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A Study to assess the social challenges faced by the nurses posted in COVID care unit in selected hospital of Jammu and Kashmir

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INTRODUCTION

Corona virus disease (COVID-19) is a viral infection caused by the SARS-CoV-2 virus..[1]

The newly discovered human corona virus illness COVID-19 is the sixth known pandemic following the 1918 flu pandemic. COVID-19 was discovered in Wuhan, China, and quickly spread throughout the world. Based on phylogenetic study, the International Committee on Taxonomy of Viruses termed the corona virus severe acute respiratory syndrome coronavirus-2 (SARS-CoV-2). SARS-CoV-2 is thought to be a spillover of an animal corona virus that later adapted the ability to transmit from person to person. Because the virus is highly contagious, it spreads quickly and evolves continuously in the human population..[2]

On 12 January 2020, the World Health Organization (WHO) labeled the new virus 2019 novel corona virus (2019-nCoV), and on 12 February 2020, this infectious disease was officially labeled corona virus disease 2019 (COVID-19). Based on phylogeny, taxonomy, and established procedure, the International Committee on Taxonomy of Viruses (ICTV) formally classified the virus as SARS-CoV-2..[2]

All viruses, including SARS-CoV-2, the virus responsible for COVID-19, evolve throughout time. The majority of alterations have little to no effect on the virus's features. Some modifications, however, may have an impact on the virus's features, such as how easily it spreads, the severity of the accompanying sickness, or the performance of vaccinations, therapeutic drugs, diagnostic instruments, or other public health and social measures. Since January 2020, WHO has been monitoring and assessing the evolution of SARS-CoV-2 in

partnership with partners, specialist networks, national authorities, institutions, and researchers.. The emergence of variants that posed an increased risk to global public health in late 2020 prompted the characterization of specific Variants of Interest (VOIs) and Variants of Concern (VOCs), in order to prioritize global monitoring and research, and ultimately to inform the ongoing COVID-19 pandemic response.[3]

With its circular impact on health, living tradition, business, and politics, the COVID-19 epidemic has altered our perception of the world. Because of the unpredictable nature of the pandemic, the health industry's tradition has changed considerably. Health care providers have experienced multifaceted obstacles in carrying out their professional duties and responsibilities since the outbreak of COVID-19. According to studies, frontline health providers face challenges such as a lack of pandemic preparedness, a lack of clinical supplies, and the application of social distancing. [4]

NEED OF THE STUDY

COVID-19 has had an impact on the lives and health of over one million people worldwide. This overwhelms many countries' healthcare systems and, of course, has an impact on healthcare personnel like nurses who are fighting on the frontlines to save the lives of everyone affected. Investigating the challenges that nurses confront during their combat will aid in their assistance as well as the development of guidelines and plans to increase their preparedness. According to WHO COVID-19 statistical data on 27th September 2021 total cumulative cases were 33,713,819 and total cumulative deaths were 448,817.[5]

Figure no.1 - Diagram showing 4,32,05,106 confirmed cases of COVID in India on April 26th 2021

Figure no.2 - Diagram showing 5,24,747 death due to COVID in India on May 17th 2021

Dr. Koushal Dave conducted a study in May 2020 to examine the issues experienced by Indian nursing professionals working in hospitals and caring for COVID-19 patients. Using Google forms, a self-administered questionnaire covering demographic information and obstacles faced by nursing professionals in dealing with COVID-19 patients was created and distributed to nurses in India via social media. A total of 100 nurses from

various hospitals in India took part. Data were coded and descriptive statistics were used to analyze them. The participants' average mean age was 35.09± 4.83 years. Furthermore, 75% of participants reported being anxious and frustrated by their workload. 44% of nursing professionals were extremely concerned due to underlying health difficulties, and 18% were concerned since they lived with a COVID-19 positive person. Out of 100 participants, 58% said they were extremely concerned about the availability of PPEs in hospitals. Approximately 80% of participants reported a scarcity of N95 masks, whereas 44% and 40% reported a scarcity of goggles and hoods, respectively. 64% of interviewees were extremely concerned about their own safety and the safety of family members. [6]

Hence, Researcher felt need to conduct the study on social challenges faced by staff nurses posted in COVID care unit.

OBJECTIVES OF THE STUDY

1. To assess the social challenges faced by the nurses posted in COVID care unit.
2. To find out the association between social challenges faced by the nurses posted in COVID care unit with socio demographic variables.

RESEARCH METHODOLOGY

Descriptive research design was used to assess the social challenges faced by the nurses working in COVID care unit. The sample size for this study was 60 staff nurses who were posted in COVID care unit and they selected by using Convenient sampling technique.

DEVELOPMENT AND DESCRIPTION OF THE TOOLS

Section A- Demographic data to assess the demographic characteristics of staff nurses who were posted in COVID care unit.

Section B- Structured rating scale to assess social challenges faced by staff nurses during posting in COVID care unit.

RESULTS

SECTION-A

Table no 1 includes 7 socio demographic variables that is age, gender, education Qualification, marital status, number of children, type of family, period of working with COVID patients. This also includes frequency distribution and percentage related of staff nurses in COVID care unit.

Table No:1

n = 60

SECTION-A socio demographic data		Percentage(%)	Frequency(f)
Age	20-30 years	77%	46
	31-40 years	23%	14
Gender	Male	10%	6
	Female	90%	54
Educational Qualification	GNM	23%	14
	Post basic Nursing	27%	16
	B.Sc. Nursing	50%	30
Marital Status	Married	35%	21
	Single	65%	39
, Number of children If Married	Nil	82%	49
	1 child	8%	5
	2 children	10%	6
Type of Family	Nuclear	94%	56
	Joint	6%	4
Period of working in COVID area	1-5 months	3%	2
	6-10 months	10%	6
	11-15 months	12%	7
	More than 16 months	75%	45

Table:1- Frequency and percentage distribution of the staff nurses

This table deals with the findings related to the association between social challenges score and selected demographic variables.
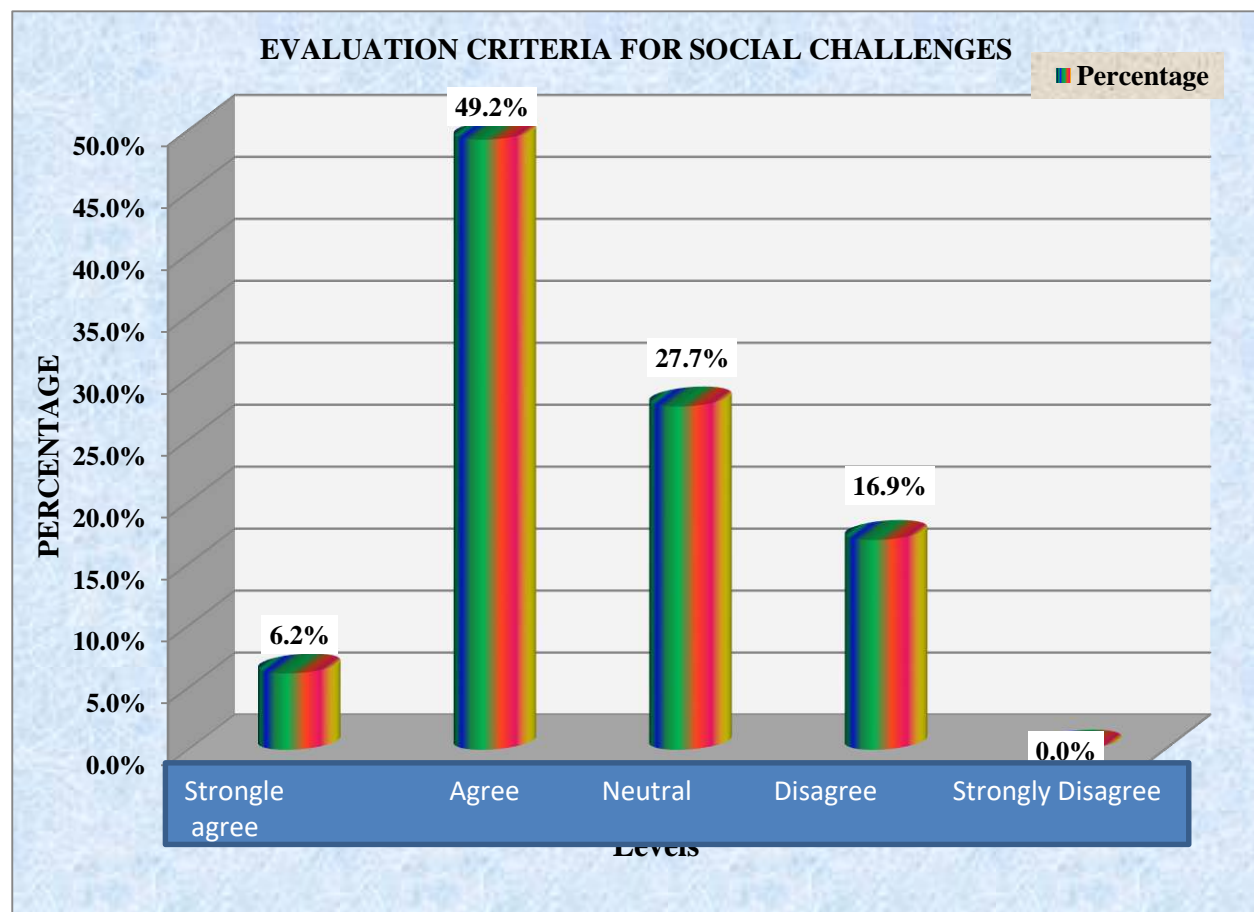
TABLE 2   Levels (n=60)

Demographic Variables		Levels (n=60)				ASSOCIATION WITH SOCIAL SCORE			
Variable	Opts	Disagree	Netural	Agree	Strongly Agree	Chi Test	P Value	df	Result
Age	20-30 years	6	14	23	3	1.66	0.64	3	Not Significant
	31-40 years	3	2	8	1				
Gender	Male	1	1	4	0	0.65	0.88	3	Not Significant
	Female	7	12	31	4				
Educational Qualification	GNM	2	2	7	3	4.54	0.60	6	Not Significant
	Post basic Nursing	3	2	10	1				
	B.Sc. Nursing	3	8	17	2				
Marital Status	Married	3	4	10	4	3.875	0.60	3	Not Significant
	Single	5	7	24	3				
Number of children If Married,	Nil	4	11	31	3	6.06	0.41	6	Not Significant
	1 child	1	2	1	1				
	2 children	1	0	4	1				
Type of Family	Nuclear	7	16	28	5	3.05	0.38	3	Not Significant
	Joint	0	0	3	1				
Period of working in COVID areas	1-5 months	0	0	2	0	4.14	0.901	9	Not Significant
	6-10 months	1	1	3	1				
	11-15 months	1	3	2	1				
	More than 16 months	6	15	20	4				

Data in table 2 shows that there was no significance association between the level of social scores and other demographic variables

FIGURE 1 :-Evaluation criteria for social challanges

EVALUATION CRITERIA FOR SOCIAL CHALLENGES

DISCUSSION

1. **To assess the social challenges faced by the nurses posted in COVID care unit:-**

In present study, 6.2% have strongly agreed on facing social challenges, majority of them i.e. 49.2% have agreed, where some of them i.e. 27.7% are not sure and few of them i.e. 16.9% are somewhat not agreed on facing social challenges during duty in COVID care unit.

Where, the study conducted by Monika Bisht et. el. (2021)[7] to assess the social challenges faced by COVID-19 warriors posted at a COVID-19 care unit and to seek the association between social life challenges faced by them and selected demographic variables. The study indicated that 58.3% experienced bad behavior from society, 55.0% experienced severe social loneliness and 25% experienced moderate social loneliness. 61.67% of study subjects were severely anxious.

Hence, both study shows that staff nurses faced social issues during posting in COVID care unit.

IMPLICATIONS

IMPLICATIONS FOR NURSING PRACTICE:-

Nurses should be informed and educated before dealing with COVID patients.

IMPLICATIONS FOR NURSING ADMINISTRATION:-

Higher authorities should organize ongoing nursing education/workshops on pandemic safety measures and management. Nurse administration should schedule meditation and yoga sessions for nurses to help them overcome anxiety and stress.

IMPLICATIONS FOR NURSING RESEARCH:-

More researches can be done to find out the issues faced by the nurses during pandemic.

IMPLICATIONS FOR NURSING EDUCATION:-

Nurses should be knowledgeable about safety precautions. Nurses should understand their own rights and responsibilities. The training director should teach the nurses how to overcome tension and anxiety when entering a stressful environment.

RECOMMENDATION

Based on the findings of the study, the following recommendations are offered for future research.

Similar study can be conducted for larger population.

A study can be conducted to find out the physical and mental issues faced by the nurses during this pandemic situation.

A comparative study can be conducted between two different settings which can enhance more positive and improving results.

CONCLUSION

In conclusion, the result of the study implies that most of the staff nurses agreed for facing social issues during the posting in COVID care unit. To reduce or prevent these kind of challenges, staff nurses should be well trained. They should get support from the management and administration. This study also indicates that the staff nurses should get support from their family members, friends and society.

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