

## THE FUTURE OF NURSING FROM THE PERSPECTIVE OF NURSES AFTER THE PANDEMIC: A QUALITATIVE STUDY

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### Abstract

This study was conducted to determine the views of nurses on the future of nursing after the pandemic. The data of this study, which was conducted in a qualitative research design, were collected through in-depth interviews with the nurses reached by snowball sampling method. The COREQ checklist was followed. Twenty-two nurses participated in the study. The expressions of the nurses were analyzed in 3 themes. These themes are; positive effects of the pandemic on the nursing profession, negative effects of the pandemic on the nursing profession, suggestions for difficulties in the nursing profession. Participants stated that nurses experienced many physical and psychological problems during the pandemic, and that these problems caused burnout, which in turn led to alienation from the profession. Particularly, the participants, who expressed their concerns that there would be a nursing shortage in the future due to leaving the job or not choosing nursing.

**Keywords:** Experiences of nurses, future of nursing, nursing, pandemic

## PANDEMİ SONRASI HEMŞİRELERİN BAKIŞ AÇISINDAN HEMŞİRELİĞİN GELECEĞİ: NİTEL BİR ÇALIŞMA

### Öz

Bu araştırma, pandemi sonrası hemşirelerin hemşireliğin geleceğine ilişkin görüşlerini belirlemek amacıyla yapılmıştır. Nitel araştırma deseninde yapılan bu araştırmanın verileri, kartopu örnekleme yöntemi ile ulaşılan hemşirelerle derinlemesine görüşmeler yoluyla toplanmıştır. COREQ kontrol listesi takip edilmiştir. Çalışmaya yirmi iki hemşire katılmıştır. Hemşirelerin ifadeleri 3 temada analiz edilmiştir. Bu temalar; pandeminin hemşirelik mesleğine olumlu etkileri, pandeminin hemşirelik mesleğine olumsuz etkileri, hemşirelik mesleğindeki sorunlara yönelik önerilerdir. Katılımcılar hemşirelerin pandemi sürecinde birçok fiziksel ve psikolojik sorun yaşadığını ve bu sorunların tükenmişliğe yol açarak mesleğe yabancılaşmaya yol açtığını söylemiştir. Katılımcılar özellikle işten ayrılma veya hemşireliği seçmeme nedeniyle gelecekte hemşire açığı olacağı endişesini dile getirmişlerdir.

**Anahtar Kelimeler:** Hemşirelerin deneyimleri, hemşireliğin geleceği, hemşirelik, pandemi

## 1. INTRODUCTION

The fact that the COVID-19 infection has become a global epidemic affecting the whole world in a short time has unexpectedly increased the burden of many sectors in all countries. The health sector is at the forefront of these areas (1). Nurses, who constitute the largest component of the health workforce (2), constituted the occupational group that fought at the forefront in this process (1). Nurses who have the most contact with the patient have played an important role in the clinical management of the disease and the prevention of infection (3). The fact that a large number of patients are infected in a very short time and especially the need for intensive care has revealed the importance of the concept of care, which is the main purpose of nursing, and the need for the nursing profession due to social needs has come into prominence (4,5). Nurses were at risk while performing treatment and care and therefore experienced intense stress. This situation affected them psychologically beyond physical fatigue (6).

During the pandemic, nursing has faced many difficulties in both education and service. Health personnel remained inadequate in the face of increasing patient and workload (6). In this pandemic, in which the management systems of societies and countries were caught unprepared, health personnel often felt inadequate and unprotected. It has been stated that this feeling of inadequacy and vulnerability is due to the lack of scientific knowledge about the disease and insufficient personal protective equipment. It also resulted from additional oppression such as health personnel's high risk of contracting and/or transmitting the disease, and being perceived as a threat by other people (7), and difficult ethical decisions regarding care priorities (8). Although support activities such as the supply of materials, the establishment of sheltering opportunities for health personnel, the support of the society, and psychological assistance have been created to solve these problems, the health personnel have experienced burnout from time to time.

In addition to nurses working during the pandemic, nursing students preparing for this profession were also affected by the pandemic. Nursing students, on the other hand, experienced difficulties due to the closure of schools and the inability to offer practical courses in clinics, due to limited opportunities and distance education infrastructure problems in the education process (1). The measures taken in the first period of the pandemic made it necessary for both educators and nursing students to work from home. Theoretical courses were continued online, but physical participation in skill laboratory and clinical practices could not be achieved (9). Most of the nursing department faculty members were expected to develop new strategies covering the next semesters in line with the possibilities of their own schools (1).

As can be seen, the nursing profession has been affected by the pandemic in many areas, from its education to its function. The issue of what happened in this process and what the long-term impact of the pandemic will be on nursing is still being discussed. For this reason, it is thought that the views of nurses who have experienced this process about the effects of the pandemic and what awaits the nursing profession in the future are important. This research was conducted to determine the views of nurses on the future of nursing after the pandemic.

### *Research Questions*

- How has the nursing profession been affected by the pandemic?
- What are nurses' thoughts on the future of nursing after the pandemic?
- What are the suggestions of nurses to strengthen nursing after the pandemic?

## 2. MATERIALS AND METHODS

### 2.1. Design

This study was conducted at a qualitative research design which aims to determine the thoughts and experiences of participants about an phenomenon or event (10). In this study, the “Consolidated Criteria for Reporting Qualitative Research” (COREQ) checklist was followed.

### 2.2. Participants and Setting

Snowball sampling method was used to collect the data. The nurses selected for the study were asked to suggest different nurses to be interviewed. Those nurses were then invited to participate in the study. The aim of using this method is to reach nurses working during the pandemic and caring for infected patients and to gain their trust to share their experiences. In the study, it was aimed to include nurses who worked during the pandemic, as nurses were expected to explain their experiences during the pandemic, how the profession was affected by this process, and to offer solutions based on these experiences. For this reason, nurses over the age of 18, who can speak and understand Turkish, who have at least 3 years of nursing experience, who work as a nurse during the pandemic and who volunteered to participate in the study were included in the study. The study was carried out with the participation of 22 nurses.

### 2.3. Data Collection

The data were collected through in-depth interviews with the nurses reached by snowball sampling method. Research data were collected using the introductory characteristics form and a semi-structured opinion form. In the Introductory Characteristics Form, there are questions about the characteristics of the participants such as age, gender, and employment status. In the semi-structured opinion form, there are five open-ended questions: the effects of the pandemic on nursing, changes in the nursing profession with the pandemic, evaluations for these changes, thoughts on the future of nursing and solutions to problems (Table 1).

**Table 1. Interviews Questions**

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1. What are the effects of the pandemic on the nursing profession?
  2. What do you think has changed in the nursing profession with the pandemic?
  3. How do you evaluate these changes?
  4. How do you evaluate the future of nursing?
  5. What are your suggestions for solutions to the problems you mentioned?
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First of all, nurses were invited to the research via the research link created through the Google survey forms through social media networks. At this stage, an informative text explaining the purpose of the research was presented to the participants and a contact number was obtained from those who wanted to continue the research. In addition, at this stage, the participants filled out the Introductory Characteristics Form and gave their consent to the part they wanted to participate in the research. Then, the second researcher reached out to the participants one by one and determined the appropriate day for the interview. 25 participants filled out the questionnaire sent via the link, but 3 of them said that they stopped participating in the qualitative research section. Two researchers interviewed each participant on the specified days. The interviews were conducted by video-conference method and audio recordings were taken in order to prevent data loss. In the interviews, questions in the form of semi-structured in-depth interviews about the effects of the pandemic on nursing were used. Each interview lasted an average of 25 minutes. After each interview, the participant's statements were written in transcript and sent back to the participant, asking if there were any parts he/she wanted to change. At this stage, no participant stated any changes. When the data started to repeat the interviews were terminated and the data collection

phase was completed. All stages of the research were carried out by both researchers. The first researcher has a doctorate in nursing, and the other researcher is a doctoral student. Both researchers are female, and they have done many qualitative studies before.

#### 2.4. Data Analysis

Descriptive data are given as frequency and percentage (%). Content analysis method was used to evaluate qualitative data. In the analysis process, the 6-step thematic analysis method described by Braun and Clarke (2014) was used (11). First of all, participant statements were read repeatedly and codes were created. Then, themes were created from the relevant codes. The themes were rechecked and discussions were held among all authors to decide on the final themes. After the themes were determined, opinions were taken from an expert researcher and the themes were finalized.

#### 2.5. Ethical considerations

Before starting the application, approval was obtained from the University ethical committee (2022/28). First of all, the purpose of the research was explained to the participants and they were informed about the research and their consents were obtained.

### 3. RESULTS

The data obtained in the study, which was conducted to investigate the experiences of nurses and their thoughts on professional changes in the COVID-19 pandemic, were analyzed in three themes. Table 2 contains information about the introductory characteristics and working status of the participants.

#### Theme 1. Positive effects of the pandemic on the nursing profession

##### *Sub-theme 1. Increasing visibility of the nursing profession*

Participants stated that the society knew nurses better, and that awareness and prestige on this issue increased.

*“The fact that nurses fought for people they did not know in this difficult process changed the society's perspective on the profession.” (P3)*

*“It has been understood that the nurse is the building block in the health system.” (P4)*

*“Trust and respect for nurses increased.” (P12)*

Participants emphasizing the indispensability of the nursing profession and care stated that they understood that their competence was important in this process and that they had an important role in reducing patient loss.

*“It has been understood once again that care is indispensable in the nursing profession and knowledge is essential. Although we have been told as auxiliary personnel for years, we have shown that we have a very important role in the health system with our fight against the pandemic.” (P3)*

*“Everyone saw that nursing is an indispensable profession. What would happen to patients if nurses did not work in hospitals? You can be sure that the mortality will increase even more.” (P7)*

In addition, one participant stated that the importance of teamwork in health institutions has emerged.

*“I think the pandemic has highlighted the importance of teamwork.” (P3)*

Table 2. Introductory Characteristics of the Participants

Number	Age	Gender	Education	Working Year	Experience in the current clinic (years)	Clinic	Status of experiencing clinical change during the pandemic	Clinic during the pandemic
1	33	Female	Bachelor's Degree	8	8	Internal Medicine	Yes	Covid Clinic
2	39	Female	Bachelor's Degree	16	3	Internal Medicine	Yes	Emergency Respiratory Infection Outpatient Clinic
3	49	Female	Bachelor's Degree	25	25	Internal Medicine	Yes	Emergency Respiratory Infection Outpatient Clinic
4	28	Female	Bachelor's Degree	4	4	Internal Medicine	Yes	Covid Clinic
5	38	Female	Bachelor's Degree	16	5	Internal Medicine	Yes	Emergency Respiratory Infection Outpatient Clinic
6	37	Female	Bachelor's Degree	16	16	Surgical Sciences	Yes	Internal Medicine
7	33	Male	Bachelor's Degree	10	3	Surgical Sciences	Yes	Covid Clinic
8	29	Male	Bachelor's Degree	4	3	Surgical Sciences	Yes	Covid Clinic
9	38	Female	Master Degree	16	2.5	Supervisor	No	-
10	45	Female	Bachelor's Degree	25	18	Internal Medicine	No	-
11	42	Female	Bachelor's Degree	18	10	Intensive Care	No	-
12	32	Female	Bachelor's Degree	8	1	Intensive Care	No	-
13	28	Female	Bachelor's Degree	4	4	Intensive Care	No	-
14	27	Male	Bachelor's Degree	3.5	1.5	Intensive Care	No	-
15	41	Female	Master Degree	21	5	Bronchoscopy Unit	Yes	Covid Clinic
26	38	Female	Master Degree	17	10	Internal Medicine	No	-
27	34	Female	Master Degree	10	10	Intensive Care	Yes	Internal Medicine
18	30	Female	Bachelor's Degree	10	4	Intensive Care	No	-
19	32	Female	Bachelor's Degree	9	4	Surgical Sciences	No	-
20	30	Female	Bachelor's Degree	6.5	3	Intensive Care	Yes	Internal Medicine
21	28	Female	Bachelor's Degree	4	4	Intensive Care	Yes	Covid Clinic
22	33	Female	Bachelor's Degree	8	7	Organ transplant coordinator	Yes	Emergency Respiratory Infection Outpatient Clinic

### ***Sub-theme 2. Increasing knowledge-experience and crisis management***

Participants stated that the pandemic has taught them a lot, especially for those who have just started their profession, and they have experienced crisis management by living.

*“Experiences on what can be faced and how to proceed in crisis management have increased.” (P4)*

*“We learned management of crisis by experience.” (P2)*

### ***Sub-theme 3. Feeling like a hero***

One participant stated that she felt like a hero fighting on the front line during this process

*“... I felt like a hero fighting in this profession.” (P2)*

## **Theme 2. Negative effects of the pandemic on the nursing profession**

### ***Sub-theme 1. Alienation from the profession due to fatigue and exhaustion***

The nurses, who stated that they were working hard during the pandemic, stated that they were very tired both physically and psychologically. Participants stated that they experienced many problems such as long working hours, break up with their families, fear of loss, anxiety of infecting their relatives, and desperation, and these problems tired them.

*“...in that period, no one wanted to go home, hug their child and visit their parents. Because everyone was afraid of carrying viruses. This was a situation that really broke our psychology.” (P1)*

*“.... the fear of losing our loved ones caused us to go through this process difficult, this made us even more tired.” (P3)*

*“I was very tired physically and psychologically and our workload always increased.” (P20)*

Especially in this process, they stated that nurses were very tired and worn out, they experienced burnout and alienation from their profession.

*“All nurses have experienced burnout and I think no one is working with the old dedication and strength right now.” (P6)*

*“Intensive work and stress negatively affected job satisfaction.” (P13)*

*“Professional deformation occurred.” (P14)*

### ***Sub-theme 2. Burnout and hopelessness in nurses due to the lack of respect for the profession***

Some participants complained that the profession and its members do not see the value, and stated that this causes burnout.

*“.....we are very tired of this process. Moreover, we have seen that although we are thought to be an indispensable profession in the society, the ideas of the managers have never changed. I think that in our country, nursing has never caught the value it deserves and never will. This has really depleted us.” (P7)*

*“I do not feel like a valuable professional doing a unique job where I work. Because in the message given to us, there were expressions such as "if you are not, there are others." This increases my burnout.” (P7)*

In addition, many of the participants stated that they had negative thoughts about professional development.

*“My thoughts on the future are negative. I don't think we have enough dignity and that our rights are protected. I do not think there will be a positive change in the future.” (P9)*

### ***Sub-theme 3. Nurse loss and related future anxiety***

Participants stated that nurses were very tired during the pandemic, but they were not supported. They stated that if the necessary precautions are not taken, they predict that there will be a big nurse shortage problem. Although there seems to be a sufficient number of students in nursing schools, they indicate that this may be insufficient and they think that new graduates are more likely to change jobs. They expressed their concerns about the fact that nursing would be less preferred, which thinks that nursing is a difficult profession, especially with the pandemic. Some participants even stated that they would not recommend the nursing profession to anyone.

*“... I will never recommend nursing to the new generation who are in the process of choosing a profession.” (P1)*

*“Although the number of nursing students seems to be high, I think that many of them will change professions. Everyone has understood how difficult a profession nursing is. The new generation is already very tend to changing jobs. I think nursing is facing a big problem. We will not be able to find nurses to take care of ourselves in the future.” (P10)*

*“I hear that most of my friends who are currently working as a nurse want to change profession.” (P22)*

One participant complained that despite the constant development, change and complexity of nursing, there were not enough improvements in rights and stated that this reduced the preferability of the profession.

*“Our profession is developing, changing, getting harder, more complex and the expectations from us are constantly increasing, but the perspective, approach and stance on the payment of rights do not change. This may have a negative effect on the choice of profession. Unless our profession is better expressed and our rights are protected, there will be no necessary development.” (P15)*

Some participants stated that if necessary improvements are not made in the profession and measures are not taken, nurses will seek better opportunities and international nurse migration may occur.

*“Since nursing does not find the value it deserves in my country, I think that if there was an opportunity to go abroad everyone, be more precise, the vast majority would want to go.” (P1)*

*“I think the number of people who prefer our profession will decrease. I think that there will be an international migration of health workers because our working conditions and rights are not improved.” (P9)*

### ***Sub-theme 4. Feelings of unworthiness and professional regret***

Some participants said that in this process, the society saw them as a source of contamination and excluded them, and even they did not allow them to get on the elevators of their homes. They stated that this situation made them feel worthless.

*“I was seen as a germ carrier by the society, especially my family.” (P5)*

*“The value given to us has never changed, even negatively affected. Think about it, we were not taken to the elevators of our homes while we were heartily looking after patients in hospitals.” (P9)*

Some participants said that both their managers and colleagues did not support nurses and did not value them.

*“We were never supported, neither financially nor morally.” (P2)*

*“I experienced uncertainty and intense pressure at the beginning of the pandemic; I experienced fatigue and boredom from working in different services in the middle of the pandemic; nowadays, I feel a sense of worthlessness as a result of not valued our work.” (P15)*

*“There were so many times that I felt worthless as a nurse. More than our feelings and thoughts, everyone sees us as just a robot doing work.” (P17)*

Some participants said that they questioned their profession during this process and they regretted it.

*“For the first time, I questioned my profession, why am I here...” (P1)*

*“I experienced professional regret, uncertainty, anger and even hated towards my colleagues, fatigue, home-work inadequacy.” (P6)*

### ***Sub-theme 5. Orientation problem due to change of clinic and concern about harming the patient***

Some participants complained about the change in their fields of work during the pandemic and stated that expertise is a really important factor. They stated that they experienced high anxiety and fear of harming the patient during this change process.

*“Since each of my shifts was in different units, I had orientation problems in clinics I did not know.” (P5)*

*“I was stressed because my department changed. I don't think this is true. Sometimes, we may cause harm instead of benefit in the clinics we withdraw momentarily. Because some clinics are very special. There is no specialization in nursing in our country, but I think this is not true.” (P8)*

*“We were drawn to clinics where we were inexperienced. We were fear of harming patients.” (P9)*

## **Theme 3. Suggestions for difficulties in the nursing profession**

### ***Sub-theme 1. Evaluation of nursing education***

Participants stated that the pandemic has affected nursing in many ways, and that these effects still continue at all stages from education to practice and workforce. Participants stated that the impact of educational disruptions and lack of practice is better understood when graduates start working. They stated that clinical practice is an indispensable condition for nursing and that measures should be taken to continue it in any case. Participants indicated that they were worried that if their newly recruited colleagues had a negative experience, it would push them away from the profession, and they suggested that measures should be taken for this as well.

*“Education was disrupted. In the long term, vocational education needs to be revised. Schools should make a plan as if an pandemic could develop at any moment. Education must continue under all circumstances. Because in the first period of the pandemic, students in most places could not practice clinical practice. Our profession is a practical profession.” (P13)*

*“Many students who have not been able to do clinical practice have adaptation problems. This scares them and they are alienated from the profession. Urgent action must be taken to avoid loss.” (P13)*

### ***Sub-theme 2. Increasing the number of nurses in health units***

The majority of the participants stated that the number of nurses in the units should be increased in order to cope with possible disaster and pandemic more effectively.

*“I hear that there are nurses who cannot find a place to work and I am very surprised. Because the need on the field never ends. The pandemic once again showed us that there should be enough nurses in the field.” (P11)*

*“I think the number of nurses should be increased. When we look at the number of patients per nurse in our country, we see that this rate is very high. When we consider the nurses who fell ill during a crisis and could not continue to work, this number increases even more and becomes unable to meet the demands. I think the number of nurses in institutions should be increased.” (P14)*

*“Investments should be made in nursing. Although the number of nurses seems to be sufficient, I do not think that the reality is so. Nurses may run out. Deterrent strategies need to be implemented.” (P16)*

### **Sub-theme 3. Ensuring specialization in nursing**

Some participants stated that they understood the importance of specializing in nursing and that they thought it was important to find a solution to this issue.

*“I think that specialization in nursing will accelerate.” (P22)*

*“It will be more efficient to train them as a specialist nurse, not just to work in all clinics.” (P3)*

### **Sub-theme 4. Adoption of professional management approach and empowerment of nurses**

Almost all of the nurses participating in the study uphelded that managers should give more importance to nursing services and take important steps to strengthen nursing.

*“Nursing needs to be strengthened as a profession. Nurses need to be empowered as professionals. First of all, managers should understand that nursing is an indispensable profession.” (P7)*

*“I think that the managers should see the nursing profession more valuable.” (P18)*

In addition, some participants suggested that providing a mentor for each new colleague and extending the orientation period might be a solution to empower them.

*“When they start the hospital, they are given an adaptation program for a maximum of one month. After that, there is no compatibility. Perhaps in this process, mentors can be given to nurses who have just started and their adaptation phases can be extended. We must protect our colleagues. It should not be forgotten that every nurse is a power.” (P13)*

### **Sub-theme 5. Occupational organization should be given importance**

The participants emphasized that more importance should be given to occupational organization in nursing and said that steps should be taken to protect rights.

*“.....nurses are burning out. This situation should be seized urgently and our associations should follow a determined path in this regard.” (P5)*

*“I think that it will be possible to make radical changes in the near future, to seek rights, to become members of associations and to increase the level of education of nurses.” (P22)*

While the participants talked about the many changes and developments, they said that their beliefs about the realization of the desired changes were negative. In other words, the participants stated that they did not believe that nursing should receive the value it deserves and that there would be positive professional developments.

*“I don't think anything will change in a positive way in this profession.” (P9)*

*“Although there will be a positive change, I think it will take many years. I don't think I'll be able to see the time of the changes.” (P20)*

*“Although there will be changes, I think it will be in the long term.” (P19)*

#### 4. DISCUSSION

In this study, the participants stated that they were very tired both physically and psychologically. Participants stated that they experienced many problems such as long working hours, break up with their families, fear of loss, anxiety of infecting their relatives, and desperation, and these problems tired them. The fact that some participants queried their profession in this process and said that they regretted it supports their burnout. As a matter of fact, it is stated in the literature that nursing has been multidimensionally affected by the COVID-19 epidemic. In particular, many reasons such as increased workload and physical fatigue, insufficient personal protective equipment, being infected and fear of infecting family members (8,12), disruption of work-life balance, neglect of personal and family needs have led to an extraordinary repression on nurses (13). The multiple stress factors experienced have caused health workers to experience occupational burnout (13,14). Prasad et al (2021) found that 49% of 20,947 healthcare workers in 42 institutions experienced burnout (15).

The fact that nurses have a critical role has once again come to the fore during the pandemic. (16). In this process, everyone has been more grateful and respected to nursing, and nursing has become more visible (17). In this study, the participants stated that the awareness of nursing in the society increased and the prestige increased. However, it is also reported in the literature that nurses are unfortunately exposed to negative behaviors (16). It has been reported that nurses are excluded from society and feel rejected (16), and are exposed to bullying and stigmatization (18) due to being in constant contact with infected patients. Similarly, in this study, some participants said that the society saw them as a source of infection and excluded them, and even did not allow them to get on the elevators of their homes. They stated that this situation made them feel worthless.

Nurses are the primary human factor affecting care outcomes in health systems (19). The pandemic has placed a serious burden on healthcare systems and the healthcare workforce. In this process, many undesirable effects were observed on the physical, psychological and social health of working nurses (20). The International Council of Nurses (ICN) states that COVID-19 has caused mass trauma among nurses (21). From this perspective, leaving the profession can be seen as a coping mechanism used to relieve fear and emotional exhaustion (20,22). It is stated that the most important reasons for staying in the nursing profession and volunteering to work in COVID clinics despite the intense fear of infection during the pandemic are due to the high sense of professional commitment of nurses (23). The negativities that will affect the commitment to the profession may cause individuals to leave the profession (24). In this study, the participants stated that the pandemic had a negative impact on the profession, based on their negative experiences. Especially in this process, the nurses stated that they were very tired and worn out, and that they experienced burnout and alienation from the profession due to the discrimination among health workers. In the study of Phuekphan et al (2021) was found that the strongest factor in the intention to leave work of nurses was burnout (25). This information supports our results.

Nursing students, who are the nurses of the future, are an important part of this process. In this process, their experiences and thoughts are important for the future. In a study by Crismon et al (2021), nursing students interpreted the role of nurses as “vital”, “important”, “necessary” and “valuable”. In addition, many participants expressed that they are proud to be a nurse and stated that this pride in their profession became stronger during the pandemic (16). In this study, the participants expressed their concerns about the fact that nursing will be less preferred due to the fact that it is thought to be a hard job with the pandemic. They also stated that they think that new graduates are more likely to change jobs. Kim et al (2021) also found that 17.6% of generation Z nursing students consider leaving the profession within two years of graduation (26). In addition, it is stated that 48% of novice nurses who have just started their profession leave their duties in the first year of practice due to the high stress caused by the gap between education and practice (27). Similarly, Dillon et al (2016) reported that 52% of nurses left their first positions in the first two

years of practice (28). Studies have reported that those who left the profession or did not come to work are mostly young nurses with less work experience (23,29,30). It has been stated that nurses with longer work experience felt the hospital as their second home (23). In general, it can be thought that the increase in work experience will contribute to the increase of self-efficacy and this may lead to a decrease in leaving profession (31).

A significant number of nurses state that they feel that they are not adequately supported and protected in their work environment (32). It is stated that this situation is related to the organizational environment, job stress, heavy workload, unfavorable working conditions, role conflict and ambiguity, role perception and role content (33). In this study, the participants especially complained that the profession did not see the value it deserves and stated that if necessary precautions were not taken, the profession would be less preferred and international nurse migration could occur. They said that they predicted that there would be a big nurse shortage problem if the necessary precautions were not taken. As a matter of fact, the International Council of Nurses emphasized that there was an increase in the number of nurses leaving the profession in 2020, and many of them reported high intention to leave (21). Globally, about 89% of the nursing shortage is in developing countries, with 1 in 8 nurses working outside of their country of birth or training (34). Because nurses may want to immigrate to more developed countries because of their desires such as career advancement, better financial gain, feeling of dignity and increasing the quality of life (35).

It is argued that peer mentoring and support are important to facilitate the adaptation of new nurses to their new roles (16). In this study, participants stated that the impact of educational disruptions and lack of practice is better understood when graduates start working. They stated that clinical practice is an indispensable condition for nursing and that measures should be taken to continue it in any case. Participants indicated that they were worried that if their newly recruited colleagues had a negative experience, it would push them away from the profession, and they suggested that measures should be taken for this as well. In addition, some participants suggested that providing a mentor for each new colleague and extending the orientation period might be a solution to empower them. This finding is similar to the literature.

With the increase in the number of healthcare facilities during the pandemic, the demand for nurses has also increased (20). As a matter of fact, one of the main challenges faced by healthcare organizations during the pandemic has been the nurses shortage (29). It is stated that we are not prepared for the COVID-19 pandemic, which continues to cause great suffering all over the world, and it is stated that it is a priority to prepare the world to manage future pandemics (36). The majority of the participants stated that the number of nurses working in the units should be increased in order to cope with possible disaster and pandemic more effectively. Keeping nurses in nursing and encouraging nurses student to continue in nursing is of great importance for post-pandemic workforce planning (37).

Professional commitment has been one of the main factors for keeping nurses in nursing under pandemic conditions. Almost all of the nurses participating in the study advocated that managers should give more importance to nursing and take important activities to strengthen nursing (23). Nurse managers play a vital role in addressing nurses' anxiety or fears during processes such as pandemics by supporting their mental, psychological and emotional health through evidence-based measures, supportive organisational policies and provision of a safe and secure work environment (38,39). Therefore, the fact that managers value nurses, understand them and provide appropriate support seems to be the key to keeping nurses in nursing (23).

The most important lesson for nursing from the pandemic should be to support the well-being of nurses (40). During the 74th World Health Assembly, the International Council of Nurses (2021a) proposed to governments many strategies to reduce the nursing shortage, such as investing

in nursing education and nursing jobs, provide safe working conditions and appropriate remuneration, provide services to care for mental health and support those affected (41). It is stated that getting support from colleagues, relatives, friends and other parts of the society will be an effective method to strengthen the psychological coping of nurses during difficult processes such as the pandemic (42). Good family support can contribute to increased nursing performance (43), professional commitment (44), job satisfaction and decreased intention to leave profession (45). Support from peers, colleagues, family and friends can improve a sense of security and help alleviate fear in nurses (27).

#### 4.1. Limitations

It is a limitation of the research that it is conducted with a qualitative research design and that it can only be generalized to the sample in which it was conducted.

### 5. CONCLUSION

As a result of this study, the participants stated that they experienced many physical and psychological problems during the pandemic, and that these problems caused burnout, which in turn led to alienation from the profession. Particularly, the participants, who experienced intense feelings of worthlessness, expressed their concerns that there would be a nursing shortage in the future due to leaving the job or not choosing the profession. They said that both managers and professional organizations have important duties to strengthen nursing. It recommends the development of appropriate strategies such as structuring nursing education in such a way that it can be sustained in times of crisis, managers protect and value nurses, development of professional organization, specialization in nursing, non-discrimination among health workers and giving nursing the value they deserve for the participants to solve the problems. The health and safety of healthcare providers is essential not only for continued and safe patient care, but also for the control of any outbreak. While the COVID-19 pandemic is still losing its impact, how ready we are for new pandemics is an important issue that needs to be discussed. It has been seen in the pandemic that a strong health system is the most important resource. Empowering nurses is an important initiative that should not be delayed. The most important lesson for nursing from the pandemic should be to support the well-being of nurses. As a matter of fact, one of the main challenges faced by healthcare organizations during the pandemic has been the nurses shortage. Keeping nurses in nursing and encouraging nurses student to continue in nursing is of great importance for post-pandemic workforce planning. Empowering nurses is an important initiative that should not be delayed.

### REFERENCES

1. Cevirme, A., & Kurt, A. (2020). COVID-19 pandemia and its reflections to nursing profession. *Eurasian Journal of Researches in Social and Economics (EJRSE)*, 7(5), 46-52. (In Turkish)
2. Schwerdtle, P. N., Connell, C. J., Lee, S., Plummer, V., Russo, P. L., Endacott, R., & Kuhn, L. (2020). Nurse expertise: A critical resource in the COVID-19 pandemic response. *Annals of Global Health*, 86(1), 49. <https://doi.org/10.5334/aogh.2898>
3. Fawaz, M., Anshasi, H., & Samaha, A. (2020). Nurses at the front line of COVID-19: Roles, responsibilities, risks, and rights. *Am J Trop Med Hyg*, 103(4), 1341-1342.
4. Hachisu, T., & Suzuki, K. (2018). Tactile Apparent Motion Through Human-Human Physical Touch. In: Prattichizzo, D., Shinoda, H., Tan, H., Ruffaldi, E., Frisoli, A. (eds) *Haptics: Science, Technology, and Applications. EuroHaptics 2018. Lecture Notes in Computer Science*, vol 10893, pp. 163–174. Springer, Cham. [https://doi.org/10.1007/978-3-319-93445-7\\_15](https://doi.org/10.1007/978-3-319-93445-7_15)
5. Pedrazza, M., Berlanda, S., Trifiletti, E., & Minuzzo, S. (2018). Variables of individual difference and the experience of touch in nursing. *Western Journal of Nursing Research*, 40(11), 1614-1637. <http://doi.org/10.1177/0193945917705621>
6. Karasu, F., & Çopur, E. Ö. (2020). An intensive care nurse in the forefront of the epidemic while increasing cases of COVID-19: "Heroes in front-line". *Yoğun Bakım Hemşireliği Dergisi*, 24(1), 11-14. (In Turkish)

7. Schwartz, J., King, C. C., & Yen, M. Y. (2020). Protecting healthcare workers during the Coronavirus Disease 2019 (COVID-19) outbreak: Lessons from Taiwan's severe acute respiratory syndrome response. *Clin Infect Dis*, 71(15), 858-860. <http://doi.org/10.1093/cid/ciaa255>
8. Mokhtari, R., Moayed, S. & Golitaleb, M. (2020). COVID-19 pandemic and health anxiety among nurses of intensive care units. *Int J Ment Health Nurs*, 29(6), 1275-1277. <http://doi.org/10.1111/inm.12800>
9. Haslam, M. B. (2021). What might COVID-19 have taught us about the delivery of Nurse Education, in a post-COVID-19 world? *Nurse Educ Today*, 97, 104707. <http://doi.org/10.1016/j.nedt.2020.104707>
10. Creswell, J. (2013). *Qualitative inquiry and research design*. California. Five qualitative approaches to inquiry. Los Angeles: Sage.
11. Clarke, V., & Braun, V. (2014). Thematic analysis. In A. C. Michalos (Ed.), *Encyclopaedia of quality of life and well-being research* (pp. 6626-6628). Dordrecht: Springer.
12. Pappa, S., Ntella, V., Giannakas, T., Giannakoulis, V. G., Papoutsis, E., & Katsaounou, P. (2020). Prevalence of depression, anxiety, and insomnia among healthcare workers during the COVID-19 pandemic: A systematic review and meta-analysis. *Brain Behav Immun*, 88, 901-907. <https://doi.org/10.1016/j.bbi.2020.05.026>
13. Raudensk'á, J., Steinerov'a, V., Javůrkov'a, A., Urits, I., Kaye, A. D., Viswanath, O., & Varrassi, G. (2020). Occupational burnout syndrome and post-traumatic stress among healthcare professionals during the novel coronavirus disease 2019 (COVID-19) pandemic. *Best Practice and Research: Clinical Anaesthesiology*, 34, 553-560. <https://doi.org/10.1016/j.bpa.2020.07.008>
14. Bruyneel, A., Smith, P., Tack, J., & Pirson, M. (2021). Prevalence of burnout risk and factors associated with burnout risk among ICU nurses during the COVID-19 outbreak in French speaking Belgium. *Intensive Crit Care Nurs*, 65, 103059. <https://doi.org/10.1016/j.iccn.2021.103059>
15. Prasad, K., McLoughlin, C., Stillman, M., Poplau, S., Goelz, E., Taylor, S., Nankivil, N., Brown, R., Linzer, M., Cappelucci, K., Barbouche, M., & Sinsky, C. A. (2021). Prevalence and correlates of stress and burnout among U.S. healthcare workers during the COVID-19 pandemic: A national cross-sectional survey study. *eClinicalMedicine*, 35, 100879. <https://doi.org/10.1016/j.eclinm.2021.100879>
16. Crismon, D., Mansfield, K. J., Hiatt, S. O , Christensen, S. S., & Cloyes, K. G. (2021). COVID-19 pandemic impact on experiences and perceptions of nurse graduates. *J Prof Nurs*, 37(5), 857-865. <https://doi.org/10.1016/j.profnurs.2021.06.008>
17. Calışkan, N. Ö., Yalın, H., & Eti Aslan, F. (2022). Pandemic journey to prestige at nursing. *Clin Ethics*, 1-5. <https://doi.org/10.1177/14777509221091091>
18. Dye, T. D., Alcantara, L., Siddiqi, S., Barbosa, M., Sharma, S., Panko, T., & Pressman, E. (2020). Risk of COVID-19-related bullying, harassment and stigma among healthcare workers: An analytical cross-sectional global study. *BMJ Open*, 10(12), e046620. <https://doi.org/10.1136/bmjopen-2020-046620>
19. Shun, S. C. (2021). COVID-19 pandemic: The challenges to the professional identity of nurses and nursing education. *The Journal of Nursing Research*, 29(2), Article e138. <https://doi.org/10.1097/JNR.0000000000000431>
20. Lopez, V., Anderson, J., West, S., & Cleary, M. (2022). Does the COVID-19 pandemic further impact nursing shortages? *Issues Ment Health Nurs*, 43(3), 293-295. <https://doi.org/10.1080/01612840.2021.1977875>
21. International Council of Nurses. (2021). The COVID-19 Effect: World's nurses facing mass trauma, an immediate danger to the profession and future of our health systems. Retrieved From: <https://www.icn.ch/news/covid-19-effect-worlds-nurses-facing-mass-trauma-immediate-danger-profession-and-future-our>
22. Maunder, R. G., Heeney, N. D., Kiss, A., Hunter, J. J., Jeffs, L. P., Ginty, L., Johnstone, J., Loftus, C. A., & Wiesenfeld, L. A. (2021). Psychological impact of the COVID-19 pandemic on hospital workers over time: Relationship to occupational role, living with children and elders, and modifiable factors. *Gen Hosp Psychiatry*, 71, 88-94. <https://doi.org/10.1016/j.genhosppsy.2021.04.012>
23. Varasteh, S., Esmacili, M., & Mazaheri, M. (2022). Factors affecting Iranian nurses' intention to leave or stay in the profession during the COVID-19 pandemic. *International Nursing Review*, 69, 139-149. <https://doi.org/10.1111/inr.12718>
24. Özkan Şat, S., Akbaş, P., & Yaman Sözbir, Ş. (2021). Nurses' exposure to violence and their professional commitment during the COVID-19 pandemic. *J Clin Nurs*, 30(13-14), 2036-2047. <https://doi.org/10.1111/jocn.15760>
25. Phuekphan, P., Aunguroch, Y., & Yunibhand, J. (2021). A model of factors influencing intention to leave nursing in Thailand. *Pacific Rim International Journal of Nursing Research*, 25(3), 407-420. Retrieved From: <https://he02.tci-thaijo.org/index.php/PRIJNR/article/view/248823>
26. Kim, J., Chae, D., & Yoo, J. Y. (2021). Reasons behind generation Z nursing students' intentions to leave their profession: A cross-sectional study. *Inquiry: The Journal of Health Care Organization, Provision and Financing*, 58, 46958021999928. <https://doi.org/10.1177/0046958021999928>
27. Labrague, L. J., & McEnroe-Petite, D. M. (2018). Job stress in new nurses during the transition period: An integrative review. *International Nursing Review*, 65(4), 491-504. <https://doi.org/10.1111/inr.12425>
28. Dillon, D. L., Dolansky, M. A., Casey, K., & Kelley, C. (2016). Factors related to successful transition to practice for acute care nurse practitioners. *AACN Adv Crit Care*, 27(2), 173-182. <https://doi.org/10.4037/aacnacc2016619>

29. Chen, S.-C., Lai, Y.-H., & Tsay, S.-L. (2020). Nursing perspectives on the impacts of COVID-19. *The Journal of Nursing Research*, 28(3), Article e85. <https://doi.org/10.1097/jnr.0000000000000389>
30. Yáñez, J. A., Jahanshahi, A. A., Alvarez-Risco, A., Li, J., & Zhang, S. X. (2020). Anxiety, distress, and turnover intention of healthcare workers in Peru by their distance to the epicenter during the COVID-19 crisis. *Am J Trop Med Hyg*, 103(4), 1614-1620. <https://doi.org/10.4269/ajtmh.20-0800>
31. Heo, Y.-M., Lee, M. & Jang, S.J. (2021). Intentions of frontline nurses regarding COVID-19 patient care: A cross-sectional study in Korea. *J Nurs Manag*, 29(6), 1880-1889. <https://doi.org/10.1111/jonm.13333>
32. Sperling, D. (2020). Ethical dilemmas, perceived risk, and motivation among nurses during the COVID-19 pandemic. *Nurs Ethics*, 28(1), 9-22. <https://doi.org/10.1177/0969733020956376>
33. Jayasuriya, R., Whittaker, M., Halim, G., & Matineau, T. (2012). Rural health workers and their work environment the role at inter personnel factors on job satisfaction of nurses in rural Papua New Guinea. *Bio med Central Health Services Research*, 12:1, 156-168. <https://doi.org/10.1186/1472-6963-12-156>
34. World Health Organization. (2020). State of the World's Nursing 2020: Investing in Education, Jobs and Leadership. WHO, Geneva. Retrieved From: <https://www.who.int/publications/i/item/9789240003279>
35. Drennan, V. M. & Ross, F. (2019). Global nurse shortages-the facts, the impact and action for change. *Br Med Bull*, 130(1), 25-37. <https://doi.org/10.1093/bmb/ldz014>
36. Catton, H. (2021). COVID-19: The future of nursing will determine the fate of our health services. *Int Nurs Rev*, 68(1), 9-11. <https://doi.org/10.1111/inr.12673>
37. Turale, S., & Nantsupawat, A. (2021). Clinician mental health, nursing shortages and the COVID-19 pandemic: Crises within crises. *Int Nurs Rev*, 68(1), 12–14. <https://doi.org/10.1111/inr.12674>
38. Catton, H. (2020). Global challenges in health and health care for nurses and midwives everywhere. *International Nursing Review*, 67(1), 4–6.
39. Mo, Y., Deng, L., Zhang, L., Lang, Q., Liao, C., Wang, N., Qin, M., & Huang, H. (2020). Work stress among Chinese nurses to support Wuhan in fighting against COVID-19 epidemic. *Journal of Nursing Management*, 28(5), 1002-1009. <https://doi.org/10.1111/jonm.13014>.
40. Barrett, D., & Heale, R. (2021). COVID-19: reflections on its impact on nursing. *Evid Based Nurs*, 24(4), 112-113. <http://dx.doi.org/10.1136/ebnurs-2021-103464>
41. International Council of Nurses. (2021a). 74th World Health Assembly: Nursing action and impact in global policy making. Retrieved From: <https://www.icn.ch/system/files/2021-07/74TH%20WHA%20REPORT.pdf>
42. Sun, N., Wei, L., Shi, S., Jiao, D., Song, R., Ma, L., Wang, H., Wang, C., Wang, Z., You, Y., Liu, S., & Wang, H. (2020). A qualitative study on the psychological experience of caregivers of COVID-19 patients. *Am J Infect Control*, 48, 592-598.
43. Zhang, Y., Yang, M. & Wang, R. (2021). Factors associated with work–family enrichment among Chinese nurses assisting Wuhan's fight against the 2019 COVID-19 pandemic. *J Clin Nurs*, 1-12. <https://doi.org/10.1111/jocn.15677>
44. Duran, S., Celik, I., Ertugrul, B., Ok, S., & Albayrak, S. (2021). Factors affecting nurses' Professional commitment during the COVID-19 pandemic: A cross-sectional study. *J Nurs Manag*, 29(7), 1906-1915. <https://doi.org/10.1111/jonm.13327>
45. Ganji, S.F.G. & Johnson, L.W. (2020). The relationship between family emotional support, psychological capital, female job satisfaction and turnover intention. *International Journal of Economics, Business and Management Studies*, 7(1), 59-70. <http://doi.org/10.20448/802.71.59.70>