INTERNATIONAL COUNCIL OF NURSES COVID-19 UPDATE



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MASS TRAUMA EXPERIENCED BY THE GLOBAL NURSING WORKFORCE

It has been almost a year since the COVID-19 disease first emerged. Nurses and other healthcare workers around the world face enormous pressure at work, and the pandemic continues to take a heavy toll on the physical and mental wellbeing of front-line healthcare providers. Since the start of the pandemic, the International Council of Nurses (ICN) has been tracking its impact on health worker infections and nurse deaths, and calling for protection of the health workforce. In September 2020, ICN released a report, **Protecting Nurses from COVID-19 a top priority**, revealing the continuing and catastrophic increase in the

number of deaths and infections among nurses due to COVID-19, and exposing the associated risks in the pandemic.

This report, based on information from our members up to the end of 2020, is intended to highlight the continued critical importance of protecting and retaining the nursing workforce in COVID-19 responses. It also provides an insight into how policy decision-makers in governments, healthcare facilities and health organisations can deliver on their responsibility to support and strengthen the nursing workforce, which is the backbone of health systems.



COVID-19 INFECTIONS AND DEATHS AMONG NURSES AND OTHER HEALTHCARE WORKERS

- As of 31 December 2020, the cumulative number of reported COVID-19 deaths in nurses in 59 countries is 2,262. The Americas region accounted for more than 60% of the nurse deaths in the ICN dataset. Brazil, the United States of America and Mexico have the highest number of reported COVID-19 nurse deaths. Unfortunately, the number of deaths among healthcare workers continues to rise and this figure of 2,262 is likely to be a significant underestimation. The actual number of health care worker (HCW) fatalities remains unknown, in the absence of a global systematic and standardised surveillance system.
- As of 31 December 2020, the ICN data set reveals that more than 1.6 million healthcare workers have been infected in 34 countries. ICN has previously identified a wide range in healthcare worker infection rates (up to 30%) and rates vary at different points in time. However, ICN believes that, on average around 10% of all confirmed COVID-19 infections are among HCWs, with a range of 0-15%. At the time of reviewing the data, more than 90 million people had been infected with COVID-19, resulting in 1.9 million deaths worldwide.
- In many countries, nurses were the biggest health worker group to have COVID-19. In Iran, more than 60,000 nurses¹ have been diagnosed with COVID-19, which equates to 45% of the country's nursing workforce². In Mexico, another of the hardest-hit countries, 21% of the nursing workforce (67,320)³ have been infected with the virus. The statistics show the unprecedented pressure and risks that the ongoing pandemic has put on nurses' physical health.
- ICN is extremely concerned about the increased transmissibility of the new variants of SAR-CoV-2 and the impact of the viral changes on infection and hospitalisation rates in healthcare workers. Despite ICN's repeated calls for standardised data collection on healthcare workers' infections and deaths since the beginning of the pandemic, the relevant data by country is still not available. Adequate reporting mechanisms to ensure availability for health workforce data monitoring in the pandemic are not in place in many countries, or countries are failing to make the information available publicly. ICN reiterates that comparable country data on health worker infections and deaths is essential to keeping track of the impacts of the pandemic on the health workforce and monitoring for the COVID-19 response.

THE EXACERBATION OF BURNOUT AND EXHAUSTION AMONG NURSES IN 2020

 In April 2020, ICN flagged the increasing risk of burnout, post-traumatic and other stressrelated disorders among nurses. Months of operating under unprecedented pressure and possible exposure to the virus have put the nursing workforce on the verge of breaking. ICN's recent survey showed close to 80% of our national nursing associations (NNAs) that responded have received reports of mental health distress from nurses working in the COVID-19 response. Nurses reported feeling isolated from their families and are anxious about avoiding infecting their family members with COVID-19. Some



NNAs have consistently received reports of nurses having increased working hours and experiencing mental distress due to the lack of personal protective equipment.

- Studies across regions suggest that the pandemic has exacerbated the stress and anxiety felt by nurses and other health workers. In the early phase of the pandemic in China, about half of the nurses reported moderate and high work burnout, as shown in emotional exhaustion and depersonalisation⁴. In the **USA**⁵, a recent survey found that 93% of healthcare workers were experiencing stress and 76% reported exhaustion and burnout. In a survey in August 2020 by the American Nurses Association⁶, over half of the nurses asked felt overwhelmed and 60% reported difficulty in sleeping. The average patient-to-nurse ratio was significantly higher for medical-surgical nurses in some hospitals in the US.7 In Spain⁸, 80% of nurses reported symptoms of anxiety and increasing burnout. In **Brazil**⁹, the prevalence of anxiety among nursing professionals was close to 50% and of depression it was 25%. In a national survey among health workers in Australia, more than half reported burnout and 28% reported depression¹⁰. Over 40% of nurses greatly agreed with the statement that they are 'scared to care for sick and carrier patients' and 'caring for sick or carrier COVID-19 patients entails a significant emotional burden' in Israel.¹¹ A survey conducted in 13 countries in Africa revealed that a higher percentage of respondents asserted daily depression symptoms during the pandemic (20%) in comparison to prior to the pandemic (2%).¹² Studies in the UK¹³, Italy¹⁴ and Mexico¹⁵ have shared consistent concerns in their findings.
- ICN member, the Japanese Nursing Association, stated that about 15% of hospitals across Japan had nurses quit their jobs, and some 20% of nurses reported they had experienced discrimination or prejudice amid the spread of the virus.¹⁶ Reports from our NNAs in every region stated that they are somewhat or extremely concerned about the

issues of burnout, increased stress and other psychological demands, and that they will lead to an increase in the number of nurses leaving the profession in the future.

- The emerging evidence suggests that there is a global phenomenon of mass trauma experienced by nurses working in the COVID-19 response. The phenomenon is complex and intertwined with various issues including persistently high workloads, increased patient depency and mortality, occupational burnout, inadequate personal protective equipment, the fear of spreading the virus to families and relatives, an increase in violence and discrimination against nurses, COVID19 denial and the propogation of misinformation, and a lack of social and mental health support. ICN also warns that the potential longer terms impacts of COVID-19 including PTSD and long COVID are currently unknown but potentially extremely significant.
- ICN has projected a global shortfall of more than 10 million nurses by 2030 in a recent report Ageing well - policies to support older nurses at work, but that does not take into account the continued and growing effects of the COVID-19 pandemic. With the possible 'COVID-19 Effect' potentially increasing the number of nurses reaching the point of burnout and being absent from work or leaving the profession, the gap could be close to 14 million nurses in the future. Nurses accounted for 60% of the health professional workforce around the world. There would be no Health for All without sufficient nurses, supported effectively to be at work. Policymakers need to act on growing signs of the negative influence of the pandemic on the retention of the healthcare workforce and the potential threat to global health. ICN calls on governments to take urgent action to ensure the physical and mental health of nurses and other health workers, to build resilience and provide support for the health workforce and to develop policy responses to address the global nursing shortage.



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