

## Nursing and Grief During the Coronavirus Disease 2019 Pandemic

### Abstract

Today, coronavirus disease 2019 is a recent phenomenon that becomes increasingly widespread and requires coping. Nurses have been at the forefront of the global fight against this pandemic which still largely remains unknown. Nurses who experience troubles at the workplace and in their private lives due to the pandemic have experienced losses, and they still continue to experience the same. The management of sorrow resulting from losses needs different strategies to cope with the pandemic since the ongoing process of losses and limited coping resources that nurses have highlighted the significance of the management of sorrow. Investigating the feeling of sorrow that nurses may experience and raising awareness toward such critical issues are of utmost importance, especially in these days when nurses experience losses on a daily basis. Therefore, this review aims to explore the feeling of sorrow that nurses experience during coronavirus disease 2019 pandemic based on nurses' own statements.

**Keywords:** COVID-19, loss, nurse, pandemic

Tuğçe Çamlıca<sup>1</sup> , Fatma Eti Aslan<sup>2</sup> ,  
Hayat Yalın<sup>2</sup> 

<sup>1</sup>Department of Nursing, Süleyman Demirel University, Faculty of Health Sciences, Isparta, Türkiye

<sup>2</sup>Department of Nursing, Bahçeşehir University, Faculty of Health Sciences, Istanbul, Türkiye

### Introduction

Coronavirus disease 2019 (COVID-19) is often characterized by adverse medical conditions and negative feelings.<sup>1</sup> One of these feelings is grief which is, in fact, a natural reaction to the sense of loss and evokes several other feelings such as pain, sadness, suffering, and misery.<sup>2</sup> People have experienced loss in different ways during the COVID-19 pandemic that does not only refer to the loss of a relative or a family member but also occurred in various forms such as the loss of health, strength, autonomy, or bodily function.<sup>3,4</sup> The unexpected outbreak of the pandemic and its complexity have caused even more losses and severe grief.<sup>5</sup>

It has been frequently reported that nurses constitute the vast majority of healthcare professionals during the COVID-19 pandemic and they have played a significant role.<sup>6-9</sup> Moreover, nurses usually spend more time with patients in comparison to other health professionals and help to improve their health as well as enhance their well-being.<sup>10</sup> In the face of such an overwhelming pandemic, nurses were also obliged to cope with too many losses. It may not necessarily be the loss of a relative or a family member, but it may as well be various kinds of losses, particularly including the loss of a patient experienced by the patients and their relatives rather than the loss of only a loved one.<sup>11</sup> Grief is simply a natural response to the sense of loss and it has posed an increasing challenge for nurses during the COVID-19 pandemic, which brought about difficulties in developing coping strategies. Given that nurses are supposed to deal with their own losses as well as the losses of patients and their relatives, it would be obvious that grief has a more ravaging effect on nurses than any other professionals.<sup>12</sup> Furthermore, it would be reasonable to argue that nurses experience or may experience grief more profoundly due to the agonizing number of losses during the COVID-19 pandemic. However, the experiences of grief and the sense of loss have not been particularly reported in studies conducted in Türkiye while there are a considerable number of studies on psychological and mental issues that nurses must endure.

Considering such a background, this review will focus on the losses and grief experienced by nurses during the COVID-19 pandemic with references to the self-reports of nurses.

Cite this article as: Çamlıca T, Eti Aslan F, Yalın H. Nursing and grief during the coronavirus disease 2019 pandemic. *J Educ Res Nurs*. 2023;20(2):186-189.

Corresponding author: Tuğçe Çamlıca  
E-mail: tugceayar@sdu.edu.tr

Received: March 1, 2021  
Accepted: December 26, 2021  
Publication Date: June 1, 2023



Copyright@Author(s) - Available online at  
www.jer-nursing.org  
Content of this journal is licensed under a  
Creative Commons Attribution-NonCommercial  
4.0 International License.

## Nursing and Grief

The pandemic has caused dramatic changes in the daily routines of people in various ways.<sup>3</sup> Particularly, COVID-19 has caused a number of deteriorations in patients' health conditions not to mention respiratory function deficiencies and other physical symptoms.<sup>13</sup> Meanwhile, the sense of grief has been accentuated due to the inaccessibility of healthcare services and visit limitations in in-patient clinics.<sup>14</sup> In a case study conducted by Aktura and Özden,<sup>15</sup> it was found that the most crucial support system of patients diagnosed with COVID-19 was their families. It was also reported that patients experienced grief and anxiety due to the uncertainties caused by COVID-19, which demonstrates that the sense of inadequacy for a family member of a COVID-19 patient to take part in patient care substantially influences the feeling of grief that a COVID-19 patient may experience. However, losses during the COVID-19 pandemic are not limited to these relatively predictable obstacles.

During the pandemic, millions of people have lost their relatives, friends, colleagues, or family members due to COVID-19. Because of the restrictions in funerals or lockdown regulations, many people have not been able to pay their final respects to their beloved ones, which led to unprecedented emotional disturbances beyond grief. In line with the recent research in the scientific literature, it can be suggested that the sense of grief may enhance and might become even more complicated, because of the loss of relatives from COVID-19, uncertainties about the course of the pandemic, unfulfilled rituals due to sudden and unexpected losses, and the sense of anxiety that individuals may experience similar traumas and lose their relatives.<sup>5,13,16</sup>

Although the effects of COVID-19 indicate personal variations, nurses have closely witnessed the losses of patients and/or their relatives and their experiences of grief when, in the meantime, devotedly providing the best care. Additionally, nurses have functioned as a reliable support system for patients as well as their relatives during the pandemic and stated their own experiences as follows:<sup>12</sup>

"We respond to the medical needs of patients with COVID-19 and support them psychologically."<sup>17</sup>

"We are traumatized by the experiences of patients."<sup>18</sup>

"We mentally suffer from what is happening."<sup>19</sup>

"Unfortunately, we lost the patient. It certainly is a psychological trauma for us."<sup>19</sup>

Taking into account all of these discussions and evidence, it can reasonably be argued that nurses might have similar experiences of grief and loss to those of patients and their relatives. Moreover, nurses have to deal with other losses that have been caused by the pandemic.<sup>12</sup> Nurses comprise a large part of the medical teams and they are often on the frontlines to fight against pandemics and other medical urgencies.<sup>9</sup> Pappa et al<sup>20</sup> carried out a study and reported that nurses might be directly or indirectly exposed to COVID-19-related issues while providing care.<sup>8</sup> They similarly noted that nurses' sense of grief might be worsened since they were spending a lot of time with COVID-19 patients and they were overwhelmed with the increasing number of deaths in their units, sharing the pain and suffering of the patients and their relatives, and controversial ethical problems.<sup>20</sup> It has also been confirmed in a number of studies that nurses had

traumatic cases in a short time span and they had more severe levels of grief than any other medical personnel.<sup>21-24</sup> Furthermore, Serrano-Ripoll et al<sup>22</sup> additionally indicated in a meta-analysis that the nurses' sense of grief might be heightened due to post-traumatic stress disorders caused by traumatic cases during the pandemic.

Nurses do their best to continue providing nursing care with limited resources and they spend a great deal of time with patients providing treatment and care. Besides their hospital services, nurses also help patients in home quarantine and they are assigned to public health services such as contact tracing and monitoring care.<sup>25,26</sup> An et al<sup>11</sup> further found that nurses worked irregular, and gradually increasing, hours during the COVID-19 pandemic, they had difficulties in finding protective equipment, and they had to provide care for more patients than they could. Recent studies have pointed out that these obstacles and challenges were among the major causes of psychological problems that nurses frequently experienced during the pandemic.<sup>11,27,28</sup> In relevant studies conducted to determine the problems of nurses during the pandemic, the nurses expressed their feelings as follows:

"The number of our patients has increased a lot."<sup>29</sup>

"Protective equipment helps a lot but they are not enough. We need that equipment to protect ourselves."<sup>30</sup>

"The hospital feels like home now."<sup>31</sup>

"I haven't returned to my house for 24 days."<sup>32</sup>

"We are working too many hours because of the insufficient number of nurses."<sup>33</sup>

These statements clearly indicate that nurses have medical and psychological problems working during an uncertain pandemic.<sup>34</sup> Liu et al<sup>28</sup> reported that nurses who provide care for patients diagnosed with COVID-19 were anxious about getting infected and losing their lives. The nurses explain their grief about their losses and anxieties about future losses:

"I don't want to die while I try keeping others alive."<sup>35</sup>

"There were times when I thought I was going to die here."<sup>29</sup>

"We are afraid of getting infected with COVID-19."<sup>32</sup>

"We all feel anxious, we are spiritually torn down."<sup>35</sup>

Besides, their sense of grief has worsened when they are worried about their families and colleagues, who function as support mechanisms for nurses to cope with the traumas and the sense of grief. Because nurses do not only experience problems in their workplace, they may also have problems when they stay away from their families and their homes. Bayulgen et al<sup>36</sup> also reported that 73.6% of nurses lived with their parents and they were concerned about infecting their family members. Terkes and Yamac<sup>37</sup> similarly found that nurses were separated from their spouses and children during the pandemic and they were anxious about infecting their family. They also stated that the nurses who participated in the study were poorly undertaking the care responsibilities of their family members. Obviously, the sense of grief is further embroiled when their relatives, colleagues, friends, or family members get infected with COVID-19 or when they

pass away.<sup>38,39</sup> Nurses express this loss and grief they experience as follows;

"I had to leave my home since the 1st day I started working with COVID-19 patients. My grandmother takes care of my two-and-a-half-year-old daughter. I moved to another house to protect them. I am staying with my four colleagues in this house. I am feeling underpowered now."<sup>29</sup>

"The morning I left home, my two-and-a-half-year-old daughter got up early although she normally never does. She was grabbing me and saying, "No, don't go to work, there's a virus out there." I came to work in tears, and I have never gone back to my house since then."<sup>29</sup>

"Every patient we lost makes me think what if my family gets sick."<sup>29</sup>

"I had to keep away from my family. I missed hugging them."<sup>29</sup>

"One day, my son wanted to hug me, and I said 'mommy, you know there is a virus, we cannot hug'. He said to me, 'Is there a virus between the mother and the child?' I burst into tears right there."<sup>33</sup>

The participant nurses have similar feelings for their colleagues as well. Huang et al<sup>38</sup> and Nowicki et al<sup>39</sup> noted that nurses were entangled with a sense of grief when they learned that their colleagues got infected or, even more tragically, lost their lives. Many nurses, on the other hand, clearly expressed their anxiety and sense of grief as follows:

"It is very weary to see the people I work with are dying, the only thing I wonder is when my turn will come."<sup>35</sup>

Besides, like many other healthcare professionals, nurses are also at risk of stigmatization and social exclusion during the pandemic.<sup>40</sup> Serrano-Ripoll et al<sup>22</sup> and Ramaci et al<sup>40</sup> reported that nurses were stigmatized and outcasted during the COVID-19 pandemic.

"We feel alone and left out."<sup>41</sup>

"When people hear that I work in the pandemic service, they say 'Stay away from her!'"<sup>18</sup>

Due to the unexpected and sudden spread of the disease, they cannot get away from their immediate environment and they are obliged to tackle their problems both personally and professionally on their own.<sup>39</sup> Accordingly, nurses are experiencing restraints in developing coping strategies and they are gradually losing their strength, which consequently intensifies the impact of grief.

## Conclusion

Nurses struggle with uncertainties during the pandemic and it is of utmost significance to understand their situation, to raise awareness about their losses, and to empathize with their sense of grief. Nurses have been more frequently overwhelmed with the sense of loss and grief during the COVID-19 pandemic. Moreover, they have difficulties in developing coping strategies to deal with these problems and their experience of grief becomes increasingly complicated. In this regard, it is thought that this review will pave the way to provide an insight into the sense of loss and grief that nurses recently

experienced or might potentially experience during the compelling COVID-19 pandemic.

**Peer-review:** Externally peer-reviewed.

**Author Contributions:** Concept – T.Ç., F.E.A., H.Y.; Design – T.Ç., F.E.A.; Supervision – F.E.A., H.Y.; Resources – T.Ç.; Materials – T.Ç.; Data Collection and/or Processing – T.Ç.; Analysis and/or Interpretation – T.Ç., F.E.A., H.Y.; Literature Search – T.Ç.; Writing – T.Ç.; Critical Review – F.E.A., H.Y.

**Declaration of Interests:** The authors have no conflict of interest to declare.

**Funding:** The authors declared that this study has received no financial support.

## References

1. Mortazavi SS, Assari S, Alimohamadi A, Rafiee M, Shati M. Fear, loss, social isolation, and incomplete grief due to COVID-19: a recipe for a psychiatric pandemic. *Basic Clin Neurosci*. 2020;11(2):225-232. [CrossRef]
2. Betriana F, Kongsuwan W. Lived experiences of grief of Muslim nurses caring for patients who died in an intensive care unit: a phenomenological study. *Intensive Crit Care Nurs*. 2019;52:9-16. [CrossRef]
3. Walker W. Support after patient death in the intensive care unit: why is an important letter in grief. *Nurs Crit Care*. 2020;25(5):266-268. [CrossRef]
4. Karakurt P. Kayıp ve ölüm süreci. İçinde Atabek Aştı T, Karadağ A. Çev. *Hemşirelik Esasları Hemşirelik Bilimi ve Sanatı*. İstanbul: Akademi Basın ve Yayıncılık. 2016;1155-1172.
5. Wallace CL, Wladkowski SP, Gibson A, White P. Grief during the COVID-19 pandemic: considerations for palliative care providers. *J Pain Symptom Manage*. 2020;60(1):e70-e76. [CrossRef]
6. Galehdar N, Toulabi T, Kamran A, Heydari H. Exploring nurses' perception of taking care of patients with coronavirus disease (COVID-19): a qualitative study. *Nurs Open*. 2021;8(1):171-179. [CrossRef]
7. Abdollahimohammad A, Firouzkouhi M. Future perspectives of nurses with COVID 19. *J Patient Exp*. 2020;7(5):640-641. [CrossRef]
8. Jiang Y, Wang H, Chen Y, et al. Clinical data on hospital environmental hygiene monitoring and medical staff protection during the coronavirus disease 2019 outbreak. *MedRxiv*. 2020. [CrossRef]
9. Pan L, Wang L, Huang X. How to face the novel coronavirus infection during the 2019-2020 epidemic: the experience of Sichuan Provincial People's Hospital. *Intensive Care Med*. 2020;46(4):573-575. [CrossRef]
10. Zheng R, Lee SF, Bloomer MJ. How nurses cope with patient death: a systematic review and qualitative meta-synthesis. *J Clin Nurs*. 2018;27(1-2): e39-e49. [CrossRef]
11. An Y, Yang Y, Wang A, et al. Prevalence of depression and its impact on quality of life among frontline nurses in emergency departments during the COVID-19 outbreak. *J Affect Disord*. 2020;276:312-315. [CrossRef]
12. Khalaf IA, Al-Dweik G, Abu-Snieneh H, et al. Nurses' experiences of grief following patient death: a qualitative approach. *J Holist Nurs*. 2018;36(3):228-240. [CrossRef]
13. Moore KJ, Sampson EL, Kupeli N, Davies N. Supporting families in end-of-life care and bereavement in the COVID-19 era. *Int Psychogeriatr*. 2020;32(10): 1245-1248. [CrossRef]
14. Kokou-Kpolou CK, Fernández-Alcántara M, Cénat JM. Prolonged grief related to COVID-19 deaths: do we have to fear a steep rise in traumatic and disenfranchised griefs? *Psychol Trauma*. 2020;12(S1):S94-S95. [CrossRef]
15. Aktura SÇ, Özden G. COVID-19 tanısı almış bireyin hemşirelik bakımı: nanda- r'ya göre hemşirelik tanları, nic hemşirelik girişimleri ve noc çıktıları. *Med Sci*. 2021;16(3):183-193.
16. Çelik F, Covid GN. 19 Pandemisinde Yas. *Klin Psikiyat Derg*. 2020;23(1):99-102. [CrossRef]
17. Türk H. *Covid 19'u Yenen Hemşire, Çocuklarının Üzülmemesi için Hastalığını Gizlemiştir*; 2020. Available at: <https://www.haberturk.com/covid-19-u-yen-en-hemshire-cocuklarinin-uzulmemesi-icin-hastaligini-gizlemis-2883095>. Erişim Tarihi 17.01.2021.
18. Coşkunarda G. *Pandemi Servisinde Çalıştığımı Duyanlar Benden Uzak Duruyor*; 2020. Available at: <https://www.hurriyet.com.tr/kelebek/hurriyet-pazar/pandemi-servisinde-calistigimi-duyanlar-benden-uzak-duruyor-41593429>. Erişim Tarihi 17.01.2021.

19. Cumhuriyet. *Yoğun Bakımdaki Hastaların Son İstekleri Sağlık Çalışanlarını Bile Ağlatıyor*; 2020. Available at: <https://www.cumhuriyet.com.tr/video/yoğun-bakımdaki-hastaların-son-istekleri-sağlık-calisanlarını-bile-aglatıyor-1796369>. Erişim Tarihi 17.01.2021.
20. Pappa S, Ntella V, Giannakas T, Giannakoulis VG, Papoutsis E, Katsounou P. Prevalence of depression, anxiety, and insomnia among healthcare workers during the COVID-19 pandemic: a systematic review and meta-analysis. *Brain Behav Immun*. 2020;88:901-907. [CrossRef]
21. Huang L, Lei W, Xu F, Liu H, Yu L. Emotional responses and coping strategies in nurses and nursing students during Covid-19 outbreak: a comparative study. *PLoS One*. 2020;15(8):e0237303. [CrossRef]
22. Serrano-Ripoll MJ, Meneses-Echavez JF, Ricci-Cabello I, et al. Impact of viral epidemic outbreaks on mental health of healthcare workers: a rapid systematic review and meta-analysis. *J Affect Disord*. 2020;277:347-357. [CrossRef]
23. Barelllo S, Palamenghi L, Graffigna G. Burnout and somatic symptoms among frontline healthcare professionals at the peak of the Italian COVID-19 pandemic. *Psychiatry Res*. 2020;290:113129. [CrossRef]
24. Song X, Fu W, Liu X, et al. Mental health status of medical staff in emergency departments during the coronavirus disease 2019 epidemic in China. *Brain Behav Immun*. 2020;88:60-65. [CrossRef]
25. Chang D, Xu H, Rebaza A, Sharma L, Dela Cruz CSD. Protecting health-care workers from subclinical coronavirus infection. *Lancet Respir Med*. 2020; 8(3):e13. [CrossRef]
26. Choi KR, Skrine Jeffers K, Cynthia Logsdon M. Nursing and the novel coronavirus: risks and responsibilities in a global outbreak. *J Adv Nurs*. 2020; 76(7):1486-1487. [CrossRef]
27. Hacımusalar Y, Kahve AC, Yaşar AB, Aydın MS. Anxiety and hopelessness levels in COVID-19 pandemic: a comparative study of healthcare professionals and other community sample in Turkey. *J Psychiatr Res*. 2020;129:181-188. [CrossRef]
28. Liu Q, Luo D, Haase JE, et al. The experiences of health-care providers during the COVID-19 crisis in China: a qualitative study. *Lancet Glob Health*. 2020;8(6):e790-e798. [CrossRef]
29. Öztürk F. Dünya Hemşireler günü: Hemşireler koronavirüs Günlerinde neler yaşıyor. *NE Talep Ediyor?* 2020. Available at: <https://www.bbc.com/turkce/52629169>. Erişim Tarihi 09.01.2021.
30. Türkiye yoğun bakım Hemşireler Derneği. *Farkındayım Yanındayım*. Available at: <https://tybhd.org.tr/>. Erişim Tarihi 10.01.2021a.
31. Karakaş B. *Sağlık Çalışanları Anlatıyor: Silahsız Cepheye Sürülüyor Gibi Hissediyorum*; 2020. Available at: <https://www.dw.com/tr/sa%C4%9Fl%C4%B1k-%C3%A7a%C4%B1%C5%9Fanlar%C4%B1-anlat%C4%B1yor-silahs%C4%B1z-cepheye-s%C3%BCr%C3%BCl%C3%BCyor-gibi-hissediyorum/a-52916173>. Erişim Tarihi 09.01.2021.
32. Türkiye Yoğun Bakım Hemşireler Derneği. *Farkındayım Yanındayım*. Available at: <https://youtu.be/9RChoxPTbFQ>. Erişim Tarihi 10.01.2021b.
33. Çiftçi Yagıcı M. *Hemşireler Salgın ile Mücadelede Ön Cepheye Fedakârlık Gösteriyor*; 2020. Available at: <https://www.trthaber.com/haber/saglik/hemşireler-salgın-ile-mucadelede-on-cephede-fedakarlik-gosteriyor-483542.html>. Erişim Tarihi 10.01.2021.
34. Lai J, Ma S, Wang Y, et al. Factors associated with mental health outcomes among health care workers exposed to coronavirus disease 2019. *JAMA Netw Open*. 2020;3(3):e203976. [CrossRef]
35. Özcan N. *Kısa Dalga'dan "Koronavirüs Güncesi" Sağlık Çalışanları anlatıyor: Yaşatırken Ölmek İstemiyorum*; 2020. Available at: <https://t24.com.tr/haber/kisa-dalga-dan-koronavirus-guncesi,869366>. Erişim Tarihi 10.01.2021.
36. Bayulgen MY, Bayulgen A, Yeşil FH, Türksever HA. COVID-19 pandemisi sürecinde çalışan hemşirelerin anksiyete ve umutsuzluk düzeylerinin belirlenmesi. *Sağlık Bilimleri Univ Hemşirelik Derg*. 2020;3(1):1-6.
37. Terkes N, Yamac SU. Covid-19 hastaları ile çalışan evli hemşire ve ebelerin aile içi süreçlerindeki değişimlerin belirlenmesi. *Genel Sağlık Bilimleri Derg*. 2021;3(2):102-111.
38. Huang LH, Chen CM, Chen SF, Wang HH. Roles of nurses and National Nurses Associations in combating COVID-19: Taiwan experience. *Int Nurs Rev*. 2020;67(3):318-322. [CrossRef]
39. Nowicki GJ, Ślusarska B, Tucholska K, Naylor K, Chrzan-Rodak A, Niedorys B. The severity of traumatic stress associated with COVID-19 pandemic, perception of support, sense of security, and sense of meaning in life among nurses: research protocol and preliminary results from Poland. *Int J Environ Res Public Health*. 2020;17(18):6491. [CrossRef]
40. Ramaci T, Barattucci M, Ledda C, Rapisarda V. Social stigma during COVID-19 and its impact on HCWs outcomes. *Sustainability*. 2020;12(9):3834. [CrossRef]
41. Yıldız C. *Beyaz Melekler Tükenmişlik Yaşıyor*; 2020. Available at: <https://www.saglikpersoneli.com.tr/gundem/beyaz-melekler-tukenmislik-yasiyor-h12258.html>. Accessed January 17, 2021.