

The Opinions and Experiences of Nurses on One Year with the COVID-19 Pandemic: A Qualitative Study

Hemşirelerin COVID-19 Salgını ile Geçen Bir Yıla İlişkin Görüş ve Deneyimleri: Kalitatif Bir Çalışma

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Abstract

This study aimed to reveal the opinions and experiences of nurses who took an active role in the fight against the pandemic during the one-year period after the first reported COVID-19 case in Türkiye. This qualitative, descriptive study used an in-depth, individual interview method. The COREQ Checklist was used in the study. Data were collected from semi-structured interviews conducted in 2021 with 11 nurses who were recruited via purposive and maximum variation sampling. Data was analyzed used to content analysis. Content analysis of the data revealed three main themes ("Individual Impacts of COVID-19 on Nurses," "Working Experiences of Nurses During the COVID-19 Pandemic," and "The Effects of COVID-19 on the Nursing Profession") and eight subthemes. This study's results revealed that the nurses who worked actively during the COVID-19 pandemic were psychologically, physiologically, and socially affected though they gained some achievements while responding to challenges in the work environment during the first year of the pandemic. In addition, in this period, it was determined that their thoughts and wishes about the nursing profession and the role of nursing differed.

Keywords: COVID-19, pandemic, nurses, qualitative research

Özet

Bu çalışma, Türkiye'de ilk bildirilen COVID-19 vakasından sonraki bir yıllık süreçte, salgınla mücadelede aktif rol alan hemşirelerin, salgınla mücadeleye ilişkin görüş ve deneyimlerini ortaya koymak amacı ile yapılmıştır. Bu nitel, tanımlayıcı çalışmada derinlemesine, bireysel görüşme yöntemi kullanılmıştır. Çalışmada COREQ Kontrol Listesinden yararlanılmıştır. Veriler, amaçlı ve maksimum çeşitlilik örnekleme yoluyla belirlenen 11 hemşire ile 2021 yılında gerçekleştirilen yarı yapılandırılmış görüşmelerden toplanmıştır. Veriler içerik analizi kullanılarak analiz edilmiştir. Verilerin içerik analizi üç ana temayı ("COVID-19'un Hemşireler Üzerindeki Bireysel Etkileri", "COVID-19 Pandemisi Sırasında Hemşirelerin Çalışma Deneyimleri" ve "COVID-19'un Hemşirelik Mesleği Üzerindeki Etkileri") ve sekiz alt tema belirlenmiştir. Bu çalışmanın sonuçları, COVID-19 pandemisi sırasında aktif olarak çalışan hemşirelerin, pandeminin ilk yılında çalışma ortamındaki zorluklara yanıt verirken bazı başarılar elde etmelerine rağmen psikolojik, fizyolojik ve sosyal olarak etkilendiklerini ortaya koymuştur. Ayrıca bu dönemde, hemşirelerin hemşirelik mesleğine ve hemşirelik rolüne ilişkin düşünce ve isteklerinin farklılaştığı belirlenmiştir.

Anahtar kelimeler: Covid-19, salgın, hemşireler, kalitatif araştırma

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1. Introduction

Pandemics have been an important global issue that has had devastating impacts on community health and healthcare systems of countries throughout history, causing social and financial challenges, as well as high numbers of deaths (Madhav et al., 2017). The COVID-19 virus first appeared in Wuhan, China in December 2019, quickly spreading to the entire world and causing severe acute respiratory syndrome and pneumonia (WHO, 2020). After its worldwide spread, resulting in the loss of thousands of lives, the World Health Organization (WHO) declared COVID-19 a pandemic on March 11, 2020 (WHO, 2020). The first case of the virus in Turkey was detected on March 10, 2020 (TMOH, 2020). Due to the increased need for intensive care capacity for large numbers of people infected over a short period during the pandemic, the role, and importance of the nursing profession were brought to the forefront of healthcare agendas to maintain essential health services and protect public health (Badanta et al., 2021; Baykara & Eyübođlu, 2020). Nurses have been fighting on the front line since the beginning of the COVID-19 pandemic and continue to effectively manage its control (WHO, 2020).

Many national and international studies have examined the effects of the COVID-19 pandemic on the nursing profession and the critical roles and responsibilities of nurses. The effects of COVID-19 have revealed the need to improve the nursing work environment and healthcare policies, as nurses and other healthcare providers have faced many difficult conditions during this period (WHO, 2021). According to the results of previous studies, nurses stated that they faced many work-related challenges such as lack of adequate personal protective equipment, staff shortages, work overload, chaotic work environments, long shifts with short recovery periods, assignments to pandemic clinic departments in which they had no experience, lack of training and information concerning the management and care process of communicable disease outbreaks, and challenges related to personal benefits such as compulsory unpaid leave or unpaid overtime (Akkus et al., 2022; Kürü, 2022; Nowell et al., 2021; WHO, 2020). In addition, studies found that nurses experienced extreme levels of anxiety, burnout, and stress, as well as psychological and physiological problems resulting from isolation from families and social circles, the rapidly increasing number of COVID-19 cases and subsequent deaths, societal stigma and discrimination, increased responsibilities related to the health of families and friends, inadequate support systems, and lack of experience in communicable disease management (Akkus et al., 2022; Joo & Liu, 2021; Kalateh Sadati, 2020; WHO, 2020).

Because nurses faced many changes as frontline healthcare professionals during the pandemic, the World Health Organization declared 2020 the International Year of the Nurse and Midwife (WHO, 2020). These changes during the pandemic also affected the safety and quality of nursing care (WHO, 2020). Therefore, an examination of the experience and opinions of nurses regarding this period can help healthcare institution managers and health policymakers to better meet the needs of those working during the pandemic, as well as to identify and understand the working conditions and problems experienced by nurses. The identification of areas of improvement in the nursing work environment and pandemic management can empower nurses and establish a scientific basis that managers of health institutions and health policymakers can use to plan and develop new strategies and initiatives.

2. Method

2.1. Aim

This study was conducted to reveal the opinions and experiences of staff nurses who took an active part in the fight against the COVID-19 pandemic during the one-year period after the first case was reported in Türkiye

2.2. Design

This study used a qualitative and descriptive design. The Consolidated Criteria for Reporting Qualitative Studies (COREQ) were used in the design and reporting of the study.

2.3. Participants

This study used the purposive and maximum variation sampling (Polit & Beck, 2012). Sample selection based on nurses who had at least one year of professional experience, had been actively working in the hospital during the first year of the Covid-19 pandemic, and willingly volunteered to participate in the study. Researchers terminated the interviews when the concepts and processes potentially answering the research questions began to repeat and data collection continued until data saturation was achieved. The study's sample consisted of 11 nurses and the sociodemographic characteristics of the participants are presented in Table 1.

Table1. Participants' Characteristics (n: 11)

Variables	n	%
Age	3	27
≤ 27	8	73
>27		
$\bar{x} \pm SD$ (27 ± 5.34)		
Gender		
Female	11	100
Male	0	0
Marital status		
Married	7	64
Single	4	36
Children		
Yes	1	9
No	10	91
Educational level		
Bachelor's degree	7	64
Postgraduate degree	4	36
Type of institution		
University hospital	7	64
Private hospital	4	36
Unit		
Inpatient	2	18
Intensive care	9	82
Total experience		
≤5 years	9	80
6–10 years	1	10
11 years	1	10
$\bar{x} \pm SD$ (6.43±5.67)		

Table1. Participants' Characteristics (n: 11) (continued)

Experience in current institution		
≤2 years	4	36
3–5 years	7	64
x ± SD (3.72±3.20)		
Experience in current unit		
≤2 years	5	45
3–5 years	6	55
x ± SD (3.72±3.20)		
Type of shift work		
Day shift	1	25
Alternate shifts (day and night)	10	75

SD= Standard deviation

2.4. Data collection

Data were collected between 14 May 2021 and 30 May 2021 through online interviews, using an introductory information form consisting of 10 questions about sociodemographic characteristics and a semi-structured interview form consisting of six questions (Table 2). Pre-interviews were conducted via phone to inform participants about the study, determine an interview date and time, and receive informed consent from each participant. The interviews were performed through an online meeting platform. The interviews were audio-recorded. The researcher ensured that participants had access to a suitable environment during online interviews. All interviews were conducted by a researcher trained in qualitative studies, and field notes were recorded during the interviews, each of which took an average of 30 to 45 minutes to complete. The data collection process continued until data saturation was achieved. At the end of each interview, the researcher summarized the session, and participants were asked whether there was anything they wanted to add or remove.

Table 2. Semi-Structured Individual In-Depth Interview Questions

Q1	Reflecting on the last year of the pandemic, what has affected you the most as a nurse? Can you share any experiences you have had during the past year?
Q2	What are your feelings about having worked as a nurse over the past year?
Q3	How you define the role of nurses in the fight against the pandemic?
Q4	What are some of the difficulties you experienced while working as a nurse during the pandemic?
Q5	How have you grown as a nurse during the past year? What kind of knowledge or skills have you gained, or what has empowered you?
Q6	Thinking about the past year of the pandemic, what kind of feelings and opinions would you like to share with others? Is there anything else you want to add?

2.5. Data analysis

Data were analyzed using inductive content analysis, in accordance with the literature (Vaismoradi, Turunen, & Bondas, 2013). The interviews were transcribed, and the data were encoded line-by-line and subjected to content analysis by two separate female researchers, first researcher has PhD in

nursing management and faculty member and second researcher is PhD student, experienced and trained in qualitative research. The themes and subthemes were finalized in joint meetings (Polit & Beck, 2012).

2.5.1. Rigor and trustworthiness

Consent of participation was received from each participant, and interview questions were open-ended in nature. The same researcher conducted all interviews to achieve conformability; this researcher summarized each interview session for participants, asking for additional feedback and response. Both researchers identified and agreed upon interview themes and subthemes to ensure consistency and validity of the data. The researchers used COREQ in the reporting of this study and recorded sample direct quotations from the interviewees. Due to time constraints, interviewees did not receive interview transcripts for additional comment/correction.

2.6. Ethical considerations

Before conducting the study, ethical approval was granted by the Ethics Committee of a Koç University Social Sciences Research Ethics Committee (2021.168.IRB3.077) and permission was obtained from the Ministry of Health Covid-19 Scientific Research Studies Commission.

The purpose of the study was explained to all participants, and both written and verbal informed consent was obtained. Participants were informed that participation was voluntary and that they were free to withdraw from the study at any time. They were also informed that interviews would be recorded and that participants would not be identified by name.

2.7. Limitations of the study

This study is limited to the opinions of nurses who participated in the study. Another limitation is that due to time constraints, transcriptions of the interviews were not shared with participants for retrospective feedback or revision.

3. Results

Results of this study's interviews revealed three main themes: "Individual Impacts of COVID-19 on Nurses," "Working Experiences of Nurses During the COVID-19 Pandemic," and "The Effects of COVID-19 on the Nursing Profession." These themes also included eight subthemes (Figure 1).

Theme 1: Individual impacts of COVID-19 on nurses

This theme was divided into three subthemes: "Psychological Impacts," "Physiological Impacts," and "Social Impacts".

Subtheme 1.1: Psychological impacts: Nurses stated that they had faced many challenges, experiencing helplessness, anxiety, and burnout.

"I experienced very hard times. I suddenly found myself in a place of uncertainty and emptiness. You might say it was like a void, with a clear beginning but an unknown end. I was also concerned about my own health and the health of my family and friends." (P1)

"I was badly affected by the fact that patients were constantly dying in front of us, and that we could not do anything. I felt the desperation in my bones." (P3)

"I just felt tired and exhausted. I felt so exhausted that there were no positive emotions left in me. My body, my heart, my soul, were just tired..." (P7)

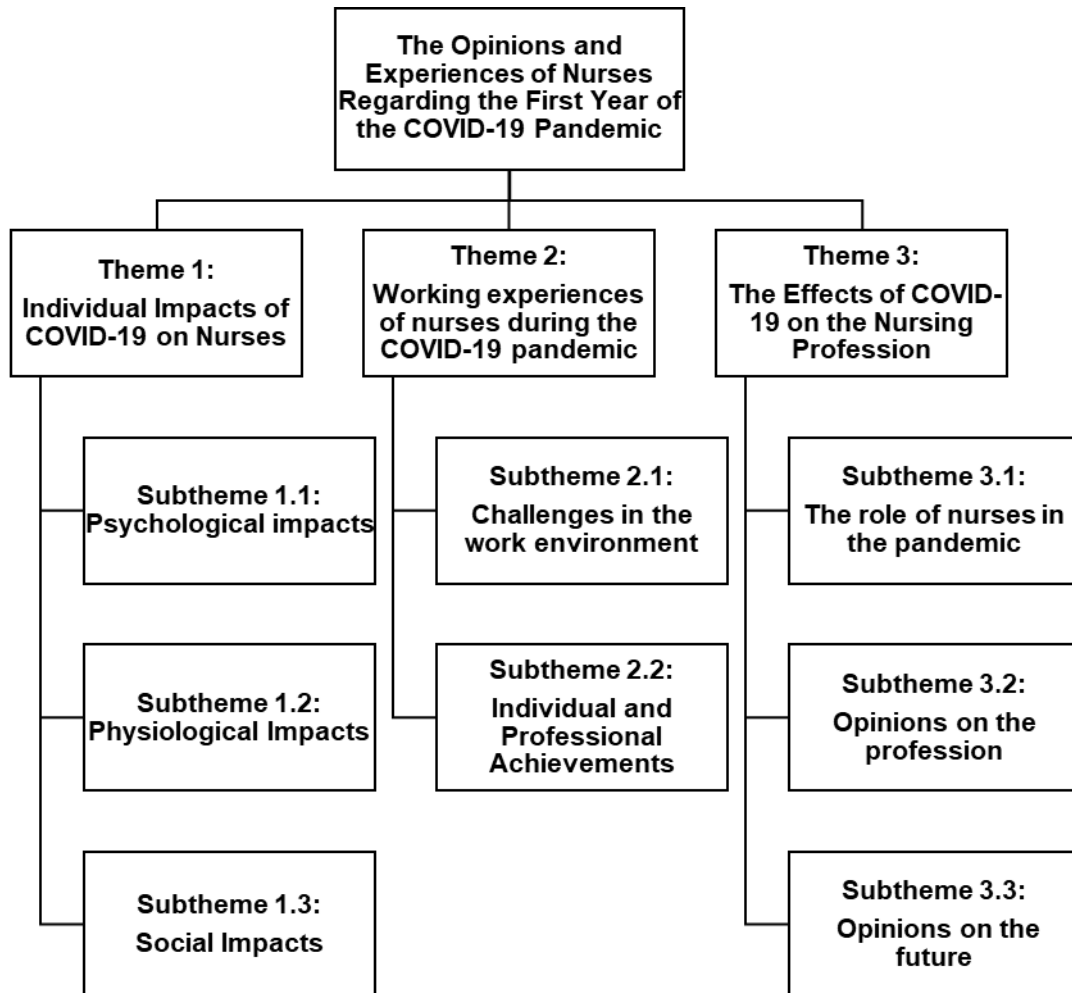


Figure 1. The Opinions and Experiences of Nurses Regarding the First Year of the COVID-19 Pandemic: Themes and Subthemes

Subtheme 1.2: Physiological Impacts: Nurses mentioned that they were also physiologically affected when providing care for COVID-19 patients, experiencing excessive sweating, discomfort caused by wearing a mask, fatigue, and the inability to eat, drink, or move freely.

"We had been working for more than a year in masks and coveralls, all sweaty, and with infected patients, those no one would want to be near to for even five seconds." (P3)

"We were physiologically affected because we were sweating in coveralls and trying to help other people when we could not even move. We had to work wearing two or three layers of masks, our skin irritated, and oxygen running out until we felt dizzy." (P9)

“Sometimes we worked so hard that we did not even have time to drink water or even change our uniforms or masks that were soaked in sweat.” (P8)

Subtheme 1.3: Social Impacts: Nurses noted that their social lives had been restricted during the pandemic and that they were adversely affected because of a lack of social interactions with family members, children, and relatives.

“The idea that my family's health was at risk, in addition to my own, really wore me out. I have a baby, and I couldn't see him because I was always working in the COVID-19 services.” (P4)

“Our social lives were restricted like everyone else, maybe even more. We were so busy for more than a year and had no time for ourselves; it was so exhausting.” (P6)

Theme 2: Working experiences of nurses during the COVID-19 pandemic

This theme was divided into two subthemes: “Challenges in the Work Environment” and “Individual and Professional Achievements.”

Subtheme 2.1: Challenges in the work environment

Within the scope of this subtheme, nurses mentioned work environment-related issues such as lack of adequate equipment, challenges related to fighting an unknown disease, sudden deterioration in patients, lack of communication with physicians, staff shortages, mobbing, and lack of managerial support.

“The most challenging situations for me were feelings of helplessness while fighting an unknown disease, patients suddenly deteriorating, not being able to reach physicians, and working with inadequate equipment.” (P11)

“We were appreciated for a while, but it didn't last very long. We were tired of being forgotten and feeling worthless as if we were just expected to work in very difficult conditions without getting what we deserved.” (P7)

“Staff shortages, the unfair management system, mobbing, and the lack of managerial support made it very difficult.” (P11)

Subtheme 2.2. Individual and Professional Achievements

Nurses also emphasized that they gained individual achievements in patient care, planning, manual dexterity, knowledge of the disease, crisis management, problem-solving, and teamwork.

“We have learned how to manage a crisis and work as a team.” (P4)

“We have learned how to solve problems, manage situations, and support each other professionally. I have realized that you always do everything you can for patients, no matter the conditions and that nothing is impossible for someone who wants to do something.” (P7)

“During this period, I gained extensive knowledge about the diagnosis and treatment methods of ARDS that developed after COVID-19. I've gained foreknowledge about what to do with each patient, and

when. My dexterity and planning improved as I learned how to stay in the room for the shortest possible time.” (P10)

Theme 3: The Effects of COVID-19 on the Nursing Profession

This main theme was divided into three subthemes: “The Role of Nurses in the Pandemic,” “Opinions on the Profession,” and “Opinions on the Future.”

Subtheme 3.1: The role of nurses in the pandemic

The participants discussed the role of nurses in the pandemic, mentioning that they played the most important role, including roles such as caregiver or educator.

“Nurses played the most important role in the pandemic. I think we were like the columns that prevent a house from falling down. We were the ones who kept the system from collapsing. We were like soldiers deployed to fight on the frontline without ammunition.” (P3)

“I think our role was unarguably important during this period. We tried so hard to do everything, from providing care to educating.” (P5)

Subtheme 3.2: Opinions on the profession

The majority of nurses stated that by the end of the first year of the pandemic, their opinions of the profession had changed; they questioned the profession and wanted to leave their jobs, wishing that the value of nursing was more appreciated.

“Even when we worked like soldiers on the frontlines of war, we were held responsible for everything. Our leaves were taken away, and contrary to what is believed, there was no additional financial assistance. We were forced to work in very bad conditions and with a lack of equipment. As a nurse who used to love her job, I became exhausted and started to hate it.” (P1)

“Now, I am working to survive instead of for my love of the job. I want to quit.” (P2)

“After feeling exhausted from work, I feel that I appreciate my service as a nurse when I have a two- or three-day break, but I sincerely wish that people would understand the value of my profession and be more aware.” (P7)

Subtheme 3.3: Opinions on the future

Based on their experiences during the first year of the pandemic, nurses shared their opinions about recovery, respect for the nursing profession, better working conditions, fair compensation, and improved leadership.

“I expect that our profession is respected because nursing is not a job one enters solely for financial gain; our work cannot be paid back. All we want is to see improvements in our rights and working conditions, to get through this period, to feel valued, and to know that people are acting consciously.” (P4)

“May all humanity be well, and may we see days when we can care for our patients in our regular uniforms instead of stifling coveralls and equipment.” (P7)

“I hope that this pandemic will be a milestone for our country and that the importance of nurses will be recognized. People should understand that nurses are not only there to measure blood pressure or give injections, and I wish that our social lives were not so affected because of unfair distribution of income, even though we work willingly.” (P9)

“Our teachers and academicians working outside the field have tried to be our voice, but unfortunately it didn't last long. Perhaps we need more courageous, professional representatives and leaders to represent our profession, shoulder responsibility, use technology effectively, be aware of politics, and speak to our needs.” (P2)

4. Discussion

This study found that nurses who took an active role during the first year of the COVID-19 pandemic were psychologically, physiologically, and socially affected. Nurses experienced feelings of helplessness, anxiety, and burnout. In line with this study's findings, other studies have shown that nurses working during the pandemic were psychologically affected and experienced intense work stress, helplessness, anger, anxiety disorders, burnout, and depression (Akkus et al., 2022; Kürü, 2022; Kelley et al., 2021; Nowell et al., 2021; Joo & Liu, 2021; Simonetti et al., 2021; Fernandez et al., 2020; Kalateh Sadati et al., 2020). A study conducted in China found that nurses experienced higher anxiety levels during the pandemic than did others (Huang & Zhao, 2020). These findings indicate that the COVID-19 period has had an adverse psychological impact on nurses due to the traumatic experiences it has caused.

This study's results also showed that at the end of one year in the fight against COVID-19, nurses were exposed to adverse physiological changes such as excessive sweating, skin integrity issues, insomnia, and physical fatigue. Other studies also discuss similar physiological effects resulting from insufficient rest breaks and long shifts (Simonetti et al., 2021; Yildirim et al., 2021; Huang & Zhao, 2020). As a result of their interviews during the pandemic, Akkus et al. (2022) stated that in addition to causing allergies and skin reactions, working long shifts with personal protective equipment caused nurses to sweat and be out of breath, leading to exhaustion.

This study also determined that working during the pandemic restricted nurses' social lives and interactions with family members. Similar studies also found that due to intense working conditions and risk of infection, nurses spent less time with their families were less involved in social activities, and were therefore exposed to social isolation, alienation, and societal stigmatization (Akkuş et al., 2022; Li et al., 2021; Bagcchi, 2020; Singh & Subedi, 2020; Kalateh Sadati et al., 2020).

This study also showed that nurses faced difficulties in the work environment such as lack of adequate personal protective equipment and materials, challenges related to fighting and unknown disease, sudden deterioration of patients, lack of communication with physicians, long shifts, lack of staff, mobbing, and lack of managerial support. Other studies are consistent with these results, indicating that nurses were overworked, lacked knowledge about the care and management of a new disease, were not provided with adequate personal protective equipment, and were assigned to departments in which they lacked experience (Kürü, 2022; Badanta et al., 2021; Billings et al., 2021; Kelley et al., 2021;

Fernandez et al., 2020). While Akkus et al. (2022) and Nowell et al. (2021) found that nurses in some institutions had access to adequate personal protective equipment and materials, nurses' experiences have differed according to the institution, the institution's system of responding to the pandemic, and each institution's working conditions.

This study's results showed that despite their negative experiences, nurses also accomplished personal and professional achievements related to improved patient care, planning, dexterity, knowledge of the disease, crisis management, problem-solving, and teamwork. Other studies also reported that factors such as shared challenges and collective fighting spirit during the pandemic contributed to nurses' strengthened companionship and enhanced teamwork (Akkus et al., 2022; Billings et al., 2021; Kelley et al., 2021; Nowell et al., 2021). Özkan et al. (2022) stated that nurses working during the pandemic overcame inadequacies while treating different types of patient groups, becoming more confident as a result of improved professional competence. Moreover, Turkmen et al. (2020) stated that in addition to enhanced cooperation and interaction, nurses' and nurse managers' crisis management, decision-making, and leadership skills improved during the pandemic. In conclusion, the many public health- and work environment-related problems caused by the pandemic required nurses to constantly solve problems, manage crises, and act as a team, thus resulting in both individual and professional achievements.

According to this study's results, the pandemic affected nurses' opinions on the nursing profession, their roles, and the future of the profession. Nurses played a critical part in the pandemic's management, as they cared for COVID-19 patients for longer periods of time than did other healthcare professionals. Other studies also support this finding, indicating that nurses were on the frontline in caring for COVID-19 patients and improving public health, as well as in taking an active role in the fight against the disease within clinical, management, academic, and professional associations, thus increasing awareness of nurses' roles in the healthcare profession (Arcadi et al., 2021; Badanta et al., 2021; Akkus et al. (2022) found that in some institutions, other healthcare professionals (e.g., physicians and psychologists) avoided visiting COVID-19 patients, thus placing the responsibility of performing healthcare services and patient care on nurses; Cai et al. (2020) also stated that nurses considered it a moral obligation to work during the pandemic. These findings support the fact that despite the negative conditions in which they were required to work, nurses played a critical role in the care of COVID-19 patients, as well as in the protection and development of public health.

In addition, this study showed that because of adverse conditions during the pandemic, nurses began to question the value of their profession, leading some to leave the profession altogether. Other studies reported similar results (Akkus et al., 2022; Chen et al., 2022; de Cordova et al., 2022; Buchan et al., 2022). The 2022 ICN report emphasized that the global nursing shortage before the pandemic (estimated to be 5.9 million) would worsen due to work overload, stress, risk of infection, and other adverse working conditions caused by the pandemic, possibly reaching a rate of approximately seven million (Buchan et al., 2022). In sum, the first year of the COVID-19 pandemic caused nurses to distance themselves from the profession due to high levels of work stress and burnout, as well as challenges related to lack of personal rights and recognition by society and institutions.

At the end of the first year of the pandemic, nurses stated that they looked forward to its end and patient recovery; they also indicated the need for increased appreciation of nurses by society, better representation by leaders and managers, improved working conditions, and improved regulation of personal rights. Similarly, other studies determined that during the pandemic, nurses did not receive the value and support they deserved from society, managers, and institutions (Kürü, 2022; Ness et al., 2021). According to WHO (2021), nurse managers working in many different countries remained incapable of fighting the pandemic, and while physicians, ministries of health, and governments took an active part in decision-making processes, nurse managers remained in the background; likewise, Daly et al. (2020) stated that nurse leadership fell short in certain areas. However, the presence of effective and patient-oriented nurse managers has been shown to be one of the most supporting factors in nurses' abilities to cope with uncertainty and the adverse conditions of the pandemic, as well as in the management of patient care. The current study found that the first year of the COVID-19 pandemic led to increased awareness of the problems related to nurses' rights and perceptions of the value of nurses' roles, as well as awareness of the need for improved nursing leadership, representation, and participation in health policies and pandemic management.

5. Conclusion

This study concluded that nurses working during the first year of the COVID-19 pandemic were psychologically, physiologically, and socially affected, though they gained some achievements while responding to challenges in the work environment. In addition, their opinions and demands regarding the nursing profession and their role within it changed over this period, leading them to express their hopes and expectations for the future.

Considering that nurses were psychologically, physiologically, and socially impacted by the pandemic, leading to high levels of burnout, we recommend that hospitals and nursing services managers empower nurses still working during the pandemic by developing strategies to reduce burnout levels. In addition, hospital and nurse managers should take nurses' opinions and experiences into consideration so that they can create a more positive nursing work environment, take actions on reducing the negative impacts of the pandemic on nurses' personal and professional lives, provide increased emotional support, and develop strategies for nurses' general well-being. The fact that nurses' perceptions of their profession changed during the pandemic, leading to decreased job satisfaction, is an important issue that policymakers and institutional managers should consider in the medium and long term, especially in light of national and global nursing shortages. Initiatives aimed at retaining nurses and monitoring outcomes are also crucial. Moreover, the fact that staff nurses emphasized the need for nursing leaders proves the importance of such leaders in all aspects of the profession, indicating the need for the development of nursing leadership approaches. Further qualitative and quantitative post-COVID-19 studies on how nurses who took an active part in the pandemic were affected, as well as studies evaluating the effect of challenges and future regulations on patient, institutional, and health system outcomes, are recommended.

Authors Contributions

Study design: NG, SS; Data collection: SS; Data analysis: SS, NG; Study supervision NG; Manuscript writing: SS, NG; Critical revisions for important intellectual content: NG, SS.

Conflict of Interest

No conflict of interest has been declared by the authors.

References

- Akkus, Y., Karacan, Y., Guney, R., & Kurt, B. (2022). Experiences of nurses working with COVID-19 patients: A qualitative study. *Journal of Clinical Nursing*, 31(9-10), 1243-1257. <https://doi.org/10.1111/jocn.15979>
- Arcadi, P., Simonetti, V., Ambrosca, R., Cicolini, G., Simeone, S., Pucciarelli, G., ... & Tartaglino, D. (2021). Nursing during the COVID-19 outbreak: A phenomenological study. *Journal of Nursing Management*, 29(5), 1111-1119. <https://doi.org/10.1111/jonm.13249>
- Badanta, B., Acevedo-Aguilera, R., Lucchetti, G., & de Diego-Cordero, R. (2021). 'A picture is worth a thousand words'—A photovoice study exploring health professionals' experiences during the COVID-19 pandemic. *Journal of Clinical Nursing*, 30(23-24), 3657-3669. <https://doi.org/10.1111/jocn.15887>
- Bagcchi, S. (2020). Stigma during the COVID-19 pandemic. *The Lancet Infectious Diseases*, 20(7). [https://doi.org/10.1016/s1473-3099\(20\)30498-9](https://doi.org/10.1016/s1473-3099(20)30498-9)
- Baykara, Z.G., & Eyuboglu, G. (2020). Covid-19 pandemisinde hemşirelik bakımı. *Gazi Sağlık Bilimleri Dergisi*, 6(1), 9-17.
- Billings, J., Ching, B.C.F., Gkofa, V., Greene, T., & Bloomfield, M. (2021). Experiences of frontline healthcare workers and their views about support during COVID-19 and previous pandemics: A systematic review and qualitative meta-synthesis. *BMC Health Services Research*, 21(1), 923. <https://doi.org/10.1186/s12913-021-06917-z>
- Buchan, J., Catton, H., & Shaffer, F. (2022). Sustain and Retain in 2022 and Beyond. *International Council of Nurses*, 71, 1-71.
- Cai, H., Tu, B., Ma, J., Chen, L., Fu, L., Jiang, Y., & Zhuang, Q. (2020). Psychological impact and coping strategies of frontline medical staff in Hunan between January and March 2020 during the outbreak of coronavirus disease 2019 (COVID19) in Hubei, China. *Medical Science Monitor*, 26, e924171. <https://doi.org/10.12659/MSM.924171>
- Chen, Y.C., Su, C., Chiang, H.H., & Lin, C.C. (2022). Hospital factors that predict intention of health care workers to leave their job during the COVID-19 pandemic. *Journal of Nursing Scholarship*, 54(5), 607–612. <https://doi.org/10.1111/jnu.12771>
- Daly, J., Jackson, D., Anders, R., & Davidson, P.M. (2020). Who speaks for nursing? COVID-19 highlighting gaps in leadership. *Journal of Clinical Nursing*, 29(15-16), 2751–2752. <https://doi.org/10.1111/jocn.15305>
- de Cordova, P.B., Kaplan, L., DeJoy, S.B., McHugh, M., & Ulrich, B. (2022). Burnout and intent to leave during COVID-19: A cross-sectional study of New Jersey hospital nurses. *Journal of Nursing Management*, 30(6), 1913–1921. <https://doi.org/10.1111/jonm.13647>
- Fernandez, R., Lord, H., Halcomb, E., Moxham, L., Middleton, R., Alananzeh, I., & Ellwood, L. (2020). Implications for COVID-19: A systematic review of nurses' experiences of working in acute care hospital settings during a respiratory pandemic. *International Journal of Nursing Studies*, 111, 103637. <https://doi.org/10.1016/j.ijnurstu.2020.103637>

Huang, Y., & Zhao, N. (2020). Generalized anxiety disorder, depressive symptoms and sleep quality during COVID-19 outbreak in China: A web-based cross-sectional survey. *Psychiatry Research*, 288, 112954. <https://doi.org/10.1016/j.psychres.2020.112954>

Joo, J.Y., & Liu, M.F. (2021). Nurses' barriers to caring for patients with COVID-19: A qualitative systematic review. *International Nursing Review*, 68(2), 202-213. <https://doi.org/10.1111/inr.12648>

Kalateh Sadati, A., Zarei, L., Shahabi, S., Heydari, S.T., Taheri, V., Jafarpour, Z., ... & Ebrahimzadeh, N. (2020). Nursing experiences of COVID-19 outbreak in Iran: A qualitative study. *Nursing Open*, 8(1), 72–79. <https://doi.org/10.1002/nop2.604>

Kelley, M.M., Arora, K., Terkawi, A.S., & Gerlach, A.T. (2021). United States nurses' experiences during the COVID-19 pandemic: A grounded theory. *Journal of Clinical Nursing*, 31(15-16), 2167–2180. <https://doi.org/10.1111/jocn.16032>

Kürü, S.A. (2022). Covid-19 salgınında hemşirelerin duygusal emek davranışlarının nedenleri ve sonuçlarına yönelik nitel bir araştırma. *İşletme*, 3(1), 67-92.

Li, T.M., Gao, L., Chen, Y.C., & Chien, S. (2022). Effects of work conditions and organisational strategies on nurses' mental health during the COVID-19 pandemic. *Journal of Nursing Management*, 30(1), 71-78. <https://doi.org/10.1111/jonm.13485>

Madhav, N., Oppenheim, B., Gallivan, M., Mulembakani, P., Rubin, E., & Wolfe, N.D. (2017). *Pandemics: Risks, Impacts, and Mitigation*. In: *Disease Control Priorities: Improving Health and Reducing Poverty*. (3rd ed.). The International Bank for Reconstruction and Development / The World Bank. PMID: 30212163.

Ness, M.M., Saylor, J., DiFusco, L.A., & Evans, K. (2021). Leadership, professional quality of life and moral distress during COVID-19: A mixed-methods approach. *Journal of Nursing Management*, 29(8), 2412-2422. <https://doi.org/10.1111/jonm.13421>

Nowell, L., Dhingra, S., Andrews, K., & Jackson, J. (2021). A grounded theory of clinical nurses' process of coping during COVID-19. *Journal of Clinical Nursing*, 1–12. <https://doi.org/10.1111/jocn.15809>

Özkan, Z., Uçan, H., Özparlak, A., Karakaya, D., & Okan Demirel, M. (2022). 'Fighting an Octopus'—Experiences of Nurses Working in the COVID-19 Ward: A Qualitative Study. *Türkiye Klinikleri Journal of Nursing Sciences*, 14(4); 1221-1231. <https://doi.org/10.5336/nurses.2022-89167>

Polit, D.F., & Beck, C.T. (2012). *Nursing research: Generating and assessing evidence for nursing practice*. Philadelphia, PA: Lippincott Williams and Wilkins.

Simonetti, V., Durante, A., Ambrosca, R., Arcadi, P., Graziano, G., Pucciarelli, G., ... & Tartaglino, D. (2021). Anxiety, sleep disorders and self-efficacy among nurses during COVID-19 pandemic: A large cross-sectional study. *Journal of Clinical Nursing*, 30(9-10), 1360-1371. <https://doi.org/10.1111/jocn.15685>

Singh, R., & Subedi, M. (2020). COVID-19 and stigma: Social discrimination towards frontline healthcare providers and COVID-19 recovered patients in Nepal. *Asian Journal of Psychiatry*, 53, 102222. <https://doi.org/10.1016/j.ajp.2020.102222>

T.C. Sağlık Bakanlığı. (2020). Türkiye Günlük Koronavirüs Tablosu. (2020, September 15). <https://covid19.saglik.gov.tr>

Turkmen, E., Aydogdu, A.L.F., Goktepe, N., & Baykal, U. (2020). The role of nurse managers during the new coronavirus pandemic. *Journal of Nursing and Health*, 10(4), e20104024.

Vaismoradi, M., Turunen, H., & Bondas, T. (2013). Content analysis and thematic analysis: implications for conducting a qualitative descriptive study. *Nursing & Health Sciences*, 15(3), 398–405. <https://doi.org/10.1111/nhs.12048>

World Health Organization. (2020). Health workforce policy and management in the context of the COVID-19 pandemic response: interim guidance. (2020, December 3).

https://hlh.who.int/docs/librariesprovider4/hlh-documents/health-workforce-policy-and-management-in-the-context-of-the-covid-19-pandemic-response.pdf?sfvrsn=c90fa204_5

World Health Organization. (2021). Global strategic directions for nursing and midwifery 2021-2025. (2021, December 3). <https://www.icn.ch/resources/publications-and-reports/who-global-strategic-directions-nursing-and-midwifery-2021-2025>

World Health Organization. (2020). WHO Announces COVID-19 Outbreak a Pandemic. (2022, July 6). [https://www.who.int/europe/emergencies/situations/covid19#:~:text=Cases%20of%20novel%20corona virus%20\(nCoV,pandemic%20on%2011%20March%202020](https://www.who.int/europe/emergencies/situations/covid19#:~:text=Cases%20of%20novel%20corona virus%20(nCoV,pandemic%20on%2011%20March%202020)

Yildirim, N., Aydogan, A., & Bulut, M. (2021). A qualitative study on the experiences of the first nurses assigned to COVID-19 units in Turkey. *Journal of Nursing Management*, 29(6), 1366-1374. <https://doi.org/10.1111/jonm.13291>