

Capturing Nurses' Experiences during the COVID-19 Pandemic using Photovoice

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Background

During the current COVID-19 global pandemic, clinicians are working tirelessly to meet the needs of citizens in healthcare settings and communities. Nurses make up the largest number of healthcare providers in the system, and have played a key role during the pandemic as direct care providers, leaders, educators, researchers and policy-makers. Numerous surveys and studies conducted over the past 18 months document the negative impact of the pandemic on the nursing workforce, and large numbers of nurses have expressed an intention to leave the profession (RNAO, 2021). Front-line experience during the pandemic has given nurses vital expertise, making it essential that nurses be involved in shaping healthcare policy and developing strategies for global pandemic preparedness and healthier workplaces. **The purpose of this study was to listen to the voices of nurses on the occupational and social issues that most impacted their lives and their nursing practice during the COVID-19 pandemic and glean recommendations from them for health system and workplace improvements.**

Methods

Our study used photovoice, a participatory action approach, to ask: “What is the lived experience of front-line nurses during the COVID-19 pandemic as told by nurses through photos, reflection, and group discussion?” We collected photographs and reflections from 12 nurses that represent front-line experiences during the COVID-19 pandemic.

Results and Recommendations

The themes that emerged from the photographs and reflections included:

The work of nursing: While nurses conveyed a strong sense of pride in the work that they do, they also shared the physical and psychological challenges they faced in their work during the pandemic. Sub-themes included descriptions of the workplace as a “battlefield”, emotional labour of caring for patients who aren’t allowed family or visitors, deep appreciation for their colleagues and teams, and the comment “Nurses are the glue that holds this whole system together.”



Miscommunication: Nurses shared that much of their stress and frustration was due to miscommunication about pandemic guidelines between hospital leaders, public health officials, government, and themselves. They resented having to check multiple locations for information and noted that they sometimes heard about new guidelines from the public before receiving it from their own organizational leadership. Sub-themes included “sign fatigue”, information overload, and frustration about misinformation spread on social media.





was overwhelming, including from the demands of work and family life, which left participants feeling emotionally drained, disconnected, overworked, and at odds with the public on pandemic response. The increased need for PPE, working short-staffed, and having to support patients because their families could not be with them added to nurses' workload. Nurses described the isolation they felt, including one participant who said, "The only people I've touched in months are patients." Another sub-theme was frustration with virus deniers, hoaxers, and anti-vaxxers, and one participant said, "I feel as though I'm putting out fires while others pour gasoline on it when I care for Covid patients while the public protests mask mandates."

Resilience: Nurses shared the strategies that helped them build resilience and cope during the challenging times of the pandemic, including spending time with family, being in nature, eating well, painting, and running. Nurses also noted they appreciated the recognition from the public, including the 7 pm cheers, and "gratitude gardens". However, participants cautioned that recognizing the work nurses do must be accompanied by support in the form of adequate staffing levels. One nurse said, 'Self-care is not the only solution. If we don't safely staff, then we won't succeed.'





Hope for the future: Participants noted that the development of a COVID-19 vaccine brought hope that there was ‘light at the end of the tunnel.’ Many nurses shared lessons they had learned during the pandemic, including the realization that nurses need to speak up to influence policy changes. One nurse stated, “That’s the reason I participated in this research.” The nurses also advocated for safe staffing levels with one nurse stating, “We don’t want working short premiums [extra pay for working short staffed], we would rather be fully staffed.” They also advocated for better pandemic planning to support them during future pandemics.

1. Recommendations arising from the study include:

- Ensure safe staffing levels
- Provide mental health and social support for nurses and other clinicians
- Receive recognition and appreciation from leadership
- Request better and more consistent communication from healthcare leaders
- Involve nurses in policy development
- Advocate for better pandemic planning.

Next Steps

The voices of the nurses participating in the study are being communicated to healthcare leaders, educators and policy-makers, and used to champion system and policy changes that will influence and improve patient care, the work environment, and the healthcare system. Study results will also be shared with healthcare researchers, nursing unions and professional organizations, to inform future work to support nurses at the point of care, especially during challenging times like pandemics.

References

RNAO, “Results of nursing survey point to an alarming exodus from the profession following the pandemic.” March 2021. Downloaded 4Aug21 from: <https://rnao.ca/news/media-releases/results-nursing-survey-point-alarming-exodus-profession-following-pandemic-says>