A Study to Assess the Psychological Experience Among Nurses of COVID-19 Patients

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Abstract: To assess the psychological experience among nurses of COVID-19 patients at COVID ward and ICU's, was carried out for staff nurses. The objective of study is to explore the psychology among nurses of COVID-19 patients. The study was based on description approach. The sample were staff nurses who are currently working in COVID ward and ICU's during the period of study. The sample technique uses this study was non-probability convenient sampling. The tool was structured And Likert scale and the technique was test. Expert nursing personnel did the content validity of tool, suggestions proposed were incorporated in the tool and appropriate changes were made. The data gathering process was conducted on 2nd July 2021 at COVID ward and ICU's after explaining the objectives and purposes of the study to the staff nurses, consent was obtained from each one of them for participation in the study. A structured questionnaire and Likert scale was administered to assess their psychological experience while caring for COVID-19 patients.

Keywords: Psychological, Experience, COVID-19.

1. Introduction

A. Problem Statement

"A study to assess the psychological experiences among nurses of covid-19 patients."

B. Objectives of the study

1. To explore the psychology among nurses of COVID-19 patient.

C. Introduction

"The Very First Requirement in a Hospital is that it Should Do the Sick No Harm"

- Florence Nightingale

Coronavirus disease 2019 (COVID-19) is highly infectious and pathogenic and has spread rapidly in just 9 months, resulting in a global pandemic as of writing 17,369,943 confirmed cases and 675,060 deaths have occurred worldwide due to COVID-19. The epidemic in China was serious but has been effectively continued as of august 1st 2020, 748 active cases been confirmed, including 36 severe cases. In total 84,385 confirmed cases have been reported of which 79,003 were cured and discharged. A total of 4,634 patients died.

Close contacts of 791,054 individuals were traced 21,445 of whom remain under medical observation. Epidemic outbreak of emerging infectious disease including severe acute respiratory syndrome (SARS), Ebola, influenza A (H1N1) and Middle East Respiratory Syndrome (MERS) have led to serious psychological effects, on patients including anxiety, fear, and depression. In severe cases, post-traumatic stress disorder (PTSD) and other mental disorder have occurred. The SARS outbreak was a catastrophic event for mental health. During the epidemic survivors of infected medical staff displayed high level of stress which manifested as depression and anxiety. Up to 64% of the individual developed lasting mental illness such as Post Traumatic Stress Disorder (PTSD). In addition, 50% of Ebola patients have exhibited mild distress or depression, anxiety, sadness and social problems. Approximately 20% of patients required psychotropic medications. Similarly, H1N1 survivors retained psychological barriers and a poor quality of life one year after discharge from the intensive care unit (ICU). The MERS epidemic increased the risk of psychological distress and mental illness, with 70.8% of survivors showing mental symptoms and 41.7% diagnosed and treated for psychological symptoms during hospitalization from 194 cities in china found that during the beginning of the COVID-19 outbreak more than 50% had moderate to severe psychological impact, with 30% reporting moderate to severe anxiety. A study of 3,947 participants from Vietnam found that those with suspected symptoms of COVID-19 had higher depression score and lower quality of life score. A survey of 741 clinically stable COVIS-19 patients in Wuhan, chins, found that the prevalence of major post- traumatic stress symptoms associated with COVID-19 was as high as 96.2%. From 194 cities in china found that during the beginning of the COVID-19 outbreak more than 50% had moderate to severe psychological impact, with 30% reporting moderate to severe anxiety. A study of 3,947 participants from Vietnam found that those with suspected symptoms of COVID-19 had higher depression score and lower quality of life score. A survey of 741 clinically stable COVIS-19 patients in Wuhan, chins, found that the prevalence of major post- traumatic stress symptoms associated with COVID-19 was as high as 96.2%.

It is imperative to data related to entire population. Vulnerable groups and COVID-19 patients to improve interventions study psychological measures and address the psychological impact of the COVID-19 pandemic. Qualitative studies of psychological experience of medical caregivers of

COVID-19 patients have been conducted, but such studies of the psychological experience of patients with confirmed COVID-19 during hospitalization have not been reported. The present study explored the psychological experience of COVID-19 patients and provides new data to support future targeted interventions.

2. Background of the Study

H1N1, SARS, Ebola, and other infectious disease frequently occur in recent years, posing serious threats to human health and development. In December 2019, corona virus disease 2019 (COVID-2019) epidemic broke out in Wuhan, Hubei province and quickly spread to the whole country. COVID-19 soon gained global attention due to rapidly growing infected cases. WHO officially declared the outbreak of COVID-19 as a public health emergency of international concern on 30 January 2020 till February 2020, a total of 75,465 infected cases have been confirmed in China and 2,236 of them have died. COVID-19 is highly infectious and human to human transmission is confirmed [3].

Health care worker are at high risk of infection and are also fearful meanwhile, they have great burdens in clinical treatment and public prevention high expectations. Lack of time, skill and social support May causes occupational stress and stresses and challenges can lead to anxiety, post-traumatic stress disorder. Great distress and burnout or physical illness.

Health and social care workers have carried a heavy burden during the COVID-19 crisis and, in the challenges to control the virus, have directly faced its consequences. Supporting their psychological wellbeing continues, therefore, to be a priority this rapid review was carried out to establish whether there are any identifiable risk factor for adverse mental health outcomes amongst (HSCW'S) health and social care worker during the COVID-19 crisis.

The world health organization (WHO) in January 2020 declared outbreak of novel coronavirus disease, COVID-19 an international public health emergency. It was stated that there was high COVID-19 spread risk to various other countries across world. According to WHO in March 2020, COVID-19 was characterised as pandemic. However, this sudden crisis is generating great deal of stress anxiety, and depression throughout the world [4].

The COVID-19 pandemic is a major public health issue and challenge to health professionals. In similar epidemics, nurses experienced more distress than other providers.

COVID-19 infection is a new disease that infects a large number of people killing a ratio of whom every day in the world. Health care staff especially nurses, experience a great deal of psychological distress during care of COVID-19 patients. Detecting factors that disturb Nurses mental health during care of these patients can help to reduce their psychological distress.

3. Research Methodology

This study is a descriptive approach which help investigator to observe describe and explore aspect of situation or to understand the underline cause of the variable. A descriptive evaluative approach was used for this study to test the efficiency of structured questionnaire and Likert scale prepare for nurses working in COVID ward and ICU's regarding psychological experience among nurses of COVID-19 patients. This study is a descriptive approach which help investigator to observe describe and explore aspect of situation or to understand the underline cause of the variable.

The Tool was in English, reliability and content validity were established. The Pilot study was done on 5 samples that fulfilled the inclusion criteria. The actual data collection was done on 50 samples that work in selected hospital and which fulfills the required criteria. The data collected was analyzed using descriptive and inferential statistics. Interpretation was based on objectives and hypothesis of study.

4. Findings of the study

The major findings are:

90% have hostel facilities, 10% does not have hostel facilities and 80% have provided with incentives 20% does not have incentives and about 72% have flexible working hours, 28% does not have flexible working hours and about 56% have shifts more than 8 hours and 44% does not have shifts.

74% hospitals have undertaken coping strategies for the staff and 26% hospitals does not have undertaken any coping strategies, 78% hospitals have provided medicines to staff during duty and 22% hospitals does not provided medicines, 56% staff have given special training programme and 44% staff not gives any special programme and about 62% staff faced social stigma while caring for COVID patients and 38% does not faced social stigma.

60% co-workers cooperates sometimes, 32% of co-worker cooperative and 8% co-worker are not cooperative during COVID duty.

88% family feel proud always, 8% family feel proud sometimes, 2% family feel proud often and rarely, 0% family feel proud never.

62% have sometimes, 20% have rarely, 14% have often, 4% have always and 0% have never faced episodes of burnout while caring for COVID 19 patients.

44% have sometimes 28% have always 14% have often 10% have rarely 4% have never got appreciation from patients for serving them.

5. Summary

This study was based on description approach. The population was 50 staff nurses working in COVID ward and ICU's during the period of study.

The sample criteria which are used in this study are, staff nurses who are currently working, regarding their psychological experience while caring for COVID-19 patients, willing to participate in in this study, who are working in COVID ward and ICU's.

The sample technique used in this study was non- probability convenient sampling. The expert research guide did the content validity of the tool suggestion proposed were incorporated in

tool and appropriate changes were made.

The pilot study was conducted in COVID ward and ICU's as per laid down criteria sample were selected by nonprobability convenient sampling method that were available during the study period.

6. Conclusion

This study has helped to assess the psychological experience among nurses of Covid-19 patients. The findings of the study proved that the family of nurses working during Covid-19 period were very happy and proud of them in spite of long working hours and burnout. The hospital also co-operated the nurses by providing hostel facilities, incentives and coping strategies.

References

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