

The International Council of Nurses

Impact of COVID-19 on nurses and nursing

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INTERNATIONAL COUNCIL OF NURSES



The global voice of nursing

About ICN

- A federation of more than **130** national nurses associations
- The voice of the more than **20** million nurses worldwide.
- Founded in 1899; 1st NGO recognised by WHO
- First and widest reaching international organisation for health professionals

Enhancing the health of individuals, populations and societies by:

- championing the contribution and image of nurses worldwide
- advocating for nurses at all levels
- advancing the nursing profession
- influencing health, social, economic and education policy



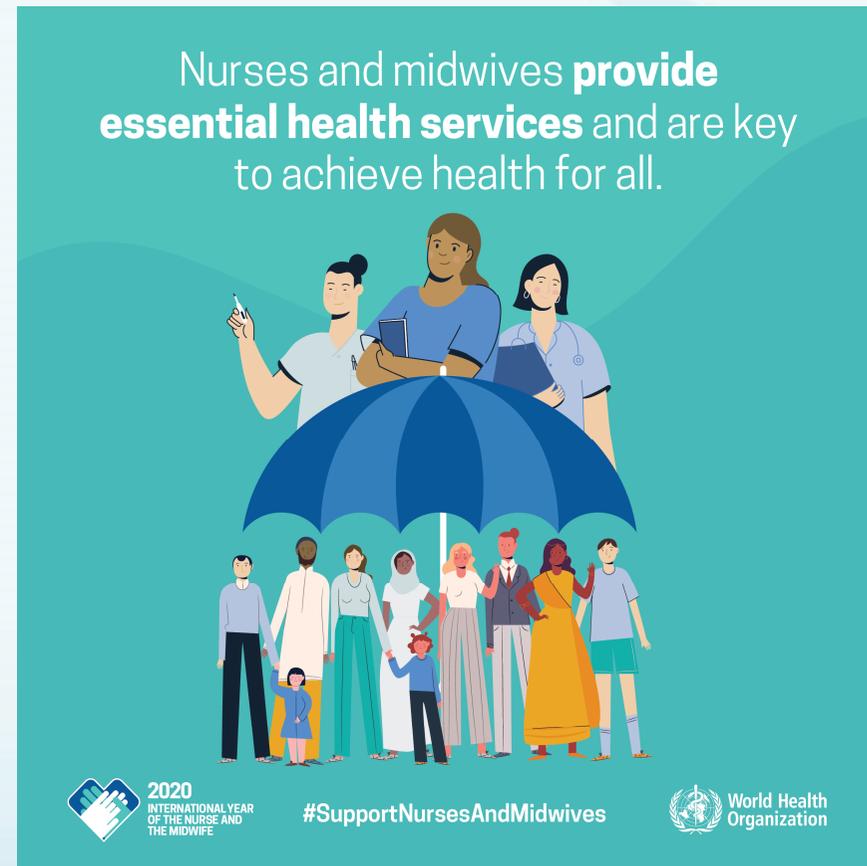
ICN Members



The World Health Organization designated 2020 as the International Year of the Nurse and the Midwife

COVID-19 pandemic

- Nurses and other health workers are crucial in the emergency preparedness and response
- Global shortage of healthcare workers, particularly nurses
- Significant impact to patient safety, health systems, and global health security



Nurses on the frontlines



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Photo credits: Consociazione Nazionale delle Associazioni Infermiere-Infermieri, Iranian Nursing Association, Korean Nurses Association, Taiwan Nurses Association,

The global voice of nursing

Impacts of COVID-19 on nurses

ICN COVID-19 Survey in September 2020

Key Findings

Approximately 45% of NNAs report that **compensation** is available from the government for the HCWs infected with COVID-19 following exposure in the workplace.

45% of the NNAs indicate moderate to severe **shortages of personal protective equipment (PPE)** in the long-term care facilities in their countries.

More than 70% of the NNAs have received reports of incidents of **violence or discrimination** against frontline health workers due to COVID-19.



Only 48% of NNAs report that COVID-19 is recognised as an **occupational disease** for healthcare workers.

60% of NNAs have sometimes or regularly received reports of **mental health** distress from nurses in COVID-19 response.



COVID-10 infections and deaths among nurses and other health workers

- As of 31 Dec 2020, **more than 1.6 million** healthcare workers in 34 countries have been infected by COVID-19.
- Cumulative number of reported COVID-19 deaths of nurses in 59 countries is **2262** – a significant underreporting.
- A wide range in HCW infection rates. At different points in time the average across the ICN data set has ranged from **6 – 10%**.
- Nurses were the biggest health worker group with COVID-19 infection in many countries.
- Data of HCW infections and deaths by country is not available.
- Systematic and standardised data in HCW infections and deaths is crucial.



Violence against healthcare during the pandemic

- National Nurses' Associations reported increasing violence aimed specifically at nurses and other healthcare workers.
- Nurses have been abused, discriminated and even physically attacked because they have been in close contact with COVID-19 patients.
- Incidents reported in France, Philippines, India, USA, Australia, Mexico...
- Reasons for the attacks
Fear, panic, misinformation about how the virus can spread, misplaced anger



Violence against healthcare during the pandemic

- Violence against healthcare personnel is not a new phenomenon
- Failures in some countries to provide adequate resources and protection to HCWs
- Exacerbate already unprecedented COVID-19-related stress and burnout that nurses are experiencing



Consequences of attacks against healthcare workers

- Undermine duty of care
- Endanger health workers
- Increase mental distress of HCWs
- Decrease health security
- Significant impact to the profession and health systems
- Impede health development goals



ICN calls for

- The **collection of data** on the incidence and types of attacks on healthcare personnel.
- **A zero tolerance approach** - such attacks against healthcare personnel to be prevented and, when they do occur, condemned.
- Misinformation and disinformation about COVID-19 to be countered.
- The **enforcement of strong actions** against perpetrators of attacks by local and national governments.
- **Investment** by state and local governments in health security measures to protect healthcare workers as part of COVID-19 emergency budgets.
- **Unity** among health professionals and their associations in speaking out forcefully against all acts of discrimination, intimidation and violence against healthcare workers.





Key messages

1. Mass trauma experienced by nurses working in COVID-19 response.
2. Violence against healthcare has been exacerbated in the pandemic and is an alarming global phenomenon.
3. Commit to a zero-tolerance approach to violence and discrimination against nurses and other HCWs.
4. Governments and organisations need to fulfil their obligations to protect nurses and other HCWs
5. Take urgent action to build resilience and provide support for the health workforce.





ANNETTE KENNEDY
President, International
Council of Nurses

The pandemic has seen frontline nurses rightly recognised as heroes, but they are also ordinary mothers and fathers with their own families to protect. They deserve to be able to work free from fear, whether because of a lack of PPE or because of harassment and attack.





Photo credit: Iranian Nursing Association

Thank you.

@ICNurses

www.icn.ch



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Risk Communication and Community Engagement (RCCE) in Central Asia

What is RCCE?



Provides timely, relevant and actionable **life-saving information** through the most appropriate communication approaches to encourage people to adopt safe health practices and reduce fear, stigma and misinformation.



Listens to **community feedback** to understand the beliefs, fears, rumours, questions and suggestions communities have about COVID-19 and use this to guide the response.



Uses innovative approaches to **encourage behaviour change** and take actions to prevent and reduce the spread of the disease



Identifying and supporting **community-led solutions** for bringing the outbreak under control, ensuring people's active participation in the response.

The challenge



Put simply, misinformation, distrust, or lack of access to information causes harm



Madagascar's President Andry Rajoelina tries Covid-Organics at a launch ceremony in Antananarivo on 20 April. Several other African leaders have expressed an interest in the unproven treatment. RIJASOLO/AFP VIA GETTY IMAGES

Unproven herbal remedy against COVID-19 could fuel drug-resistant malaria, scientists warn

Covid denier wanted by police after trying to take patient from hospital

Joe Roberts Wednesday 27 Jan 2021 4:07 pm

553 SHARES



Toby Hayden-Leigh, from Maidstone, Kent, is wanted by Surrey Police in connection with an incident at the East Surrey Hospital in Redhill (Picture: PA)

CDC: Some Americans are misusing cleaning products — including drinking them — in effort to kill coronavirus

By ANDREW JOSEPH @DrewJoseph / JUNE 5, 2020

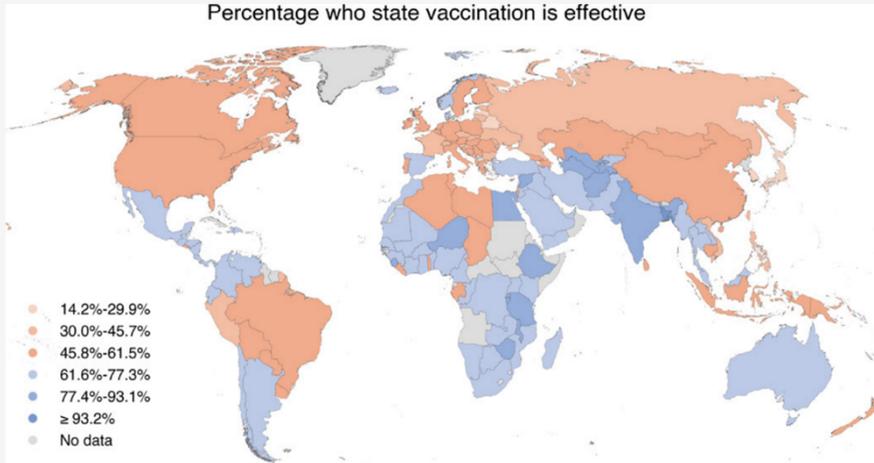
Reprints



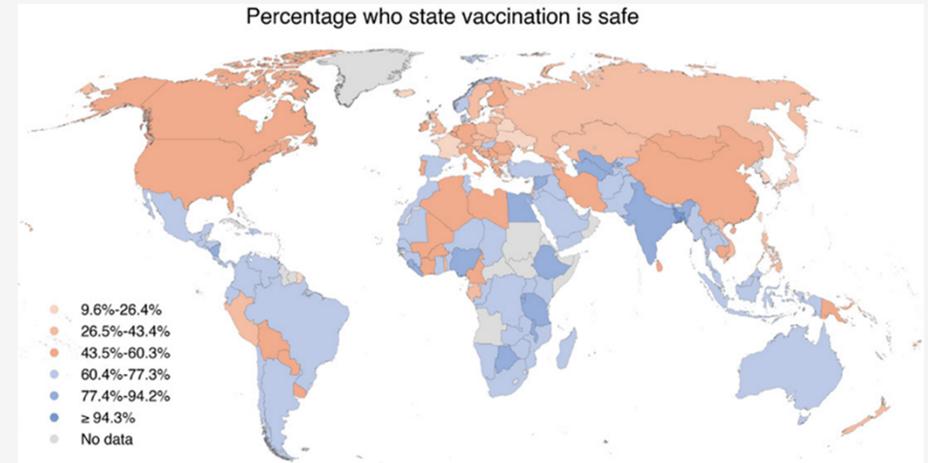
Sources: [Unproven herbal remedy against COVID-19 could fuel drug-resistant malaria, scientists warn | Science | AAAS \(sciencemag.org\)](#) ; [Covid denier wanted by police after trying to take patient from hospital | Metro News](#) ; [CDC: Some Americans are misusing bleach to try to kill coronavirus \(statnews.com\)](#)

Vaccine hesitancy

Percentage who state vaccination is effective



Percentage who state vaccination is safe



Vaccinations face significant scepticism; the COVID-19 vaccines face even higher rates of hesitancy for a number of reasons:

- "It was developed too quickly"
- "The vaccines are unsafe"
- "Pfizer vaccines alter peoples' DNA"

Our approach



Across Central Asia, RCCE is at the centre of our COVID-19 response. It is guided by four principles:

Transparency

Explaining targeting
Discussing knowns and
unknowns
Communicating what assistance
is and isn't available

Accuracy

Working with WHO and MoH on
communications
Using evidence to inform
interventions

Engagement

Encouraging feedback
Talking with, not to
Surveys
Engaging communities

Accessibility

Using media that people use
and trust
Researching preferences
Clarity in language



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RCCE in Kazakhstan

Field of Work



Offline activities



Online activities



COVID-19 ТУРАЛЫ
АҢЫЗДАР
МИФЫ О COVID-19

ӨЗІҢІЗДІ ЖӘНЕ ЖАҚЫНДАРЫҢЫЗДЫ
КОРОНАВИРУС ИНФЕКЦИЯСЫНАН ҚАЛАЙ ҚОРҒАУҒА БОЛАДЫ?



ҚОЛДАРЫҢЫЗДЫ
САБЫНДЫ СУМЕН КЕМІНДЕ
20 СЕКУНД БОЙЫ
ЖАҚСЫЛАП ЖУЫҢЫЗ



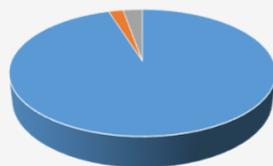
ОЛАРДЫ СПИРТ ҚҰРАМДАС
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ЗАЛАЛСЫЗДАНДЫРЫҢЫЗ



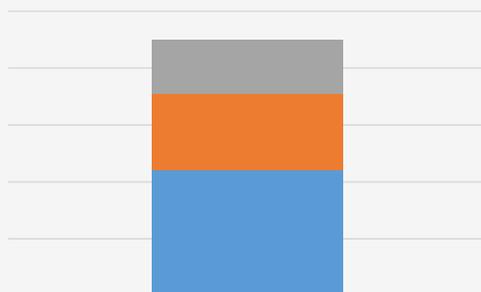
ЛЕЧЕНИЕ COVID-19

The SURVEY

What do you know about
COVID-19?



- Causes the disease
- Don't know anything
- Another answer

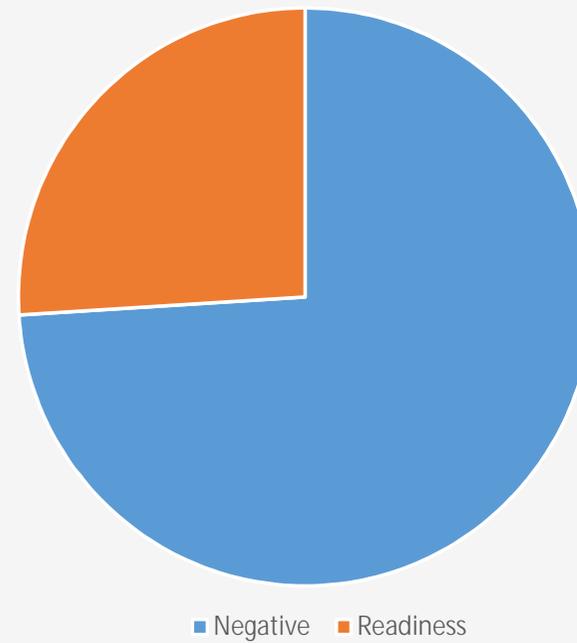


where are you seeking help?

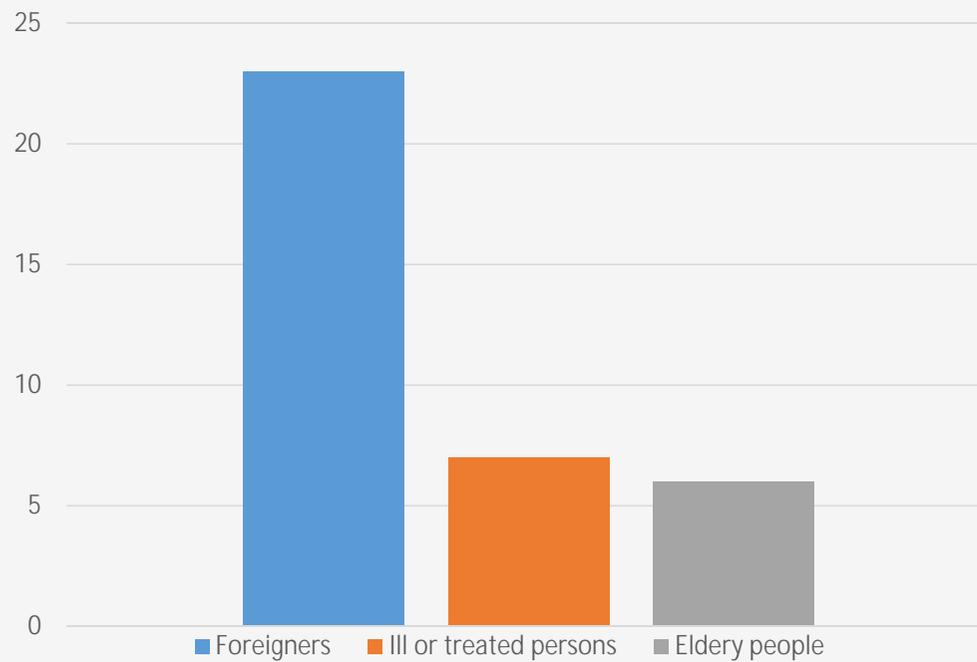
- Hospitals
- Home quarantine
- Go to pharmacy



The level of readiness for vaccination



Groups subjected to stigma



Future





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Thank you for your attention!

Mental Health and psychosocial support, COVID-19 and violence

Barbara Juen, Monika Stickler, Alexander Kreh, Michael Lindenthal
University of Innsbruck, Austrian Red Cross

NoFear Network

§ A network of practitioners, researchers and decision makers to exchange experience and improve the situation of medical personnel (staff and volunteers) working in the acute sector after security related incidents and after pandemics.

<http://www.no-fearproject-portal.eu/>



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Global mental health impact

There is global evidence of a severe mental health impact of the COVID-19 pandemic and resultant government-enforced physical distancing efforts, especially an increase in distress, depression, anxiety but also insomnia can be observed in many countries

E.g. Torales, J, O Higgins, M, Castadelli-Maia, M, & Ventralia, A. (2020) The outbreak of COVID-19 coronavirus and its impact on global mental health, *Int J Soc Psychiatry* 2020 Jun;66(4):317-320. doi: 10.1177/0020764020915212.PMID: 32233719



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Impact on Healthcare Workers (HCW)

Many studies have shown that Healthcare workers are at risk of developing stress related symptoms during pandemics.

Special stressors are

- § Working with PPE
- § High risk/Fear of infecting family members and friends
- § High workload
- § New roles and responsibilities
- § Less informal social contact in teams
- § Moral distress incl stigmatization

Cai, H. et al. (2020) Psychological Impact and Coping Strategies of Frontline Medical Staff in Hunan Between January and March 2020 During the Outbreak of Coronavirus Disease 2019 (COVID-19) in Hubei, China. *Medical Science*. DOI: 10.12659/MSM.924171



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Stigmatization of healthcare workers

- § During past disease outbreaks, healthcare workers (HCWs) have been stigmatized by members in their community, for fear that they are sources of infection.



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Crossnational study

- § The researchers conducted a mixed method study of stigma and bullying among HCW during the COVID 19 pandemic.
- § The sample included 7411 people from 173 countries who were aged 18 years or over.

Dye, T, Alcantara, L., Siddigi, S.,Barbosu, M., Sharma, S., Panki, T., & Pressman, E. (2020) Risk of COVID-19-related bullying, harassment and stigma among healthcare workers: an analytical cross-sectional global study, <http://orcid.org/0000-0002-9801-471>, <https://bmjopen.bmj.com/content/10/12/e046620>



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Findings crossnational

After controlling for a range of confounding factors, HCW are significantly more likely to experience COVID-19-related stigma and bullying, often in the intersectional context of racism, violence and police involvement in community settings.

Dye, T, Alcantara, L., Siddigi, S., Barbosu, M., Sharma, S., Panki, T., & Pressman, E. (2020) Risk of COVID-19-related bullying, harassment and stigma among healthcare workers: an analytical cross-sectional global study, <http://orcid.org/0000-0002-9801-471>, <https://bmjopen.bmj.com/content/10/12/e04662>



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HCW´s view on Stigmatization

A cross-sectional study using an online questionnaire was conducted in June 2020. The survey was distributed via social media and email to physicians working in Egypt through convenience sampling.

Mostafa,A, Sabry,W., & Mostafa N, J. (2020) COVID-19-related stigmatization among a sample of Egyptian healthcare workers, PLOS one, Published: December 18, 2020, <https://doi.org/10.1371/journal.pone.024417>



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HCW 's view on Stigmatization

509 physicians participated in the study

138 (27.1%) were directly involved in the care of COVID-19 patients.

159 (31.2%) participants reported severe level of COVID-19-related stigma.

Mostafa,A, Sabry,W., & Mostafa N, J. (2020) COVID-19-related stigmatization among a sample of Egyptian healthcare workers, PLOS one, Published: December 18, 2020, <https://doi.org/10.1371/journal.pone.024417>



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The population's view on HCW

In one study non-HCW adults from the United States and Canada (N = 3551) completed an online survey, including measures of HCW stigmatization, COVID Stress Syndrome, and avoidance.

Over a quarter believed that HCWs should have severe restrictions placed on their freedom, such as being kept in isolation from their communities and their families.

[Taylor, S, Landry, C.A., Rachor, G.S., Paluszek, M., M., Asmundson, G. J G \(2020\)](#) Fear and avoidance of healthcare workers: An important, under-recognized form of stigmatization during the COVID-19 pandemic, [Journal of Anxiety Disorders](#), [Volume 75](#), October 2020, 102289



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The population´s view on HCW

- § Over a third avoided HCWs for fear of infection.
- § Participation in altruistic support of HCWs (i.e., evening clapping and cheering) was unrelated to stigmatizing attitudes.
- § People who stigmatized HCWs also tended to avoid other people, avoid drug stores and supermarkets, and avoid leaving their homes.
- § Factor analysis suggested that HCW stigmatization is linked to the COVID Stress Syndrome.

[Taylor, S, Landry C.A., Rachor G.S., Paluszek, M., M., Asmundson G. J G \(2020\)](#) Fear and avoidance of healthcare workers: An important, under-recognized form of stigmatization during the COVID-19 pandemic, [Journal of Anxiety Disorders](#), Volume 75, October 2020, 102289



The population´s view on HCW

Fear and avoidance of HCWs is a widespread, under-recognized problem during the COVID-19 pandemic. It is associated with the COVID Stress Syndrome and might be reduced by interventions targeting this syndrome.

[Taylor, S, Landry C.A., Rachor G.S., Paluszek, M., M., Asmundson G. J G \(2020\)](#) Fear and avoidance of healthcare workers: An important, under-recognized form of stigmatization during the COVID-19 pandemic, [Journal of Anxiety Disorders, Volume 75](#), October 2020, 102289



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Violence against helpers

- § Also other forms of violence against helpers have risen worldwide even before Covid. Now it has reached a new level.
- § Together with Moral Distress it endangers the feeling of safety and trust in the system which negatively affects job commitment in healthcare workers.

Devi,S., (2020) Covid 19 exacerbates violence against healthcare workers; Lancet Vol 396, Sept 2020



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Our own study

- § Interviews and focus group discussions with health care personnel in the course of the COVID-19 crisis

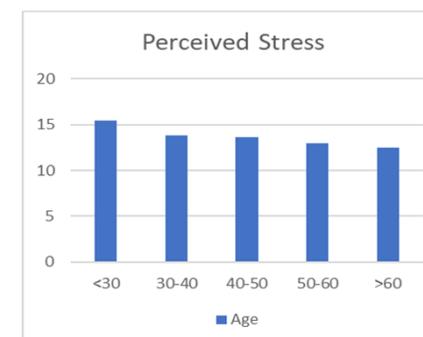
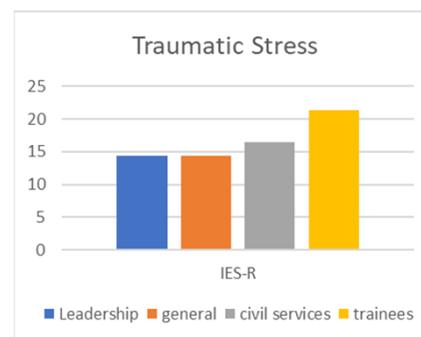
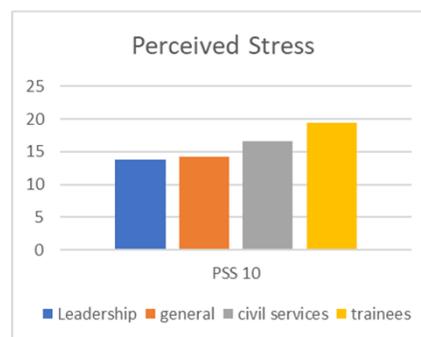
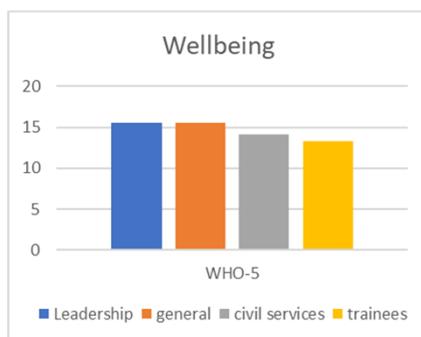
- § Questionnaires for healthcare and emergency staff at three points in time
 - § June/July 2020 (end of first wave)
 - § November/December 2020 (second wave)
 - § Early 2021 (end of second wave, beginning of vaccine campaign)
 - § Summer 21



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Questionnaire Results (EMS)

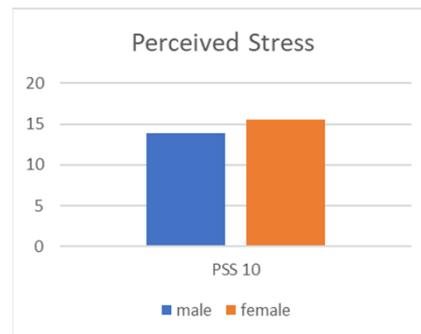
- § Staff in leadership roles have higher sense of coherence than others (=more resilient)
- § Younger staff (especially inexperienced) have higher stress levels and lower well-being and are less resilient
- § Same results in the other HCW groups



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Questionnaire Results (EMS)

- § Female staff have higher stress levels than male staff
- § among females those who have more contact to COVID-19 patients have higher stress levels (general and traumatic) than those who do not have contact (among males there is no significant difference regarding exposure)



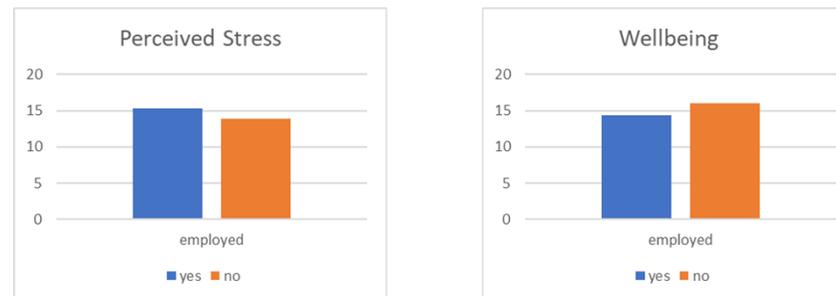
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Questionnaire Results (EMS)

§ Staff that perceive themselves as especially vulnerable regarding a COVID-19 infection have higher general and traumatic stress levels and lower well-being



§ Those who are employed have higher stress levels and lower well-being than volunteers



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Questionnaires

§ Aims

§ Distress, wellbeing, quality of life, resilience

§ Sample

§ June/July: 637 EMS

§ November/December: 447 EMS

§ Instruments

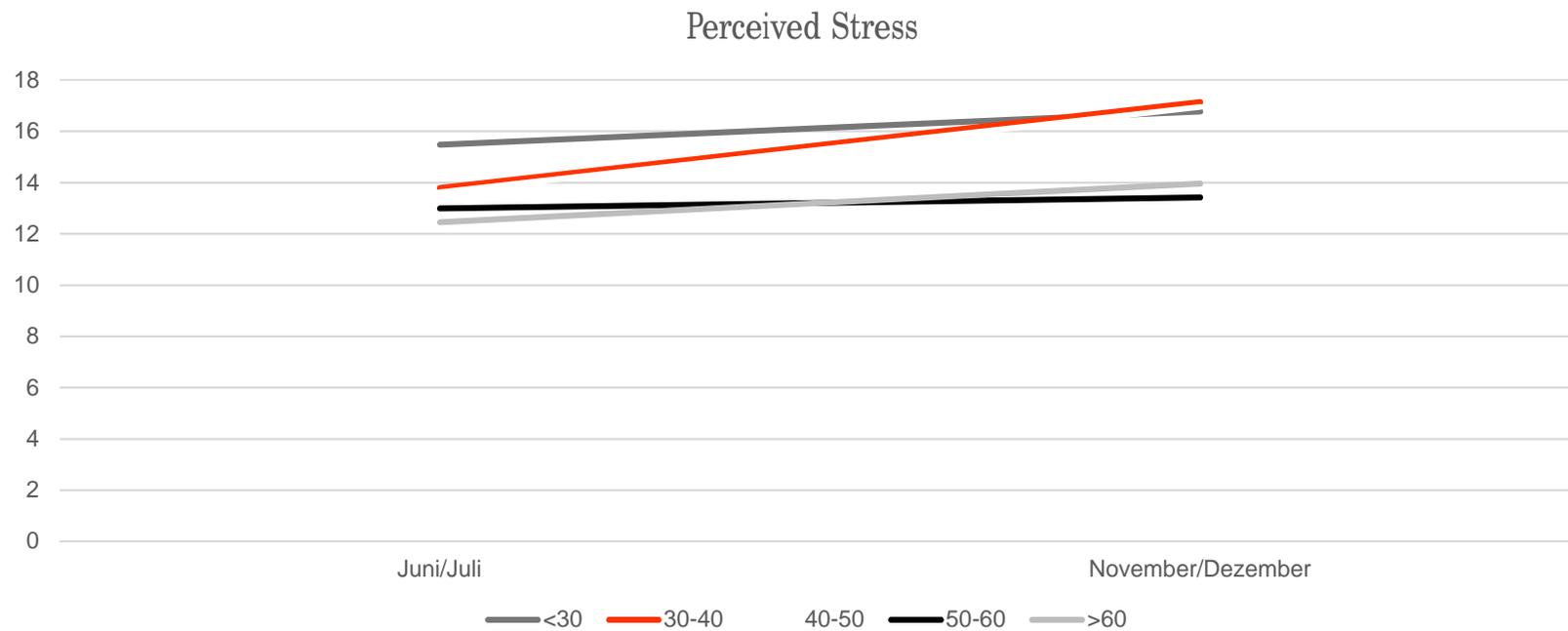
§ Perceived Stress Scale (distress), WHO-5 (Wellbeing), Impact of Events Scale Revised (Trauma Symptoms), SOC (Resilienz), Emotionality, COVID-19 Monitoring WHO

§ Items about stressors



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Distress is rising



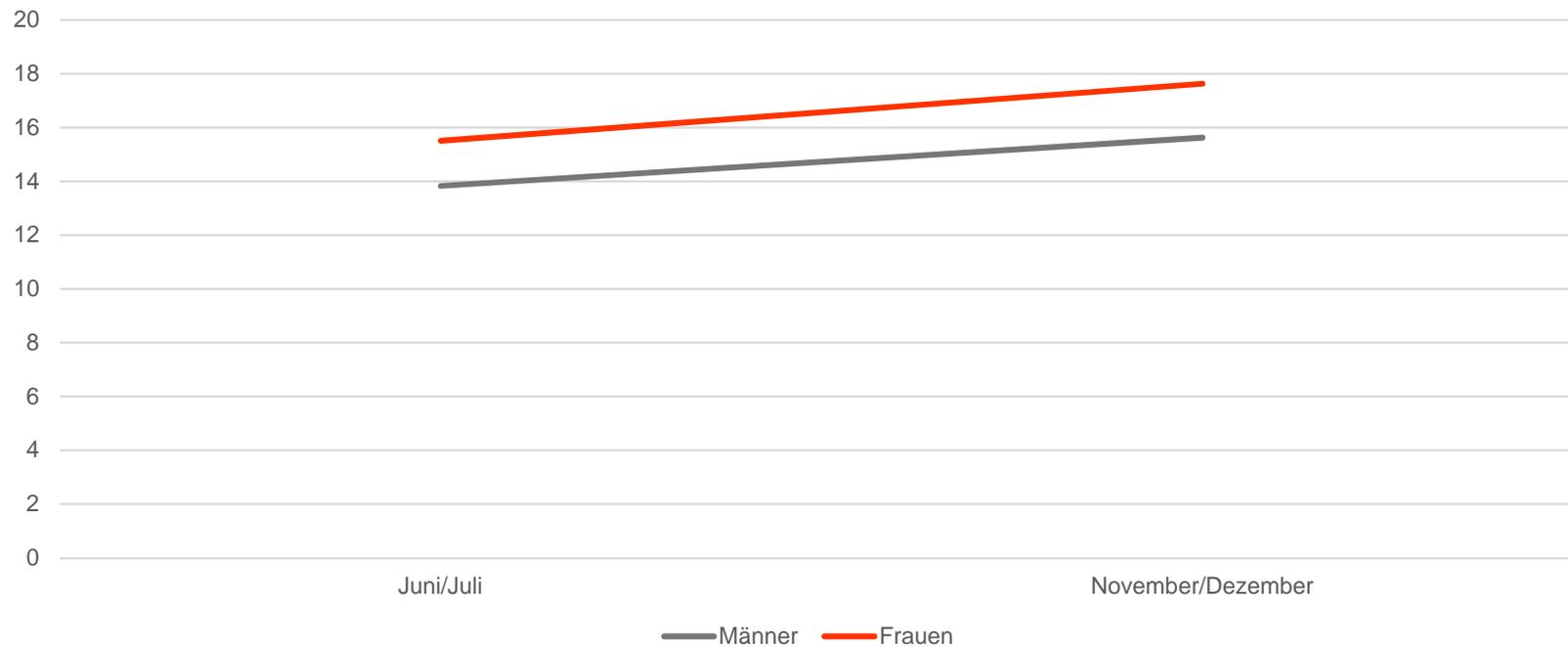
At time point two also the age groups 30-40 experienced more distress.



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Women are more at risk

Perceived Stress

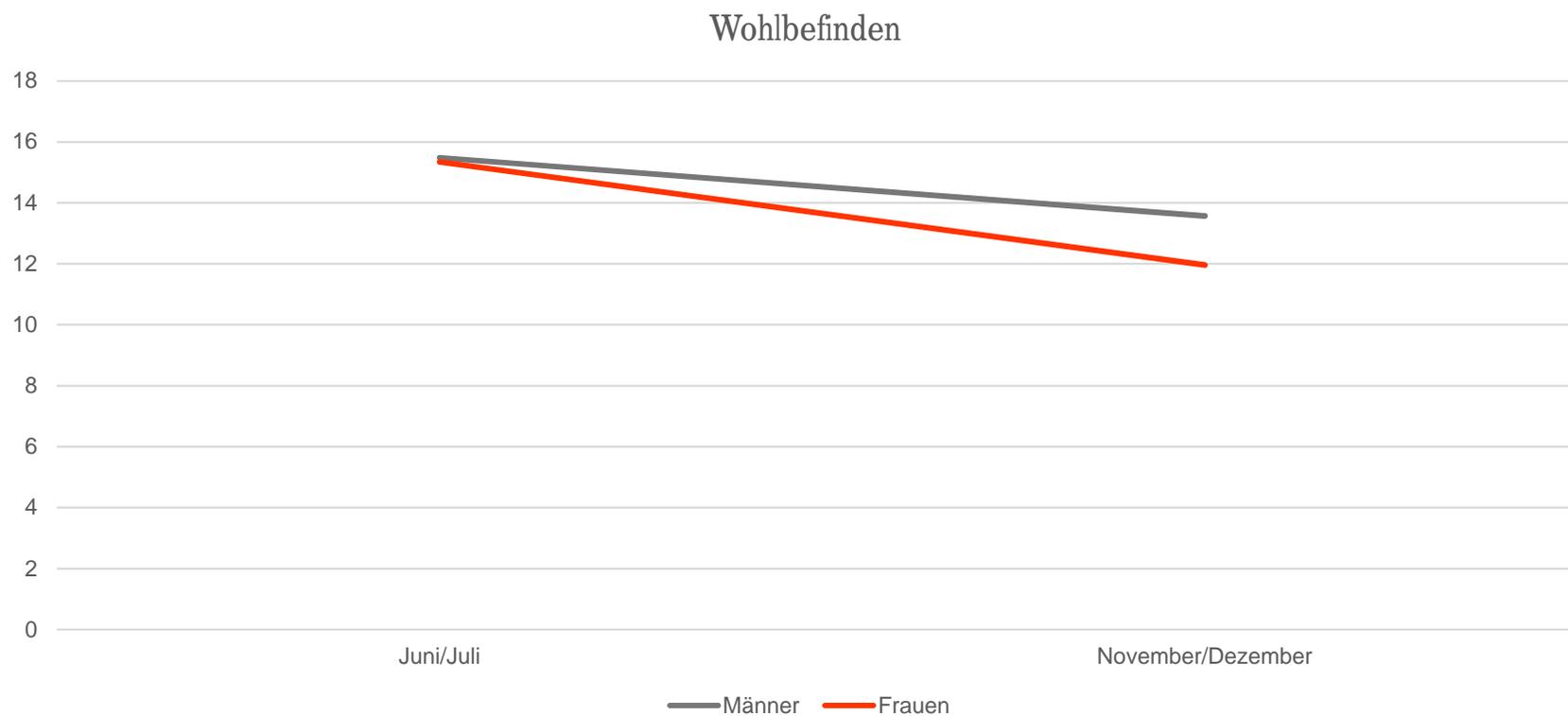


Women have more distress than men.



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Wellbeing goes down

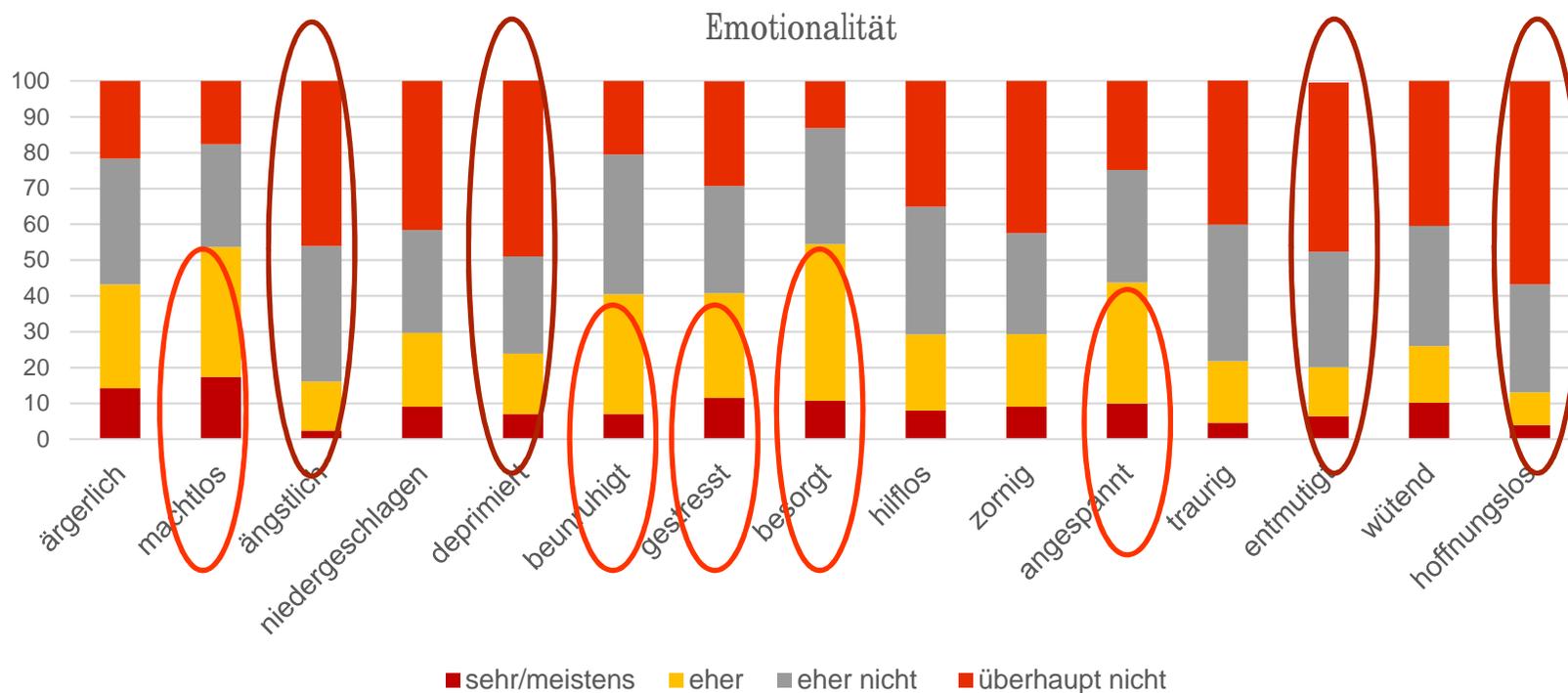


Wellbeing goes down esp in women.



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Emotions (EMS)



Feelings of powerlessness, concern, sorrow, stress and tension have risen significantly over the last months.



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Interviews

§ Aim

- § Identification of stressors and challenges
- § Collecting best-practice experiences
- § Identification of Resilience Factors

§ Sample/Jan 21

- § Hospitals: 14
- § Elderly care: 2
- § Emergency medical Services: 8



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Interview Results

§ We generated three hypotheses:

§ **Moral distress and Moral Injury are main stressors experienced by healthcare workers, Stigmatization is part of this**

§ In EMS e.g.: no time for PPE when reanimation necessary, being confronted with wrong information from patients, not being able to transport patients to hospitals when no resources are available, contradicting orders, stigmatization, triage, isolation of patients etc.

§ **Leadership plays an important role: organisational resilience highly influences how healthcare workers experience the crisis**

§ E.g. organisational justice, fast and secure information and guidelines, just and well-grounded decision making, feedback & taking concerns of staff seriously

§ **Basic on-scene psychosocial support based on the Hobfoll principles given by trusted and well-known mental health professionals and peers and/or Teamleaders in an integrated approach works best during the pandemic**

§ In EMS e.g. „field supervisors“: well experienced staff or volunteers as supporters e.g. in PPE use, responding to needs of staff etc

<https://doi.org/10.1101/2020.11.18.20232272>



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Adopting the Hobfoll Elements in our mental health approach

(HCW and population, individual and community level)

- § Safety (safe places, information)
- § Connectedness (social support, networks)
- § Self and Collective Efficacy
(participation, feedback loops)
- § Calm (rituals, normalcy)
- § Hope (resources, positive affect, future orientation)

Hobfoll, S.E., Watson, P., Bell, C.C., Bryant, R.A., Brymer, M. J., Friedman, M. J., Friedman, M., Gersons, P.R., de Jong, J.T.V.M., Layne, C.M., Maguen, S., Neria, Y., Norwood, A.E., Pynoos, R.S., Reissman, D., Ruzek, J.I., Shalev, A.Y., Solomon, Z., Steinberg, A.M. & Ursano, R.J. (2007). Five Essential Elements of Immediate and Mid-Term Mass Trauma Intervention: Empirical Evidence. *Psychiatry*, 70 (4), 283-315



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Thank you for your attention

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