

The lasting Impact Of Covid 19 On Nurses And Nursing Students.

By: Bridget Major Toro

Senior Capstone

Professor Horowitz

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Chapter 1: Introduction

Throughout Covid-19 the pandemic has impacted everyone in one shape or another. It has impacted the nurses especially throughout this time for a mass amount of different reasons. Many of the nurses and nursing students have had multitudes of different experiences leading them into many different directions and many, in directions that don't include nursing. These nurses have become so stressed and pushed to the limit within their career that what had become a passion for many, has caused thousands to turn away from the nursing field.

After having experienced the stresses of covering thousands of extra patients that many hospitals couldn't uphold, many nurses were expected to "step up" and pick up the extra work and for many nurses who felt it was their public duty to help their community and do everything they could, did just that. After years of experiencing this massive level of patients, not all the nurses were mentally still capable of maintaining their job duties while still maintaining the rest of their lives. For many nurses who became stuck at the hospital away from their family and the rest of their lives this inevitably put a strain on them not being able to take care of everything they needed to in their own lives.

All of these nurses faced all these different factors during the pandemic all the while the public funding for these nurses and the hospitals themselves have either not increased or fallen after the pandemic, this leading to many hospitals not being able to maintain their supplies and funding for employees. This inability to increase funding all the while increasing the workload on nurses has caused a mass number of nurses to leave leading to a shortage but also affecting the ability to have the nursing students who we need in order to return to a reasonable healthcare workforce.

These nursing students who have experienced a harder learning environment with less attentiveness to them and being forced to learn much quicker, in an environment where many nurses still have to focus on many patients many of the students who are learning are not receiving the attentiveness required for them to better learn the hands on skills being taught. The effects of COVID-19 and pandemics alike will continue to ravage our healthcare system all the while causing long term effects of shortages and a continuing struggle for those rising up in the field.

Abstract

Background : Nurses are one of the key factors that are keeping our healthcare system binded, especially during the high intensity levels of pandemics. The ability to better assess the way our nurses are handling, processing, and managing the nursing field will help us keep our nursing field.

Objective: To collect data on the affected nursing field and determine lasting effects felt by those within and entering the field of nursing.

Methods: Scholarly articles were reviewed and determined to be relevant based on the data and information found on nurses which were deemed significant to the lasting impact that was had from COVID-19.

Conclusions: The impact that was experienced during the COVID-19 pandemic was not a short experience, it was a long term event that continued to create lasting struggles that will be felt by future nurses and all those that experienced this horrific event that will inevitably be seen again. The research that was collected can be used to see the damage that is left behind and the support that we need to continue and increase for those who keep everyone else out of these hospitals.

Chapter 2: Literature Review

Within the article "Impact of COVID-19 outbreak on nurses' mental health: A prospective cohort study" written by Francisco Sampaio, Carlos Sequeira and Laetitia Teixeira, the psychological impacts and effects that were had on the nurses throughout the outbreak were studied and discussed. A study was done in order to identify what key factors had on the anxiety, depression and ability to sleep within nurses dealing with the impact from COVID-19. There had been several studies done already one specifically directed towards the prevalence of anxiety, depression, and insomnia with the findings identifying a prevalence of anxiety at 23.2%, a depression rate at 22.8% and an insomnia rate at 38.9%. This data was taken from frontline healthcare workers and findings showed a higher rate of these symptoms within the female workers. The main factors were found to be the fear of being infected and came through stages, the first stage being their psychological experience was mainly ambivalent, as they were torn between a sense of professional mission and fear of being infected. Second, their main psychological characteristics identified were anxiety, depression, somatisation, compulsiveness, fear, and irritation. Nurses' psychological adaptation began to occur, as they felt that what they were doing was meaningful and valuable to the health of the people and the nation.

It's becoming more and more known that the healthcare workers and especially the nurses who experienced the frontline of covid 19 had a larger psychological impact than those not experiencing the covid pandemic first hand. Within the study discussed in this article they found positive tendencies within all the variables tested which were, anxiety, depression and

insomnia. Depression, anxiety, and stress were measured using the Depression Anxiety Stress Scales. Anxiety symptoms decreased over time. As observed with the depression score, male and nurse specialists presented a lower mean score for anxiety. Nurses that agreed the quality of face masks was adequate presented a lower mean score for anxiety than nurses who disagreed. If there was more fear presented it correlated to having higher anxiety. While most nurses were able to develop an adaptive role when facing greater depression, anxiety, and stress symptoms at the beginning of the COVID-19 outbreak, others may have experienced the triggering of psychiatric disorders.

Prior to the COVID-19 pandemic that started in 2020 we had already seen a shortage of nurses and available people within the healthcare world. Beginning in 2020 with the onset of COVID began a new challenge for the healthcare workers and with it minimally increased funding into the healthcare world, causing it to become increasingly hard to find more workers willing to put themselves under extreme stress. With the increase of COVID-19 patients this created a massive shortage of not only beds but for workers to care for these people. The already large turnover rate for nurses within the industry began to rise even more with more and more nurses being burnt-out and psychologically worn down to the point of quitting.

The need for increased funds into the healthcare world and especially for the nurses who are increasingly put under more stress and relied on to keep our healthcare system afloat, "Many countries are suffering economic downturns due to the pandemic, but unless investment is made in the education of more nurses, and the ongoing training and support of current nurses, then economies will continue to suffer."(Nantsupawat,2021,pg.1). This problem has only become worse during the pandemic, if not addressed now the issues that we see so prevalent during COVID-19 will continue to affect our healthcare systems forever. The necessary need for

continued investment is needed in order to meet the needs of an ever growing population in an already lacking industry.

Not only is there a lack of necessary workers there was also a shortage of necessary supplies throughout the pandemic. This forced many nurses to learn how to adapt within their environments and learn new practices after commonly being thrown into situations lacking prior experience. The pressure that is put onto nurses to learn to adapt without ever coming to their aid can not be sustained, "...innovation and willingness to do the hard work cannot continue without let up, without support, counseling, proper resources and recognition, and without significant investment in nursing and health care within and across countries. We simply cannot expect nurses to continue to 'make do' and especially when they are not being listened to, nor being adequately protected to carry out their work."(Nantsupawat,2021,pg.1)

COVID-19 has created a false image in the minds of people who didn't have to experience the pandemic first hand, with the media and those who call healthcare workers 'heroes' it takes away from the fact that they are in need of necessary supplies in order for them to focus on what they were taught and learned to do, to help those that are sick, but with a massive lacking of funds and ability to support these nurses and frontline workers, we have created an environment where it's ok to not have the necessary materials and 'make-do' evermore increasing the stress that becomes placed on these nurses.

These practices which can be fixed with an accurate appreciation for those who stepped up and came out of retirement, in some countries increase the pool of healthcare workers to help with the massive need for more knowledgeable nurses, as well as giving them the support and needs they require to successfully perform their job in a manner that isn't detrimental to their health.

Similarly to the previous article the mental states and effects were discussed within this article written “Fear of COVID-19, psychological distress, work satisfaction and turnover intention among frontline nurses”, a study was designed to test the relative fear COVID-19 caused on nurses psychologically, and the effect on active turnover rates within the industry. Many nurses who reported a part time job or who were not given correct COVID-19 training experienced heightened fear of the disease, “As unmanaged anxiety or fear related to COVID-19 may potentially lead to long-term effects on nurses' work performance and job satisfaction, leading to frequent absenteeism and eventual turnover (De los Santos & Labrague, 2020,pg.3)”. The ability to acknowledge the fear and anxiety being experienced by nurses especially during a pandemic is vital to maintaining morals and the mentality of the nurses who are getting us through the outbreak. When these nurses don't get the support they need to maintain their psychological states you see them begin not showing up and eventually having a switch of careers and these nurses go in a different direction. The study used a specific, “7-item unidimensional scale was answered by nurses using a 5-point Likert scale which ranged from 1 (strongly disagree) to 5 (strongly agree). This scale is the most widely utilized instrument to measure fear of COVID-19 and has been used by several researchers from different disciplines (Bakioğlu et al., 2020,pg.4”, they were able to use this likert scale to accurately identify the level of fear that was expressed specifically within registered nurses who maintained a full time job or part-time within a private or public hospital that specifically provides services to COVID-19 patients. They found that although most, 95.8% of nurses, knew about the existing COVID-19 protocols only about 50% of them actually were involved in physical training relating specifically to the safety measures and care for COVID-19 patients, “The independent *t* test

showed a significantly higher mean scale score on the Fear of COVID-19 Scale in part-time or contracted nurses than in full-time nurses ($t = -2.492, p = .013$). Moreover, nurses who had not attended COVID-19-related training had a higher mean scale score on the Fear of COVID-19 Scale than those who had attended such training ($t = -2.349, p = .020$). Pearson's correlation result showed a significant negative correlation between Fear of COVID-19 and job satisfaction ($r = -.155, p = .012$). Further, Fear of COVID-19 had significant positive correlations with psychological distress ($r = .468, p = .001$), organizational turnover intention ($r = .295, p = .001$) and professional turnover intention ($r = .188, p = .002$) (Table 3) (De los Santos & Labrague, 2020, pg.6). Throughout the pandemic COVID-19 has instilled fear differently in everyone and especially within nurses, this study shows the active effect that COVID-19 has on nurses taking care of the patients affected by this disease. Not only does this show the fear that COVID-19 affects nurses but as well the affect a lack of training has on nurses and how this lack of training turns into regressed feelings with their job and creating many nurses to turn away, this training that can be carried out through and after the pandemic to better equip nurses and better help them maintain their mental state as well as keeping the nurses that support our healthcare systems in a place they can thrive and continue to help their patients.

The impact felt by the nurses was more than the psychological, there has been an influential impact throughout the nursing industry including those still studying to become one. Although it is a great opportunity for many to learn the field and have plenty of clinical experience, time that's needed to graduate in order to become a nurse, it creates a new problem within learning stages of the nursing field. As discussed in the article "Clinical placement experience of nursing students during the COVID-19 pandemic: A cross-sectional study", a

study was performed to learn about the experiences of the students who experienced clinical placement during the COVID-19 pandemic. “The final questionnaire comprised five dimensions: demographics and work environment; perception of infection risk; self-efficacy in COVID-19 related competencies; support and communication during clinical placements; and resilience”(Dorien, et al.,2021,pg.2). The study looked towards any nursing student that wanted to participate looking to see responses that correlated with the increased workload that these students would experience within their clinical placement, “the support of supervisors and preceptors is crucial here, and the creation of an open and supportive culture in which students can develop themselves to the fullest is once again underlined”(Ulenaers et al.,2021,pg.6). This increased pressure and workload during the pandemic has contributed towards the continued need for more nurses and has affected everyone down to those just beginning in the industry.

This impact seen on the nursing industry has an immediate effect on students' ability to learn and continue to increase their knowledge within the field of nursing. Studies have shown that even without the additional stress and factors of COVID-19 going through your clinical trials can be stressful and create anxiety within many individuals who go through it. With the additional barriers created by COVID-19 it had become increasingly harder for students to learn within an environment that was already stressful without the additional fears of infection and spreading the virus that they were there to help protect people from. Many of these hurdles experienced by those within their clinical trials has caused them to begin questioning themselves and as well as whether or not they are going to continue the program and for some are pushed out of a field they may normally would have been able to do well in. COVID-19 impacts more than those already within the field, it has continued to impede on those trying to enter and continuously increasing the need for more nurses.

The ability for these nursing students to learn from coaches and teachers who are present is necessary for them to learn well enough to feel confident in themselves to continue their career within nursing. Many of the students experienced struggles when dealing with the change of environment, especially when they haven't gotten used to the environment they started out in as well as only having plenty of opportunities in places that don't give the same learning opportunities as those who learn in more clinical settings.

The COVID pandemic has had a significant impact on everyone's mental health, but most heavily on those who had to witness those thousands of deaths. Most significantly, the COVID pandemic has affected numerous nurses working in the medical field. Comparing nurses to other clinician groups, worldwide research indicates that nurses are more susceptible to the negative psychosocial effects of the pandemic, such as anxiety, depression, and other psychological problems. One of the most difficult things to observe and experience is the death of loved ones.

Many people were dying during the COVID pandemic, but many others were unaware of what was happening or what was causing it. It was quite difficult for a medical professional to see this given their pledge to constantly care for and protect the sick. Many nurses faced dangers such as working the night shift, lacking training, worry about spreading illness to family members, and unfavorable criticism from families. "During the pandemic, healthcare professionals (HCPs) are at significant risk of adverse mental health outcomes resulting from limited clinical knowledge about the virus"(Enyew Mekonen,2021,pg.2). The fact that nurses and doctors didn't know what they were dealing with or what was killing so many people had to be brought up.

Medical students are taught about the risks associated with certain diseases, but coming face to face with something you have never seen before can be extremely terrifying. Since COVID-19 first arose in a separate country, no textbook described what it actually was. Compared to nurses who had a guideline for the comprehensive management of COVID-19, those without a guideline had a three times higher likelihood of experiencing anxiety. Due to nurses being afraid of hurting their loved ones, nurses who had family members were more likely to experience mental effects. “Having a chronic disease increases the risk of developing depression by nearly five times. This finding was supported by a study conducted in Wuhan, China.²⁵ This might be due to patients with chronic diseases who are at increased risk of developing depressive symptoms resulting from fear, loneliness, excessive worry, lack of social support, social isolation, and lockdown”(Enyew Mekonen,2021,pg.12). Complete isolation has an impact on the mind, and loneliness raises the possibility of experiencing a sense of meaninglessness in life. When you witness so many deaths, you begin to fear for your own death or the death of someone you love. When there is nothing you can do to escape, the mind might spiral out of control.

With the ease of falling out of control for these nurses substantially increasing with COVID-19, you need to have people who are strongly committed to their duties and jobs in order for them to be able to handle the more intense workload as well as the intensity of the situation while maintaining their duties on a professional level. Within the article “Factors affecting nurses' professional commitment during the COVID-19 pandemic: A cross-sectional study” a study was designed to determine what level of commitment was maintained by nurses throughout the COVID-19 pandemic.

The ability to determine how committed nurses were able to maintain can show us how much the stress that was endured during the pandemic persists for so many and will cause them to quit and choose a different profession as well as our inability to assist those that get us through our hardest times during a pandemic. Our abilities to address the way our nurses experience these times will decide if we will ever reach a point of basic healthcare that can be accessible to anyone, due to a lack of commitment by those within the nursing career and with such a high turnover rate that turns people away the need for nurses continues to increase. “ Various physiological and psychological negative situations experienced by health care professionals due to the COVID-19 pandemic have been shown to increase their perception of organizational obstruction and decrease their professional commitment, which can in turn accelerate the turnover process of health care professionals” (Secil et al.,2020,pg.2). Throughout the pandemic the severity of it has increased anxiety, pressure, and fear within nurses and for some cause a drop in commitment and when they are not met with acceptance from their management to support them we will continue to lose nurses. Within the study they were able to identify key variables that were directly related to affecting a nurse's ability to stay committed.

The first key variable was the thought of leaving the profession. Those seen to have already had thoughts of leaving the profession were most affected by the addition of stress and other factors from the pandemic. The second key variable was a nurse's choice in profession, those who actively chose to be a nurse rather than those who felt they had no other options or who so to speak fell ‘into the profession’, those who chose to be a nurse were found to have more commitment to their careers.

After a nurse's choice in profession, comes a nurse's family support, when a nurse has higher conflicting pressures from their families due to the already heavy workload and stress

from a nursing job, this can cause even more pressure at home which causes a nurse to strengthen their intention to leave the profession. As well as family support being a key factor, perception of organizational obstruction which, “keep employees from reaching their goals and harm their well-being” (Gibney et al.,2009,pg.9). Factors such as a stressful work environment, obstruction of career goals, lack of support from colleagues and problems with managers increase the perception of organizational obstruction, the results of which increase nurses' intentions to leave the profession and decrease their professional commitment.

Something that lacked heavily during the pandemic was support within one's organization which can cause many to turn away from the profession. One of the key variables in nurses' ability to maintain commitment is job satisfaction. “Job satisfaction is defined as the opportunities a profession provides to achieve or facilitate one's work values (Li et al.,2019,pg.9). Job satisfaction is an important factor in maintaining a sufficient nursing labor force and in providing high-quality health care.” When working in a safe work environment such as the accurate safety measures when dealing with sick patients but as well as from harassment, threats and assaults, a workplaces ability to ensure safety from these things allows an environment where nurses feel they can stay and continue to be committed in. The final variable affecting commitment levels was educational status, those with higher learnings were more committed to staying within their career and supporting their community through the pandemic.

Many Committed nurses across the world are working in our clinics, wards, and units of hospitals. Sometimes they are working until they are physically exhausted, and in certain regions they are dealing with a lack of essential supplies while doing so. We observe that there are significant shortages of necessary nursing supplies, including masks, gloves, and gowns. In light

of this pandemic's rapid expansion, it is clear that there is a greater demand for nurses than ever before. Despite projecting a sense of composure and professionalism, nurses, like everyone else, struggle with anxiety about the future and worry about what would happen to their patients, loved ones, and anybody else they care about. Many people are concerned that nurses' ability to offer care may be affected by the increasing workload and the number of nurses who will be affected by the virus. Due to the recent shortage of nurses, there has also been a push for recently retired nurses to go back to work in the United Kingdom.

This pandemic has an impact on every part of nursing activity, and healthcare facilities have used a range of strategies to meet the clinical demands of nursing education students. Some organizations prohibit student presence, while others accept healthy kids. It has been hard for nursing students to be exposed to patient care due to the fact that the classes are online. Professors have to find the ability for them to be able to be exposed enough for them to be able to be ready for their exams. It definitely made nursing a very hard field, that's why the result of this led to a shortage of nurses.

The continued studying of what has been causing the staffing shortage was written within the article, "Data Brief: Health Care Workforce Challenges Threaten Hospitals' Ability to Care for Patients: AHA." . Nurses continued to see more hardships through their career within the time of COVID-19 than any other causing countless amounts of them to turn away from the field continuing to add to the staffing shortage seen everywhere throughout America's healthcare force. Many hospitals experience a mass push of patients but still experienced many nurses who stuck it out and managed to keep up with the amount of patients, but as years have gone by these nurses have started experiencing burnout and an inability to continue to push through the

hardships. This shortage pushes us as a whole farther and farther from obtaining healthcare for everyone and this would only be possible with a strong healthcare force. Within the article you find that hospitals are experiencing an increase in spending in most every category including a 15.6% increase to their labor force without any increased funding. Studies found that the cost of the staffing shortage as well as the cost to supply PPE to nurses within the hospitals, has led most hospitals to be either operating in the red or operating at 10-11% below pre-pandemic levels.

The staffing shortage that was seen during the pandemic isn't something that we're going to see just during then, it's going to be something that we're experiencing long past the pandemic and something that will continue to affect us. The shortage in nurses that was accelerated by the pandemic must be addressed with more funding and better resources for nurses to mentally cope with the experiences they endure during the crisis that is the pandemic as well as the pressure that was put on them to step up and take care of their community in every way they could.

Not only is there a staffing shortage that has affected the industry heavily but COVID-19 caused even more struggles that nurses have to face and much of the time these struggles are suffered the hardest by those newest to the field. Many nurses just experiencing the field for the first time have become more and more put off from the nursing field as a whole from their initial experience. What many of these nurses experienced during the pandemic was the truest hardships you can see, with a lack of supplies, room, and knowledge available for all these patients a pressure builds on the backs of the newest nurses. We can observe some of the effects that the pandemic has on the young careers of nurses just starting out in a study performed through an online survey “of BSN, RN-BSN, and DNP students who graduated between December 2019 and April 2020 (n = 82), including demographics, employment information, and free-response questions about the impact of the pandemic on their transition experiences,

post-graduation plans, and perceptions of nursing.”(Crismon et al.,2021,pg1.). Within this study we can see the correlation between the pandemic and the effect that it had on transitioning nurses from their schooling to their careers. The nurses that started their careers during the pandemic faced higher nurse to patients ratios, shifting roles, changes in nursing education and training, as well as continuously changing and updating of policies and procedures. Facing all these challenges for many nurses who report a lack of ability and especially with higher risk patients require more mentorship as they are still learning and yet they’re unable to receive it due to a lack of nurses and too many patients requiring attention. These nurses that have experienced this have found themselves falling into the attrition rates and fleeing the industry feeling hopeless and sinking in the abyss of nurses who become too overwhelmed to continue.

These overcoming falling rates that have been exacerbated by the pandemic will continue to last beyond the pandemic and so, the nursing crisis will continue a downward spiral with our health care industry. In the findings of the study they identified many of the participants responded with not only frustrations with the licensing and ability to actually begin their career but also with the difficulty of finding the job they believed they would find. During covid the shutting down of many of the sites where the licensing is processed caused a binding effect on those waiting for theirs to begin their jobs. Some were even able to find jobs but hadn’t received their licenses to be able to start and their start days were pushed farther and farther. Not only was it harder for those during the pandemic to be able to receive their licensing but actually finding a job became not so easy and for many had to take jobs in fields and areas that many never wanted to go but didn't have a choice.

Many of those who ended up finding jobs began to experience many of the issues dealt with everywhere in the industry, we can find details on their experiences within the article, "Implications for COVID-19: A systematic review of nurses' experiences of working in acute care hospital settings during a respiratory pandemic", they identified key aspects of the experiences endured by nurses through pandemic and epidemic situations. Nurses that experienced the trauma and hardships of the COVID-19 pandemic have found themselves lost and with an inability to process the extreme nature of what they have had to endure. This includes the intensity factor of taking care of that many patients at a time, especially the many young nurses who were expected to pick up the calling for the next generation of nurses while learning on the spot.

There are many nurses who continue to struggle with the ability to feel safe in their work environment due to a lack of PPE(Personal Protective Equipment), this having been going through a major shortage during the pandemic causing many nurses to struggle with the occupational risk of their work. These same nurses had to handle the fear of bringing this deadly disease that they watched kill hundreds into thousands of people everyday and hope that they do everything right and in their power to not bring it home to their own loved ones. For many this became too much of a burden for them to carry and caused them to leave the industry and continue to give a bad reputation to the industry as a whole and continuing to add to the nursing crisis.

Though some nurses, many of the more veteran nurses felt that it was a duty of theirs to endure and stick through for the community and those that needed them through the time of crisis. As the nursing industry ages and many new nurses begin to take over, the younger generation as well as the younger female nurses are less likely to stay and endure the additional

risks of the workforce that the older men and doctors would. During this study they were able to distinguish that after all the findings the continuation of the nursing industry and their ability to stand during the hardest of times lies on the back of those we've appointed ourselves,"Governments, policy makers, nursing groups and health care organizations must closely monitor nurses' support needs both during the pandemic or epidemic and in the following period and be agile and responsive to these with meaningful support systems. Without this support nurses are likely to experience significant stress, anxiety, and physical side-effects all of which can lead to burnout and loss of nurses from the workforce."(Fernandez et al.,2020,pg.7). Without the support of our government and policymakers we will always lack the appropriate resources capable of making healthcare accessible to all and for most importantly be able to handle the patient load of a pandemic.

Chapter 3:Methods

When searching for articles and scholarly pieces, many factors were used to assess the relevance to the questions being asked. The first factor being used was, if the question being asked in the article/paper must be related to the overall effects attributed to COVID-19 on nurses. The second factor was searching through the thousands of scholarly articles but looking at the ones with key words such as, NURSE, NURSES ,COVID-19, PSYCHOLOGICAL DISTRESS, NURSING SHORTAGE, NURSING CAREER, NURSING STUDENTS, DEPRESSION, ANXIETY, STRESS, IMPACT ON NURSES, NURSES HEALTH, MENTAL HEALTH, NURSES EXPERIENCE. All articles were reviewed based on their use of those keywords that would identify articles, written in English, that would have statistical and reviewed information about the experiences of nurses during this time.

Chapter 4: Findings

Evidence from across the nation suggests that nurses are dealing with traumas like fear of contracting an infection, stress from witnessing so many deaths, and finally worry about their loved ones. In multiple scientific articles reviewed and those of which were included in this paper, all showed data that nurses who are entering in the field are experiencing a lack of attention and work overload on an already lacking education as well as insufficient support from existing staff members who are too preoccupied with other matter, problems that are not only relevant to the COVID-19 pandemic but the future of nurses. Those entering the fields have also been recorded experiencing problems being able to start in the field after they have received licensing and those who do start are thrown in many unfavorable positions and are expected to thrive. Results have also shown us that the lack of funding caused a massive shortage of supplies which only added to the continual stress and was detrimental to the mental state of nurses who were fighting to keep our nation in motion all the while being underpaid and receiving a lack of mental healthcare and an ability to help themselves.

These problems that were experienced by both veteran and young nurses will continue to reoccur in the future due to the inability of our government to correctly address the pay shortage in the nursing field as well as the funding issue also displayed within articles within this review. These funding issues that continued to cause problems through the pandemic were merely brought to light by the pandemic, these issues have been left alone in the nursing industry and never addressed. Through the many studies we can observe that the feelings of nurses are

felt the hardest in the healthcare systems that struggle to fund those within the healthcare industry. The mental state of nurses has gone unchecked and ignored and was expected of the nurses to just “Deal with it” but with the ability to see the effect of the workplace environment has on these nurses we can understand why the COVID-19 pandemic has only enlightened the problem that is nurses leaving the workforce and a constant shortage that exists and will continue to exist.

Chapter 5: Conclusion

As a health care practitioner during the COVID-19 pandemic, I recall being wary of social interaction because of my line of work. As an assistant to an oral surgeon, I was constantly exposed to people and danger, especially because I was working with people's mouths. Compared to some of my peers, my exposure was always more. I would be careful not to approach somebody I cared about. I actually felt terrified and retreated from a lot of people. My goal was to protect my people. For someone who aspires to work in the healthcare industry, it made me wonder if I would have a future there or if I would have to live with that fear forever. I discovered that there would always be dread in the world, that there will always be one thing after another, and that this will not be the only pandemic.

Most people who want to help people embark on the path to becoming nurses. However, just because they are passionate about something doesn't mean they are ready for a situation like the COVID-19 pandemic. The COVID-19 pandemic has harshly demonstrated to the world the vulnerability and interconnectedness of the many systems on which we depend on a daily basis. For the first time, many people recognized the importance of nurses and other health professionals not only in patient care but also in community health. The problems that arose

during the covid pandemic were that we realized we needed to provide more mental health access to nursing. Working in a hospital is difficult; there is always so much pressure on you, especially if you are a nurse during a pandemic; nurses would have been better prepared if they had been mentally prepared to deal with so many deaths. If nurses had better access to mental healthcare and were able to take these so-called 'mental health days' that have begun being used, there's a possibility that nurses would respond positively and be able to work better and mentally feel more stable. Hospitals should have felt obligated to raise pay for their employees because many nurses went months without seeing their loved ones. In the same way that these nurses gave so much to their patients and community, hospitals in the future should work to improve themselves for the care of their employees. To solve, or at least begin to solve, the nursing shortage, the government must be willing to invest in its nurses and make nursing school more affordable so that many people do not feel turned down. Invest in an equitable work environment because fewer nurses means they have to take on more patients, and the level of work will not be the same because it is too overwhelming.

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