Taking Care

A School of Nursing research team plumbs the pandemic experiences of nurses nationwide

In March 2020, shortly after COVID-19 patients began to overwhelm U.S. hospitals, School of Nursing Assistant Professor Shannon Simonovich asked herself DePaul’s core Vincentian question: What must be done?

“That was the underpinning of our study,” she says. “I was not working on the front lines, but I knew something needed to be done to better support our colleagues who were.”

Leveraging her skills as a public health researcher, Simonovich assembled a 24-member volunteer team of 14 doctorally prepared nurses on the faculty as co-investigators and 10 students as research assistants. From May to September 2020, team members conducted phone interviews with 100 nurses across the country to assess their colleagues’ experiences.

To reflect the pandemic’s disproportionate impact on communities of color, the team selected its respondents so that 63% identified as Black, Asian, American Indian, Hispanic or multiracial. Transgender and nonbinary nurses’ experiences were also documented. To build trust, interviewers and respondents with the same racial, ethnic and clinical backgrounds were paired whenever possible.

Subsequent thematic analyses of the study’s data have resulted in multiple journal papers and presentations, including one at the Sigma Theta Tau International Nursing Congress on July 21-23, to share findings the team hopes will help advocate for nurses’ needs as the relentless pandemic persists.

The first paper, co-authored by the 14 faculty members and published in International Nursing Review, focuses on the importance of communication across organizational and unit leadership and among nurses.

“When we started interviewing nurses, I thought their concerns would be about medication regimens and new scientific technology, but it predominantly came down to the foundational skills and knowledge that have always been important,” says Simonovich. “In any health care situation, communication is at the heart of everything, whether it’s reducing medical errors or optimizing clinical outcomes.”

Effective communication, as deconstructed in the paper, comprises presence, education and emotional support.

Presence includes nurses seeing leaders, from the CEO to the chief nursing officer, making daily rounds to let them know they’re supported and appreciated. Education can refer to bimodal and multimodal methods for sharing research updates from governing health care agencies. Emotional support relates to alleviating the moral distress nurses experience when forced to “practice in ways that contradict their traditional training because of the rapidly changing health care landscape,” says Simonovich.

Respondents reported that effective emotional support came from meetings of nurse-to-nurse support groups; counseling from social workers, psychiatrists and chaplains; the act of sending cards to families who lost loved ones; and access to quiet, meditative spaces.

“There were some heart-wrenching conversations,” says Simonovich, “but we ended every interview asking about the implications for nursing education.”

Both experienced nurses and new nurses, including a few of the team’s former student members, say educational support is key in their transformed profession.

“Our research reinforces what nurses, nurse leaders and hospital systems are doing well, and provides ideas of what they can do better,” says Simonovich. “Our graduates are sharing this with new coworkers. We’re excited to see what kind of leaders they become.”