

Self-Care in Nursing Professionals during the COVID-19 Pandemic: An Integrative Review

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Theme: Promotion of health, well-being, and quality of life

Contribution to the field: This study's findings hold significant implications for the nursing profession, shedding light on the self-care actions undertaken during the complex COVID-19 situations. These actions, which had repercussions at individual and collective health levels, are crucial for understanding and addressing the challenges nursing professionals faced during the pandemic. Moreover, this research expands the disciplinary boundaries by incorporating theoretical references from other sciences, such as sociology, to comprehend health promotion in stressful situations, which are not exclusive to a pandemic.

Abstract

Introduction: The COVID-19 pandemic posed unprecedented challenges to the nursing staff, who were at the forefront of patient care and their families. Exposed to the virus due to strenuous work schedules and other factors, their health was at risk. However, they took proactive self-care actions to counteract these factors, promote self-health, and prevent the onset of diseases caused by stressors from the pandemic. These actions, identified in the literature published between 2020-2023, have significantly impacted their individual and collective health. **Objective:** To identify the self-care strategies implemented by nursing professionals during the COVID-19 pandemic and to analyze them in the light of Giddens' theoretical proposal. **Materials and methods:** An integrative literature review under a descriptive scope was conducted between June and September 2023 in the following databases: Pubmed, Scielo, Science Direct, Lilacs, and Google Scholar; also, PRISMA recommendations were taken into account for the organization of the search. **Results:** 40 articles, published between 2020 and 2023 and representing for different methodological designs, were included in the review. The self-care implemented by nurses during the pandemic was assessed in the light of Giddens' theoretical proposal under two types of actions: intentional, which account for physical, mental, and emotional health care activities, and deliberate, which focus on care at a social level. **Conclusions:** The identified self-care actions were oriented toward the promotion of individual and collective health of workers, the reduction of employee turnover, the recognition of stress, and the strengthening of resilience, which can also be implemented nowadays.

Keywords (Source: DeCS)

Nursing; self-care; health promotion; COVID-19; pandemics.

4 Autocuidado en profesionales de enfermería durante la pandemia covid-19: una revisión integrativa

Resumen

Introducción: durante la emergencia por covid-19 el personal de enfermería estuvo presente en el cuidado de los pacientes y sus familias, exponiéndose constantemente al virus debido a los extenuantes horarios de trabajo y a otros factores que llevaron al debilitamiento de su salud. Para contrarrestar dichos factores, se han identificado, en la literatura publicada entre el periodo 2020-2023, diferentes acciones de autocuidado realizadas por los profesionales de enfermería con el fin de promover su salud y prevenir la aparición de enfermedades causadas por estresores propios derivados de la pandemia. **Objetivo:** identificar las estrategias de autocuidado implementadas por los profesionales de enfermería durante la pandemia covid-19 y analizar las mismas a la luz de la propuesta teórica de Giddens. **Materiales y Método:** se realizó una revisión integrativa de la literatura con alcance descriptivo entre junio y septiembre de 2023 en las siguientes bases de datos: Pubmed, Scielo, Science Direct, Lilacs y Google Académico; asimismo, se tuvieron en cuenta las recomendaciones PRISMA para la organización de la búsqueda. **Resultados:** se incluyeron 40 artículos en la revisión, publicados entre 2020 y 2023, con diferentes diseños metodológicos. El autocuidado realizado por los enfermeros durante la pandemia se organizó a la luz de la propuesta teórica de Giddens, mediante dos tipos de acciones: intencionadas, las cuales contienen actividades para el cuidado de la salud física, mental y emocional; y deliberadas, enfocadas al cuidado a nivel social. **Conclusión:** las acciones de autocuidado identificadas se orientaron a la promoción de la salud individual y colectiva de los trabajadores, la disminución de la deserción laboral, el reconocimiento del estrés y el fortalecimiento de la resiliencia, las cuales también pueden implementarse en la actualidad.

Palabras clave (Fuente DeCS)

Enfermería; autocuidado; promoción de la salud; covid-19; pandemias.

Autocuidado em profissionais de enfermagem durante a pandemia da covid-19: uma revisão integrativa

Resumo

Introdução: durante a emergência da covid-19, os enfermeiros estiveram presentes no atendimento aos pacientes e seus familiares, sendo constantemente expostos ao vírus devido a jornadas de trabalho extenuantes e outros fatores que levaram à fragilização de sua saúde. Para neutralizar esses fatores, foram identificadas na literatura publicada entre 2020 e 2023 diferentes ações de autocuidado realizadas por profissionais de enfermagem para promover sua saúde e prevenir o aparecimento de doenças causadas por estressores derivados da pandemia. **Objetivo:** identificar as estratégias de autocuidado implementadas pelos profissionais de enfermagem durante a pandemia da covid-19 e analisá-las à luz da proposta teórica de Giddens. **Materiais e método:** foi realizada uma revisão integrativa da literatura com escopo descritivo, entre junho e setembro de 2023, nas seguintes bases de dados: PubMed, SciELO, Science Direct, Lilacs e Google Scholar; além disso, foram levadas em conta as recomendações PRISMA para a organização da busca. **Resultados:** 40 artigos foram incluídos na revisão, publicados entre 2020 e 2023, com diferentes desenhos metodológicos. O autocuidado realizado pelos enfermeiros durante a pandemia foi organizado à luz da proposta teórica de Giddens, por meio de dois tipos de ações: intencionais, que contêm atividades para o cuidado da saúde física, mental e emocional; e deliberadas, voltadas para o cuidado em nível social. **Conclusões:** as ações de autocuidado identificadas foram orientadas para a promoção da saúde individual e coletiva dos trabalhadores, para a redução da deserção do trabalho, para o reconhecimento do estresse e para o fortalecimento da resiliência, que também podem ser implementadas atualmente.

Palavras-chave (Fonte DeCS)

Enfermagem; autocuidado; promoção da saúde; covid-19; pandemias.

Introduction

The SARS-CoV-2 virus, as the cause of the COVID-19 disease, brought about morbidity and mortality to a large portion of the world population (1). During this pandemic, the role of nursing professionals was vital due to their social commitment to health care and the humane care of at-risk people, mainly because their actions made it possible to prevent and detect complications early on (2), favoring the preservation of patients' health throughout their stay and up until hospital discharge.

However, the conditions imposed by the pandemic onset a series of complications in the healthcare system and the healthcare professional teams, transcending any coping mechanisms and triggering significant risks to physical health and other dimensions of the human being (3). This increased risk product of stress, insomnia, anxiety, exhaustion, depression, and other symptoms led to the development of multiple diseases (4), which, even though the pandemic was over, are still present through workplace situations such as work overload or the dynamics within some hospital areas. These circumstances cause absenteeism and employee turnover.

Nursing's object of study is care; this includes the care of others and oneself, which affords nursing professionals the tools and skills to promote their health through self-care. According to Giddens (5), health promotion is a process that allows people to gain control over health and improve it, achieving a positive state at the individual, family, and community levels; these dimensions include physical, mental, spiritual, social, environmental, intellectual, and financial conditions. The studies conducted so far found that during the pandemic, nursing professionals engaged in different actions to facilitate their self-care (6), lowering the risk and preventing the onset of diseases typical of health personnel. Per the above, the objective of this review was to identify the self-care strategies implemented by nursing professionals during the COVID-19 pandemic and to analyze them in the light of Giddens' theoretical proposal.

Materials and Methods

An integrative, descriptive review was conducted between June and September 2023 under the guidelines of Whittermore and Knalf (7); it was developed in five stages: statement of the problem, research question, literature search, collection, analysis, and presentation of results.

The databases employed were PubMed, Scientific Electronic Library Online (SciELO), Science Direct, Latin American and Caribbean Health Sciences Literature (LILACS), and Google Scholar. The population, context, concept (PCC) strategy was used to establish the search criteria. The following DeCS & MeSH terms in Spanish, English, and Portuguese were included along with the Boolean operators: "Pandemic of COVID-19" AND "strategy" OR "self-care" OR "coping behavior" OR "self-esteem" AND "nurses" OR nursing. For

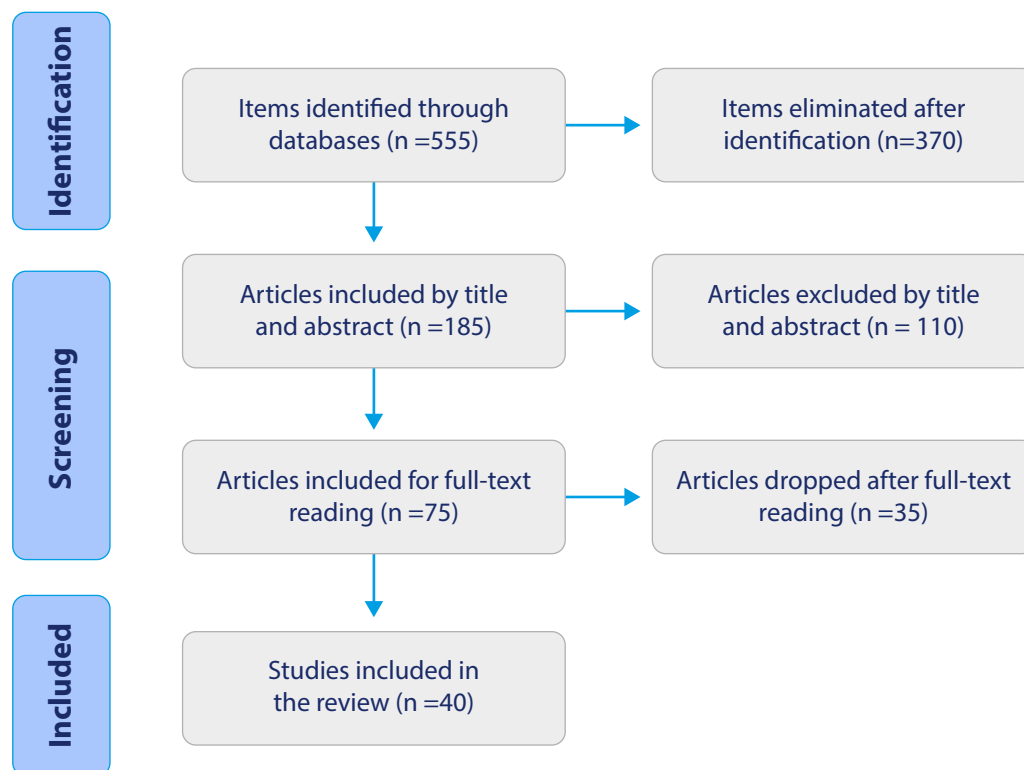
search limiters, we had texts published between 2020 and 2023 with abstract and full text available in scientific journals, as well as gray literature, specifically, master's and doctoral theses that addressed the study phenomenon and were published in online repositories, regardless of the methodological design they used. Articles by professionals other than nurses were excluded.

In the selection phase, the documents were organized by title, journal, year of publication, country, methodological design, objective, and self-care actions performed by nurses. The analysis was conducted through in-depth reading in light of the conceptual bases of self-care proposed by Giddens in the health promotion framework (8).

Results

In total, 555 articles were retrieved, of which 370 were eliminated because they did not meet the above criteria, and some appeared twice; 185 documents were reviewed by title and abstract, of which 110 were excluded because they did not address the study's objective. Seventy-five full-text papers were read, and 40 were finally selected for the integrative review because they included self-care strategies performed by nurses during the COVID-19 pandemic (Figure 1). The information was collected, organized, and analyzed using an ad hoc instrument containing the journal name, authors, year, keywords, descriptors, language, place of research, period of analysis, year of publication, objectives, justification, design, conclusions, and observations.

Figure 1. Flowchart for the Selection and Inclusion of Articles (2023)



Source: Adapted from the PRISMA Statement 2020 model (9).

As for the journals consulted, we shall refer mainly to the *International Journal of Nursing Studies*, *Science and Care*, *Nursing Research and Education*, *Rev Latinoamericana de enfermagem*, *Acta Paulista de Enfermeria*, and *Nursing Image and Development*.

The period of consultation of the selected articles was from 2020 to 2023, and the classification of the languages of publication was 67.5 % Spanish, 20 % English, and 12.5 % Portuguese. The studies were conducted in Brazil, 12.5 %; Spain, 12.5 %; Colombia, 12.5 %; the United States, 10 %; Peru, 7.5 %; Ecuador, 7.5 %; Chile, 7.5 %; China, 5 %; Costa Rica, 5 %; Argentina, 5 %; Panama, 5 %, and Cuba, Mexico, United Kingdom, and Poland with 2.5 %. These studies all accounted for different methodological designs (Table 1).

Table 1. Articles Included for Integrative Review

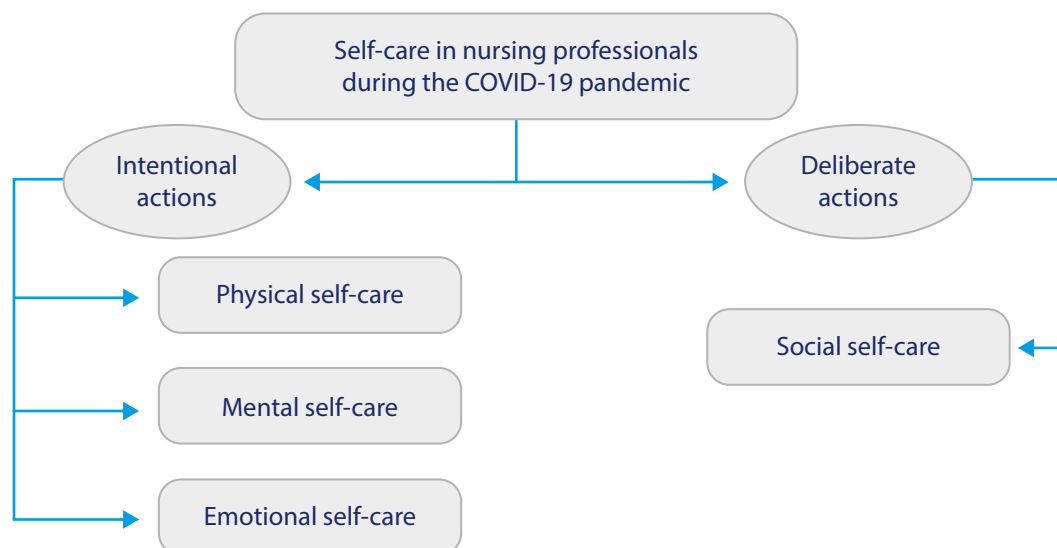
Authors	Country	Year	Type of study
Lahite-Savón et al. (2)	Cuba	2020	Literature review
Carlos-Cajo et al. (10)	Peru	2020	Literature review
Franco Coffré et al. (11)	Ecuador	2020	Cross-sectional study
Holguín Lezcano et al. (12)	Colombia	2020	Theoretical review
Fernández et al. (13)	USA	2020	Systematic review
Dong et al. (14)	China	2020	Bibliographic review
Noreña García (15)	Colombia	2020	Qualitative study
Castañeda et al. (16)	Brazil	2020	Theoretical review
Martínez-Esquivel (17)	Costa Rica	2020	Integrative review
Barreto Bernardo et al. (18)	Peru	2021	Cross-sectional study
Sánchez-De la Cruz et al. (19)	Spain	2021	Cross-sectional study
Zheng et al. (20)	China	2021	Cross-sectional study
Silva et al. (21)	USA	2021	Integrative review
Peñafiel-León et al. (22)	Ecuador	2021	Cross-sectional study
Riedel et al. (23)	USA	2021	Bibliographic review
Pieró Salvador et al. (24)	Spain	2021	Cross-sectional study
Valencia-Gutiérrez et al. (25)	México	2021	Cross-sectional study
Quiroz Ubillus et al. (26)	Peru	2021	Integrative review
Henao-Castaño et al. (27)	Colombia	2021	Cross-sectional study
Sepúlveda et al. (28)	Chile	2021	Descriptive study
Rodríguez Hernández et al. (29)	Colombia	2021	Systematic review
Burbano (30)	Brazil	2021	Integrative review
Arpacioglu et al. (31)	USA	2021	Cross-sectional study
López Olmo (32)	Spain	2021	Bibliographic review
Rodríguez et al. (33)	Spain	2022	Bibliographic review

Authors	Country	Year	Type of study
Macaya et al. (34)	Chile	2022	Bibliographic review
Vega et al. (35)	Costa Rica	2022	Descriptive study
King et al. (36)	UK	2022	Quantitative study
Uribe-Tohá et al. (6)	Chile	2022	Cross-sectional study
Sierakowska et al. (37)	Poland	2022	Cross-sectional study
Brito Ayala et al. (38)	Ecuador	2022	Case studies
Bazan et al. (39)	Argentina	2022	Cross-sectional study
Vieira et al. (40)	Brazil	2022	Cross-sectional study
Zambrano Bohórquez et al. (41)	Spain	2022	Observational study
Jonhson et al. (42)	Argentina	2022	Cross-sectional study
Barrios et al. (43)	Panama	2022	Integrative review
Fernández Rodríguez et al. (44)	Panama	2023	Cross-sectional study
Gómez Carvajal et al. (45)	Colombia	2023	Ethnographic study
Vargas et al. (46)	Brazil	2023	Scoping review
Silva Barbosa et al. (47)	Brazil	2023	Integrative review

Source: Elaborated by the authors.

Based on an in-depth reading of the selected articles and the study's objective, the results are presented in light of the conceptual bases of self-care proposed by Giddens in the health promotion framework (8). The results suggest that self-care is built from the generation of habits or behaviors, which are divided into two categories: (a) intentional actions performed by people without any beforehand reflection or questioning and (b) deliberate actions where reflection and significant experiences lead to the incorporation of self-care guidelines that were not previously in place (Figure 2).

Figure 2. Self-care in Nursing Professionals during the COVID-19 Pandemic



Source: Elaborated by the authors.

Intentional Actions

Physical self-care (2, 6, 13, 21-22, 28, 33-35, 37-45, 47): It refers to the biological, within which the following factors were overseen: sleep quality and hygiene, relaxation routines before sleep, the establishment of daily stretching routines and concomitant diaphragmatic breathing, proper hydration, the performance of physical exercise such as aerobic resistance training (running, swimming, rope jumping, walking, dancing, stairs climbing, endurance races, and the like). Another critical aspect was the incorporation of foods such as vegetables, fruits, cereals, tubers, legumes, and meats, which improve satiety and prevent eating disorders, regulate blood glucose levels, and enhance work performance; also, food eating schedules and manners aid in the eradication of harmful habits through an action plan.

Other self-care actions related to pandemic-specific aspects were i) strictly following personal protection measures, ii) keeping going-out clothes apart from work clothes, iii) incorporating and complying with home leaving and entering protocols, iv) avoiding crowded places, and v) monitoring underlying conditions and active surveillance of symptoms, in addition to actively gaining knowledge about COVID-19, its symptoms, prevention, and mechanisms of transmission and treatment.

Mental self-care (10-12, 15-16, 19, 21-31, 33-34, 36-38, 40, 43, 45-47): This is related to the cognitive, i.e., cultivating the mind. Aspects such as reading, learning something new, looking after your thoughts, keeping an active mind, exercising the brain, assertive communication, listening to music, reading a book, and video-chatting with a friend or family member fall within this type of care, in addition to relaxation activities such as meditation, prayer, yoga, dancing, having a conversation with family and friends to relieve stress, support, renewal of thoughts and self-motivation to face the pandemic. Furthermore, the need to get help from other health care professionals to reduce emotional stress, seek leisure activities, and keep the mind occupied with activities that would distract it from information about the pandemic was identified (14). Daily routines were rearranged to include leisure activities that would forge well-being, such as time for meditation and relaxation during working hours; resorting to external elements for rest, such as aromatherapy, music therapy, and dim light, among others, worked very well in pursuing this type of care.

Emotional self-care (10-16, 19-20, 22-26, 29-34, 36-37, 39-41, 43, 46-47): This is the care of emotions, the importance of acknowledging them, not avoiding them in an attempt to feel good. The following activities were identified within this category: daily breathing exercises, focused meditation (mindfulness) before starting and upon completion of caregiving activities, and recognizing stress helped to have better emotional stability, as did seeking psychological help. Four-step cognitive processing therapy was also included: education, information, development of skills, and changes in beliefs

through online yoga and Pilates workshops, including psychological therapy sessions via video calls. Recognizing and expressing feelings and emotions and cognitive restructuring through a positive re-evaluation of a stressful situation led to pursuing new personal interests, skill enhancement, and creative talents.

Deliberate actions

Social self-care (11-14, 20, 23, 26-30, 33-35, 37-38, 42-43, 45-47): All those actions that were implemented at the time to prevent the spread of COVID-19 to an entire family, social and work circle. In this vein, chief nurses prepared a series of personal actions to encourage their work teams. These actions were grouped into three categories:

Providing instructions: The leaders would state clearly the organization's purpose and identify the steps needed to address problems and challenges, including clear and timely communication, information, and training, strengthening social and work support sources and relationships, and emotional regulation through self-control.

Giving meaning: The leaders would explain the actions necessary to achieve a healthy work environment through dialogue and reflective self-observation about any experiences lived. This was done to establish some boundaries between work and home. Finally, the periodic application of mental health screenings, such as the symptom questionnaire (SRQ) and Maslach's Burnout Inventory, are considered vital in the early detection and treatment of these problems in the nursing staff.

Generating empathy: The leaders employed empathetic language to recognize the problems and challenges people were facing and provided emotional support and guidance in developing a personalized self-care plan. Moreover, they helped enhance the skills that led to developing self-compassion and recognizing the hard work done to build collective care.

Discussion

The self-care actions identified and implemented by nurses during the pandemic led to the deduction that all were aimed at preventing illness and lessening attrition by recognizing stress and strengthening resilience. Studies during the pandemic showed that perceived stress decreased as resilience increased (29); factors such as age, expertise, area of specialization, knowledge in administration, and hospital preparedness for COVID-19 showed a positive relationship, which impacted the provision of safe care. Thus, resilience was positively associated with quality of care and job satisfaction (22), reducing the effects of fatigue on nurses' job satisfaction, employee turnover, and quality of

care. On the other hand, a lack of resilience was negatively connected to the intention to leave one's job. However, resilience should not be regarded as an individual duty but as a collective and organizational one (48).

Among the intentional actions that nurses implemented following their reflection and experience are mental self-care activities, such as communication with family and friends, seeking distractions and company, searching for individual and collective well-being, renewing thoughts and self-motivation that helped them to face the pandemic and high-stress situations (42). In this vein, it is essential to note that nurses prioritized their humanistic sentiments, professional duty, solidarity, and the obligation to offer their knowledge and care over the fear of contagion, stress, and psychological suffering experienced (32); this had a positive effect that turned into preventive factors against burnout syndrome, a disorder derived from high levels of emotional fatigue, low personal fulfillment and depersonalization (42).

Emotional self-care is based on recognizing emotions and not avoiding them in an attempt to feel good. It was shown that ensuring an adequate work environment, promoting active breaks, fostering team spirit, practicing empathy with coworkers, and ensuring that every professional's hard work did not go unnoticed is essential for adequate emotional self-care (49). The implementation of strategies that helped nurses to mitigate stressors, specifically social support, organizational support, self-management of emotions, identification of harmful habits, psychotherapy (40), emotional release techniques, cognitive restructuring, and psychoeducation, promoted dialogue and reflective self-observation of experiences in the construction of collective care (13).

Among the actions implemented by the leaders concerning the reduction of absenteeism were emotional regulation through the self-control of emotions, fair distribution of the workload, avoiding prolonged working hours, and the provision of personal protective equipment (22). The above was oriented toward the prevention of burnout syndrome caused by stress, anxiety, and different pandemic-related health problems. The continuous application of screening was essential for the early detection of mental health problems in the nursing staff (50), which led to the formation of multidisciplinary mental health teams, including psychiatrists, psychologists, and nurses in charge of mental health within the organization.

Conclusions

The COVID-19 pandemic brought global health consequences on individuals and health professionals, leading to worker burnout syndrome and job desertion. To solve these issues, nursing professionals identified and implemented different self-care actions that helped reduce the effects derived from such a context. Among the

self-care actions identified are intentional ones aimed at physical, mental, and emotional health care and deliberate actions oriented to health care at the social level. Aspects such as resilience, coping, enthusiasm, willingness, and emotional self-management played a crucial role in implementing self-care in nursing professionals.

The actions analyzed, although applied during the time of the pandemic, could also be implemented in current work situations, especially where there is work overload, stressful situations, anxiety, or burnout syndrome; these strategies aim at mitigating the adverse effects on healthcare personnel, improving working conditions, strengthening positive relationships within organizations and preventing the onset of diseases typical of professional practice under inappropriate scenarios.

Ethical aspects: The present review employed retrospective documentary research techniques and methods that do not modify the variables or perform interventions. Per the Declaration of Helsinki and the Nuremberg Code, it is classified as safe research.

Conflict of interest: The authors declare no conflict of interest.

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