, the increasing number of the people infected with COVID-19 will outstretch the existing nursing health workforce disproportionately in the low and middle incomes countries most of which are yet to reach the peak of the pandemic.

### High job demand and risk of infection

During the pandemic, nurses involved in direct care of the patients with COVID-19 with personal protective equipment (PPEs) are partners of patient care. Nurses are put into a high job demand and heavy workload with comprehensive assessment and continuous monitoring of the patient status that can sink without any prior signals. This takes hours long close contact with the patients and longer exposure than other counterpart health care workers. The undue pressure of being at risk of infection hovers around as the job demands fulfilling the basic needs of the patients closely. They also become companion of the patients in isolation who otherwise would have no one to ventilate their faith and fear of the disease. The share of the PPEs being not enough to cover the need of nursing to

the COVID-19 patients puts the nurses at the risk of infection leaving them with the fear of cross infections among their families and other patients.<sup>6</sup>

### Physical distress and psychological trauma

The need of saving personal protective gears as they run short; makes the nurses stay in the gears throughout the shifts in the isolation wards. The skin lesions of nurses due to the prolonged use of PPEs are the overt findings of the intense physical distress and psychological trauma that they may need to go through in the gears with no food, no water, and diapers to hold the urine for them.<sup>6-8</sup> The incident of the nurse, from Italy, 34 years old female, working for COVID-19 care, who committed suicide on knowing to have caught COVID-19 and left with her a note that, she was scared to transmit it to the ones she cared; is one of the representation of such distress, compassion fatigue and psychological trauma.<sup>9</sup>

### Under-rated contribution and risk of stigmatization

Nurses are involved in care for the COVID-19 patients in the absence of the relatives or care takers near the bedside. They get involved more in observation of the patients' response to treatment and less in decision making for the line of patients' treatment. With everyone in crisis mode, there are ample chances of under-rating the contributions that nurses make in the patient treatment, recovery and prevention of the disease. 10,11 Additionally, nurses have been stigmatized as the spreaders of the infections in the community leading to the incidents of violence, landlord's eviction against them. Not limited to the community but amongst the colleagues, the families of nurses involved in COVID-19 care are at risk of being stigmatized further. 12-15

# Risk for increased discrimination of internationally educated nurses and minorities nurses

The discriminations of internationally educated nurses were evident even prior to the pandemic. During the pandemic, the discriminating policies of compensation and hazard allowances for the migrant nurses and disproportionate effect of COVID-19 among the minorities in high income

countries, push them into further risk of discrimination during the pandemic. Along with this there are paradoxical unpaid leaves and pay cuts with reduced staffing in routine services as well. 16-20

### Opportunities of Nurses during COVID-19 Implementing humanistic theory in practice

By the nature of the responsibility that nurses are majorly assigned, they are among the health care professionals who are the first to attend the patients; have the longest hours of exposure to the patient and spend the closest time with them supporting their needs of daily life activities from all level of Maslow Hierarchy of needs.<sup>21</sup> Being infectious disease with a spectrum of illness, today the patients of COVID-19 in isolation at health facility set up rely among the nurses from general ward to the intensive care unit in order to meet the health needs, emotional and psychological needs and the activities of daily living- cleanliness to nutrition. Nursing amid COVID-19 pandemic is more like the one defined by the humanistic theory that puts forward nursing as an experience lived between human beings and this experience affects the existence of the human beings.<sup>22</sup> When being recruited with the Florence pledge to serve in the profession of nursing, the high humane spirit is the one that keeps them working irrespective of the threat of the infection and it is their ethical commitment that keeps thing moving from their ends.<sup>23,24</sup>The reflections of nurses working during COVID-19 to have increased their will, self discovery of potential and increased courage to face life are remarkable to see. 25

### Self-esteem and sharing of real time stories

The nurses share in the saddest and the happiest moments of the people amid pandemic. Nurses are being a hand to help and lend their ears to silently listen the sentiments of the patients who cannot see their families due to the contagion. Nurses in health facility set up are deeply engaged with the patients with COVID-19 like making the smallest observations to detecting the patients' response to the therapy, positioning of an intubated patient for better results and measures to avoid bed sores in a bed ridden patient.<sup>26-28</sup> These activities undertaken to improve patients' health increases the sense of

worth and high self esteem.<sup>23-27</sup> It is indeed the opportunity that is received amid pandemic due to the profession of nursing which broadens the reasons of satisfaction irrespective of the physical and mental difficulties being faced; with care of the COVID-19 patient. Bringing these first-hand knowledge and experience of the reality of caring to the patients, their families, friends and public through writing, institutionalize these moments and create environment for better support.<sup>29,30</sup>

### **Contingency management and creativity**

During the pandemic, evidence of taking the turn from stereotypical nursing department role to contingency plans like- initiation of epidemic prevention and control early warning, and reasonable allocation of treatment and nursing human resources, setting up special groups for continuous work of epidemic prevention and workflow optimization of admission, referral, and transfer, optimization of the online pre-screening triage process for fever clinicsand successful management of COVID-19 cases, shows that there is need of preparing the nurses for the comprehensive emergency plans and standardizing the nurses role during such contingency.<sup>31</sup> The preparation of the nurses needs to be rehearsed and improved as needs change with the type of crisis. Also, there are existing innovations and creativity like nurse owned clinics in Africa, village 'wise women' in Central Asia and nurse specialists in the UK to promote potential of nurses.<sup>1</sup> The pandemic is opening up the channels for letting nurses reach their optimum potentials with similar creativity in their roles ranging from being companion of the COVID-19 cases to advocacy in minimizing cross infection and educating the community to minimize the stigma.

### Leading infection prevention and control

Amid COVID-19 pandemic, measures of infection prevention and control (IPC) have been much common to appear in the literatures and even in the social media. The health workers demand to be well equipped at least with personal protective gears when they are risking themselves in care of the patients with COVID-19. And study reveals that the well geared health personnel were not tested positive with COVID-19. <sup>32</sup> With this

background, nurses can take this opportunity to lead the IPC measures in their health facilities. Being the most populous among all other health professionals and most proximal to the patient care, they can have a check even on the simplest measures like washing hands before patient encounter, ensuring minimized cross infections, effective screening and triage practices at the first encounter of the patient in health facility, planning of the logistics for proper IPC measures both during routine care and crisis.

## Opening avenues for advocacy of nursing profession

The existing evidences show that a professional needs to know not only on what needs to be done but also how to get it done within the health system.<sup>33</sup> And the crisis opens up the avenues on need of preparing the nurses as part of longer term nursing education to be in action during such future emergencies.<sup>34</sup> Also having majority of women in the profession, it gives an opportunity to advocate for gender equality with increased investment in nursing profession and creating enabling practice environment. 1,35,36 Thus, the nurse advocates can work on measurement of nursing specific and nursing sensitive outcomes to further strengthen the evidences of nurses' contribution in health outcomes and health system strengthening.

#### CONCLUSION

Providing sustained and comprehensive support to nurses is necessary in improving their physical and mental health and preparing the enabling environment for the prevention and control of COVID-19 pandemic. Being the pertinent stakeholders in patient care during COVID-19, nurses are challenged with shortage of workforce, physical distress and psychological trauma, underrated contribution and risk of stigmatization and discrimination of internationally educated nurses and minorities nurses. However, they are equally left with the opportunities like implementing humanistic theory in practice, self esteem and sharing real time stories, contingency management and creativity, leading infection prevention and control. There are opening avenues for advocacy of nursing profession to get

acknowledged for their dedication, perseverance and high morale to contribute in this pandemic management. Leaders in nursing should bring forward the ways to tackle challenges and enable opportunities for empowering nurses in overall management of COVID-19.

#### REFERENCES

- 1. All-Party Parliamentary Group on Global Health: Triple Impact how developing nursing will improve health, promote gender equality and support economic growth [Internet]. London; 2016. [Link]
- 2. Karimi H, Alavi NM. Florence Nightingale: The mother of nursing. Nursing and midwifery studies. 2015 Jun;4(2).https://dx.doi.org/10.17795%2Fnmsjournal29475[PMC]
- 3. International Council of Nurses, More than 600 nurses die from COVID-19 worldwide. June 3, 2020. 2020. [Link]
- 4. World Health Organization. Health workforce requirements for universal health coverage and the Sustainable Development Goals. (Human Resources for Health Observer, 17. 2016. [Link]
- 5. Buchan J. Global nursing shortages: are often a symptom of wider health system or societal ailments. https://dx.doi.org/10.1136%2Fbmj.324.7340.751[PMC]
- 6. WHO. Shortage of Personal Protective Equipment Endangering Health Workers Worldwide. [Link]
- 7. Liu Q, Luo D, Haase JE, Guo Q, Wang XQ, Liu S, Xia L, Liu Z, Yang J, Yang BX. The experiences of health-care providers during the COVID-19 crisis in China: a qualitative study. The Lancet Global Health. 2020 Apr 29. . <a href="https://doi.org/10.1016/S2214-109X(20)30204-7[Link">https://doi.org/10.1016/S2214-109X(20)30204-7[Link</a>]
- 8. Thakur V, Jain A. COVID 2019-suicides: A global psychological pandemic. Brain, behavior, and immunity. 2020 Apr 23. https://dx.doi.org/10.1016%2Fj.bbi.2020.04.062[PMC]
- 9. Smith A. Nurse suicides rise in Europe amid stress of COVID-19 pandemic [Internet]. Wsws.org. 2020 [cited 25 June 2020]. [Link]
- 10. Mitchell G. 'Danger of nurses quitting after Covid-19' if mental health overlooked. Nursing Times [Internet]. 2020 [cited 25 June 2020]. [Link]
- 11. Tolley K, Tysoe E. Back to the bedside: our reflections on returning to clinical practice in the pandemic [Internet]. Rcni.com. 2020 [cited 25 June 2020]. [Link]
- 12. Suherdjoko. 'Why are we being treated like this?': Nurses handling COVID-19 evicted as landlord fears infection. The Jakarta Post [Internet]. 2020 [cited 26 June 2020]. [Link]
- 13. Palmer P. IE nurse's aide who cares for COVID-19 patients faces eviction despite paying rent [Internet]. ABC7 Los Angeles. 2020 [cited 26 June 2020]. [Link]
- 14. Singh R, Subedi M. COVID-19 and Stigma: Social discrimination towards frontline healthcare providers and COVID-19 recovered patients in Nepal. Asian journal of psychiatry. 2020 Jun 13. https://doi.org/10.1016/j.ajp.2020.102222[PMC]
- 15. Front-line health care workers in Japan face discrimination over coronavirus | The Japan Times [Internet]. The Japan Times. 2020 [cited 27 June 2020]. [Link]
- 16. Why are more BAME medics dying than their white colleagues? | ITV News [Internet]. ITV News. 2020 [cited 27 June 2020]. [Link]
- 17. The COVID-19 crisis is fueling more racist discourse towards migrant workers in the Gulf | Migrant-Rights.org [Internet]. Migrant-rights.org. 2020 [cited 28 June 2020]. [Link]
- 18. Jan T. Asian American doctors and nurses are fighting racism and the coronavirus. The Washington Post [Internet]. 2020 [cited 28 June 2020]. [Link]
- 19. Walani SR. Global migration of internationally educated nurses: Experiences of employment discrimination. International Journal of Africa Nursing Sciences. 2015 Jan 1;3:65-70. https://doi.org/10.1016/j.ijans.2015.08.004[Link]
- 20. Schilgen B, Nienhaus A, Handtke O, Schulz H, Mösko M. Health situation of migrant and minority nurses: A systematic review. PloS one. 2017 Jun 26;12(6):e0179183. <a href="https://doi.org/10.1371/journal.pone.0179183">https://doi.org/10.1371/journal.pone.0179183</a> [Link]
- 21. Butler R et al. Estimating Time Physicians and Other Health Care Workers Spend with Patients in an Intensive Care Unit Using a Sensor Network. Am J Med. 2018;131(8):972.e9-972.e15. https://doi.org/10.1016/j.amjmed.2018.03.015[PubMed]
- 22. Keeping the Spark: How to Maintain your Humanism During the COVID-19 Pandemic [Internet]. Nursology. 2020 [cited 28 June 2020]. [Link]
- 23. World Health Organization. Caring for COVID-19 patients: Nurses across the country share their journey [Internet]. [cited 28 June 2020]. [Link]
- 24. Yin X, Zeng L. A study on the psychological needs of nurses caring for patients with coronavirus disease 2019 from the perspective of the existence, relatedness, and growth theory. International Journal of Nursing Sciences. 2020 Apr 4. <a href="https://doi.org/10.1016/j.ajic.2020.03.018">https://doi.org/10.1016/j.ajic.2020.03.018</a>. [Link]

- 25. Sun N, Shi S, Jiao D, Song R, Ma L, Wang H, Wang C, Wang Z, You Y, Liu S, Wang H. A qualitative study on the psychological experience of caregivers of COVID-19 patients. American Journal of Infection Control. 2020 Apr 8. <a href="https://doi.org/10.1016/j.ajic.2020.03.018">https://doi.org/10.1016/j.ajic.2020.03.018</a> [PMC]
- 26. Deying HU, Yue KO, Wengang LI, Qiuying HA, ZHANG X, ZHU LX, WAN SW, Zuofeng LI, Qu SH, Jingqiu YA, Hong-Gu HE. Frontline nurses' burnout, anxiety, depression, and fear statuses and their associated factors during the COVID-19 outbreak in Wuhan, China: A large-scale cross-sectional study. EClinicalMedicine. 2020 Jun 27:100424. https://doi.org/10.1016/j.eclinm.2020.100424[Link]
- 27. World Health Organization. Support Nurses and Midwives through COVID-19 and beyond [Internet]. Who.int. 2020 [cited 30 June 2020]. [Link]
- 28. World Health Organization. 2020 Year of the Nurse and the Midwife [Internet]. Who.int. 2020 [cited 30 June 2020]. [Link]
- 29. International Council of Nurses. 2020 International Year of the Nurse and Midwife: a catalyst for a brighter future for health around the globe [Internet]. ICN International Council of Nurses. 2020 [cited 30 June 2020]. [Link]
- 30. Maben J, Bridges J. Covid-19: Supporting nurses' psychological and mental health. Journal of clinical nursing. 2020 Apr 22. . <a href="https://doi.org/10.1111/jocn.15307[Link">https://doi.org/10.1111/jocn.15307[Link]</a>
- 31. Wang H, Feng J, Shao L, Wei J, Wang X, Xu X, Shao R, Zhang M, He J, Zhao X, Liang T. Contingency management strategies of the Nursing Department in centralized rescue of patients with coronavirus disease 2019. International Journal of Nursing Sciences. 2020 Apr 4. https://doi.org/10.1016/j.ijnss.2020.04.001[Link]
- 32. Liu M, Cheng SZ, Xu KW, Yang Y, Zhu QT, Zhang H, Yang DY, Cheng SY, Xiao H, Wang JW, Yao HR. Use of personal protective equipment against coronavirus disease 2019 by healthcare professionals in Wuhan, China: cross sectional study. bmj. 2020 Jun 10;369. https://doi.org/10.1136/bmj.m2195[PMC]
- 33. Frenk J, Chen L, Bhutta ZA, Cohen J, Crisp N, Evans T, Fineberg H, Garcia P, Ke Y, Kelley P, Kistnasamy B. Health professionals for a new century: transforming education to strengthen health systems in an interdependent world. The lancet. 2010 Dec 4;376(9756):1923-58. https://doi.org/10.1016/S0140-6736(10)61854-5[Link]
- 34. Wu X, Guo N, Zhou N, Zhang S. Containing covid-19: crucial role of nurses The BMJ [Internet]. The BMJ. 2020 [cited 5 July 2020]. [Link]
- 35. Purba AK. How should the role of the nurse change in response to Covid-19? [Internet]. Nursing Times. 2020 [cited 30 June 2020]. [Link]
- 36. Wells M. Italian health care workers speak out on coronavirus pandemic [Internet]. 2020 [cited 5 July 2020]. [Link]