Quality of life at work of nursing professionals: reflection on the impacts of covid-19

Qualidade de vida no trabalho dos profissionais de enfermagem: reflexão sobre os impactos da covid-19

Calidad de vida en el trabajo de los profesionales de enfermería: reflexión sobre los impactos de la covid-19

ABSTRACT
Objective: To reflect on the main impacts on the quality of life at work of Nursing Professionals during the pandemic novel coronavirus. Method: This is a theoretical reflection, based on the theory of quality of life at work. The discussion was based on national and international articles focusing on the theme. Result: Eight criteria influence the quality of life at work, among those related to nursing professionals, four were positive in coping with the pandemic: opportunities for continuous growth and safety, constitutionalism and citizenship, social relevance of life at work and development of human skills. However, four had negative reflexes, being common the notes of long working hours, with the removal of professionals, either due to illness or because They are from a risk group, increased work overload, which causes them greater physical and mental distress. Regarding the aspects of fair and adequate compensation, professionals continue to receive low wages, regarding safety and health, cases of absence of personal protective equipment and inadequate reuse of this equipment have been reported. Final considerations: It is expected to demonstrate and analyze, as well as reflecting on the factors that influence and affect the quality of life at work of nursing professionals due to coping with COVID-19.

DESCRIPTORS: Coronavirus; Quality of Life; Occupational Health; Nursing.

RESUMO
Objetivo: Refletir sobre os principais impactos causados na qualidade de vida no trabalho dos Profissionais de Enfermagem durante a pandemia do novo coronavírus. Método: Trata-se de uma reflexão teórica, baseada na teoria de qualidade de vida no trabalho. A discussão foi embasada em artigos nacionais e internacionais com enfoque na temática. Resultados: Oito critérios influenciam na qualidade de vida no trabalho, dentre os relacionados aos profissionais de Enfermagem, quatro foram positivos no enfrentamento da pandemia: oportunidades de crescimento e segurança continuada, constitucionalismo e cidadania, relevância social da vida no trabalho e desenvolvimento de capacidades humanas. Entretanto, quatro tiveram reflexos negativos, sendo comuns os apontamentos de longas jornadas de trabalho, com o afastamento dos profissionais, seja por adoecimento e por serem de grupo de riscos, aumento da sobrecarga de trabalho, o que causa a eles um maior sofrimento físico e mental. Em relação aos aspectos de compensação justa e adequada, os profissionais continuam recebendo baixos salários, quanto à segurança e saúde, foram relatados casos de ausência de equipamento de proteção individual e reuso inadequado desses equipamentos. Considerações finais: Espera-se demonstrar e analisar, refletir sobre os fatores que influenciam e afetam na qualidade de vida no trabalho dos profissionais de enfermagem em decorrência ao enfrentamento da covid-19.

DESCRITORES: Coronavírus; Qualidade de Vida; Saúde do Trabalhador; Enfermagem.

RESUMEN
Objetivo: Reflexionar sobre los principales impactos causados en la calidad de vida en el trabajo de los Profesionales de Enfermería durante la pandemia del nuevo coronavirus. Método: Esta es una reflexión teórica, basada en la teoría de la calidad de vida en el trabajo. La discusión se basó en articulos nacionales e internacionales centrados en el tema. Resultados: Ocho criterios influyen en la calidad de vida en el trabajo, entre los relacionados con los profesionales de enfermería, cuatro fueron positivos para enfrentar la pandemia: oportunidades de crecimiento y seguridad continuas, constitucionalismo y ciudadanía, relevancia social de la vida en el trabajo y desarrollo de capacidades humanas. Sin embargo, cuatro tenían reflexos negativos, las notas de largas horas de trabajo son comunes, con la retirada de profesionales, ya sea por enfermedad y por ser un grupo de riesgo, aumenta la sobrecarga de trabajo que les causa un mayor sufrimiento físico y mental. Con respecto a los aspectos de compensación justa y adecuada, los profesionales continúan recibiendo bajos salarios, en términos de seguridad y salud, se han reportado casos de ausencia de equipo de protección personal y la reutilización inadecuada de algunos de estos equipos. Consideraciones finales: Se espera que demuestre y analice, además de reflexionar sobre los factores que influyen y afectan la calidad de vida en el trabajo de los profesionales de enfermería debido a cómo hacer frente a COVID-19.

DESCRITORES: Coronavirus; Calidad de Vida; Salud Laboral; Enfermería.
INTRODUCTION
In December 2019, Severe Acute Respiratory Syndrome Coronavirus 2 (SARS-CoV2) was detected in the city of Wuhan, China, starting a local outbreak of the infection that spread rapidly; and in March 2020, it became a pandemic as declared by the World Health Organization (WHO)[1]. The transmission of SARS-CoV2 occurs by droplets and contact, is highly contagious, and it is estimated that, for each infected individual, transmission to up to four individuals occurs[2]. The risk of contamination by this infection among health professionals is up to three times higher than among the general population[3]. In Brazil, there is still no official data on the number of workers affected by the virus, but the Federal Council of Nursing (COFEN, as per its Portuguese acronym) created an observatory to register and disclose these numbers. By June 23, 2020, a total of 20,825 cases of infected nursing professionals (NP) had been registered; of these, 213 progressed to death[4], which demonstrates the need for an attention focused on their protection to avoid contagion and deaths resulting from exposure at work.

NP perform their work activities by providing direct care to the patient infected by this virus. They act directly on the frontline in the fight against COVID-19; and, for this reason, they are more susceptible to infection. Given this scenario, institutions must offer safe working conditions, through organizational strategies that foresee the possibility of infection of NP, and these should ensure preventive actions aimed at reducing the number of professionals affected directly by the disease and indirectly by the work overload due to the absence of affected colleagues[5].

When considering that quality of work life (QWL) is defined as a set of factors that encompass an “engaged understanding of the conditions of life in the work environment, including aspects of well-being, health assurance, physical, mental, social safety, and ability to perform tasks safely and good use of personal energy”[6]. Accordingly, with the purpose of improving the satisfaction, motivation, and well-being of professionals in the organizational environment, in order to provide productivity to the institution[7].

Given the sickness of NP by COVID-19, one can observe a decrease in the QWL of these professionals, due to work overload and long working hours. This scenario has contributed to an increase in the physical and mental wear of NP who remain active, even in the absence of their sick colleagues. Other factors that aggravate the health and QWL of NP are related to structural insufficiency, lack of personal protective equipment (PPE) and the exhaustion in health systems caused by increased occupation of beds due to hospital admissions[8]. The conditioning situations in the work environments experienced by NP facing the pandemic emphasizes a drastic scenario, becoming a challenge to institutions in the current moment in which preventive measures must be ensured to minimize occupational risks. Given these conditions, this research is justified with the aim of reflecting on the main impacts caused in the QWL of NP during the pandemic of COVID-19 in the national scenario.

It is believed that with the identification and knowledge of the factors that are affecting the QWL of nursing professionals facing the pandemic of COVID-19, and with a self-reflection on these factors, modifications can be made in the work environment, in order to provide improvements in working conditions and in the QWL of these professionals. In this context, the conceptualization criteria of the QWL theory were used in this research, which includes appropriate and fair compensation, safe and healthy working conditions, timely and immediate occasions for the use and development of human skills, possibilities for continuous professional growth, job stability, “social integration in the organization, constitutionalism in the organization, work and total space in the individual’s life, and social relevance of work.”[9].

METHODS
This is a theoretical reflection on the factors that influence the QWL at work of NP experienced in the current scenario when facing COVID-19. In view of this, the question emerged of which factors would be influencing and affecting the QWL of nursing professionals as a result of facing COVID-19? It was chosen to address the eight criteria described in the QWL theory[9], which are: 1) fair and appropriate compensation; 2) working conditions; 3) use and development of personal skills; 4) opportunities for growth and safety; 5) social integration in the organization; 6) constitutionalism and citizenship; 7) work and total living space; and 8) social relevance of life at work. The theory relates QWL to humanization at work and whose author was one of the precursors in studies of the theme.

The construction of the discussion was based on online searches in national and international databases and on official data from the Brazilian Ministry of Health, WHO, COFEN and the Federal Government of Brazil, with a focus on the topic in question. Data collection took place in May and June 2020, and articles were selected in the following databases: PubMed, SciELO, CINAH (Cumulative Index to Nursing and Allied Health Literature), Web of Science and the Regional Portal of Virtual Health Library (VHL), which gathered findings from MEDLINE and IBR-CES databases. Boolean operators AND or OR were used, with descriptors in Portuguese, namely: coronavirus, qualidade de vida, saúde do trabalhador, enfermagem; in English, namely: coronavirus, quality of life, occupational health, nursing; and in Spanish, namely: coronavirus, calidad de vida, salud laboral y enfermeria. The following inclusion criteria were established: being available in full, in Portuguese, English or Spanish, published with preferences in the last five years and being related to the concept in focus. In turn, the exclusion criteria corresponded to the remaining duplicate articles, not available online in full and unrelated to the theme. A thematic analysis was performed that met the inclusion criteria and the results discussed...
the following themes: “The conditions experienced and factors that influence and affect the QWL of NP in the national pandemic scenario” and “Factors that impact QWL”. These searches and the analysis made it possible to find the answers and results relevant to the guiding question of this reflective research.

RESULTS AND DISCUSSION
The conditions experienced and factors that influence the qwl of np on the national scenario

In Brazil, there are approximately 2.2 million NP, and most of them provide assistance to Brazilians who need daily care in health services. As a result of the epidemic due to the rapid evolution of the virus, the demand for care has increased significantly in several parts of the country, leading to situations of emergency and calamity in health services in several Brazilian states(9). These situations lead to a collapse in the public and private health systems, requiring the application of non-pharmacological measures to halt the transmission of this virus(9), which changes the daily lives of people and NP. The non-pharmacological measures implemented seek to reduce the evolution of infection among people by means of social distancing, hygiene habits, use of masks, among others, aiming to reduce the number of diseases and deaths among them(11).

As a result of the pandemic of the new coronavirus, health teams have feelings of anguish, anxiety and pain for the deaths of patients and their co-workers, and are also victims of offenses, threats and violence(10). A survey conducted in Brazil showed that frontline NP in patient care have been suffering verbal, psychological and physical aggression, where 19.7% have already suffered violence in the work environment, of which 15.6% were physical violence, 26.3% were verbal and 66.5% were psychological violence. Only 29% of NP feel safe in the work environment(11). Linked to this context, NP still need to make difficult decisions, despite the physical and mental overload and often the feelings of inability for not being able to save lives, which contributes to the increase of their emotional and psychological distress.

This context reflects in the daily life of NP that see their personal life affected due to the need to stay away from their families, in order to protect their loved ones from a possible infection by this virus, because many professionals are giving up their family life and staying in places that do not always provide comfort(12), which results in increased physical fatigue. However, health services should implement strategic measures to preserve their physical and psychological health.

Added to this, the expansion of the working day in health services and the growth of cases of people infected with the virus also increased the illness of these professionals, and this may have generated an increase in the number of cases of psychological distress(5). On the other hand, COFEN created a listening channel to treat NP who present some symptom of psychological distress(13), which has contributed to the improvement of the QWL of these professionals.

It is noteworthy that these problems emphasized in the period of the epidemic, related to the conditions and organization of work, are often experienced by NP as: the precariousness of work due to the shortage of human resources and materials and equipment(14-15). Moreover, among health professionals, Nursing is the only profession that does not have a working day defined by national law, and the bill that defines a working day of 30 hours per week and a national wage floor has been in National Congress for several decades. The approval of these demands could contribute to the reduction of the exhausting working days that affect the health and quality of life of these professionals.

In this context, there are many factors that influence the QWL of these professionals, especially in care environments. Thus, some measures can be taken to improve QWL, such as: protection of professionals, guarantee of personal protective equipment (PPE), performance of tests to identify the contaminated, isolation and treatment of sick professionals, adequacy of staff sizing, flexibility of working hours with the entry of the next shift one hour earlier, thus ensuring assistance to NP of the previous shift to perform the remaining care activities and help in the removal of protective equipment(16), and the recommendations should be constantly updated with the studies conducted to the progress of the disease.

Factors that impact and affect the qwl of nursing professionals

As recommended by the QWL theory, eight criteria are described that address the basic aspects of situations, which can be applied in different types of organizations bringing positive results for professionals and institutions that are: 1) fair and adequate compensation; 2) working condition; 3) use and development of personal skills; 4) opportunities for growth and safety; 5) social integration in the organization; 6) constitutionalism and citizenship; 7) work and total living space; and 8) social relevance of life at work(18). Based on these criteria, the situations correlated with the experience of EPs found in the literature and the relevant reflections will be presented.

Fair and adequate compensation is associated with the compensation received by professionals due to the work activities performed and the compensation related to working conditions that are harmful to health. However, an adequate compensation should be the one that provides a decent living for the professionals. Internal equity would be salary equalization for the same function, and external equity proportionality between salaries of internal and external workers. When there are changes in the way of working that generate increases in productivity, the gains should be divided among the company’s professionals(6).

In this context, many NP do not have a fair remuneration for the services provided and work in shifts and long working hours, there is no internal or external equity in Nursing, not even a wage floor approved by law. Thus, there is a vast inequality of remuneration among these professionals(17). The remuneration is pointed out in studies with concern
to the services, causing dissatisfaction, because it brings the importance to the professional's experience as a factor of job satisfaction\textsuperscript{[18]}

Working conditions should be safe and healthy, seeking job quality in a larger number of spaces for professionals. In the working day, it is verified if the hours are in accordance with the services provided; in the workload, it is verified the quantity of activities performed in a shift; in the physical environments, the healthy working conditions, organization, and comfort are analyzed; in the materials and equipment, the quantity and conditions needed to perform the procedures with quality are verified. A safe and healthy environment should be created, free of stressful factors and, if possible, the elimination or reduction of unhealthy risk factors\textsuperscript{[19]}.

For Nursing, the conditions of healthy work become practically impossible in the current scenario, in which the greatest threat is the biological risk from a devastating virus, the coronavirus, which refers to fear, anguish, loneliness, pain, loss, which has been sickening and killing both health professionals and the general population, characterizing a desolate scenario that is joined by the shortage of materials and medical equipment, safety, and human resources that affect the professional performance and may contribute to work accidents due to work overload\textsuperscript{[14-15]}.

Moreover, it is noteworthy that the assistance to the patient infected by COVID-19 and requiring intensive care has increased the workload, since this demand for recurrent care and in short periods of time points to the alternation of decubitus, ventilatory and skin care. The epidemic has only amplified the precarious working conditions, already historically experienced by NP.

As a result of the epidemic, NP have been performing their activities under pressure, with increased work hours and little rest, the onset of fatigue, without breaks, and with physical and mental exhaustion\textsuperscript{[19]}. And for this scenario, the Federal Government approved the Provisional Measure (MP, as per its Portuguese acronym) 927, which allows the expansion to up to 24 hours the working day of health professionals, i.e., without limit, and with the reduction of 12 hours of rest time. It is worth noting that this MP should remain in place for the duration of the pandemic\textsuperscript{[20]}.

It has been 20 years since the bill that provides for the working hours of nursing professionals to 30 hours a week, a week capacity hours a day, and with the main claims of these categories is still under consideration, it was developed in 1999, registered under number 2295, presented on January 11, 2000\textsuperscript{[22]}. In opposition to the improvement of the QWL of NP, the MP 927 was quickly approved, and in its Art. 26 "allows the employer to extend the working day; adopt supplementary work schedules that vary from the 13\textsuperscript{th} to the 24\textsuperscript{th} hour of the interjourney interval"\textsuperscript{[20]}, which contributes to the increased exposure of NP to the risks of transmission of this biological agent, to ergonomic risks due to the lack of rest breaks, adding to the risks of accidents by working under pressure, without breaks, with decreased level of attention, physically and mentally fatigued, which may lead to losses in the quality of care provided in health services. It is important to highlight that NP should have their right to life respected and should be ensured with QLW. It is noteworthy that health services and public policies must ensure safe working conditions for NP so that they can provide quality care to patients.

The criterion of use and development of personal skills should provide immediate opportunity, and refers to autonomy, self-control, multiple capacity, information and perspectives on the work process. The aim is to analyze the ability of professionals to apply the knowledge acquired in practice, as well as in the performance of their professional skills. In order to have autonomy, professionals must be granted freedom and independence in the execution of their activities. The significance of the task involves the service performed that has its importance for the professional who performs it and for those who receive the care. As the task is performed, results are generated. Multiple abilities are the characteristics, qualities or particularities of the professional related to the ability to use them with dexterity and agility. Information relates to communications, changes and the total process of the work, and the provision of feedback to employees on the results of their actions. The work involves organization, planning, and implementations\textsuperscript{[20]}.

For nurses to achieve this criterion and provide their team with QWL, it is necessary that they have a background with general and specific competencies related to decision making, health care, communication, continuing education, leadership, and management. Good administration and management bring quality to the services provided, as long as the necessary resources are provided for their application, such as an adequate physical work environment, material, human, financial, political resources, medical equipment, PPE, and updated information\textsuperscript{[22]}.

Despite the negative situations found in the work environments of NP, such as the poor physical and safe environment conditions in the organizational context, without sufficient human resources and materials, and the reduced number of NP due to constant leaves of absence caused by the virus and/or triggered by work overload. It is possible to identify as positive points the immediate opportunity to develop personal capacity and new knowledge about the care provided to patients infected by COVID-19.

In the opportunities for growth and safety that cover the development and stability in employment and career, are related to the opportunities for professional and personal growth within a company, which occurs through training, refresher courses and educational activities for the development of professionals. Job safety refers to the professional's stability, which provides him/her with safety against dismissal\textsuperscript{[8]}.

In this criterion, the pandemic of COVID-19 has highlighted the role and value of NP, due to their essential role in the health care of people,
which resulted in a new WHO report, entitled The State of the World’s Nursing 2020, in which it calls for more investment in working conditions, in teaching, education, training for the competence and leadership for NP, for the strengthening of their contributions to health systems with more jobs and valorization. The report had contributions from the Nursing Now campaign and the International Council of Nurses(23).

Social integration in the work organization is the absence of prejudice, including equality, mobility, preliminary support groups and interpersonal openness. These attributes have as objectives the healthy coexistence among professionals in the company, equal opportunities, the acceptance of the professional with his competencies and skills respecting his individuality, in the mobility the visualization of potential professionals who can raise their levels, the preliminary support groups help each other reciprocally, the support of a good interpersonal relationship, in the community sense expand the relationship with other groups and sectors. In interpersonal openness, it promotes the exchanges of ideas, feeling, and information among professionals. According to the literature(8), “since work and career are typically pursued within the structure of social organizations, the nature of personal relationships becomes another important dimension of QWL”.

Accordingly, in the Federal Constitution of 1988, Article 5 states that “everyone is equal before the law, without distinction of any kind, guaranteeing Brazilians and foreigners residing in the country the inviolability of the right to life, liberty, equality, safety and property”(20). Thus, NP should exercise their activities in environments free of prejudice, living equally, with freedom to express themselves without fear of being punished, respecting the diversity of each human being. Nonetheless, this right is curtailed in Nursing, because it suffers from inequalities of social status present in the health area; with gender-related issues, for being a profession of mostly women and issues related to violence at work. It is noteworthy that during this pandemic, many NP have reported suffering discrimination by society, which sees them as a transmitter of the disease. Another negative aspect to be highlighted is that even with the recognition of the importance of their work, Nursing professionals have been assaulted and suffered discrimination by the population in public transportation(25).

Another criterion is constitutionalism and citizenship in the organization of work. This is based on labor rights and professional duties, as well as personal privacy, freedom of expression without fear of reprisal, fairness, the right to impartial treatment, and due process in the use of laws in cases of need for professionals(4).

With the approval of MP 927, which increases the workload to up to 24 hours(20) contrary to NP struggle to reduce the workload to 30 hours a week, it is necessary to reflect on the contrariety of the protection and safety laws and also on the protection measures established against the pandemic, as stated in Technical Opinion nº 128, dated 2020, on the physical and psychological protection of health workers in the face of the pandemic of COVID-19. In it, one can find the duty of clarification and the rights assured to health professionals and their responsibilities and roles in the face of the epidemic scenario. It also states that “health managers and service managers should ensure the right of health workers to all preventive and protective measures necessary to minimize risks at work, including reliable information on occupational health and safety”(7).

There is a legal framework that ensures NP the health and safety for the performance of their work activities and protocols and technical notes directed to the use of personal protective equipment, care and adequacy of physical spaces for the care of people with suspected and/or confirmed infection by COVID-19. Despite these policies and current legislation demanding better working conditions for NP, during this period, there was a worsening of the environments and the organization of the work process due to overcrowding in emergency and intensive care units, which led to an increase in the workload of NP. In addition, several cases of lack of PPE for work practice and the inadequate reuse of some of this equipment were reported.

Work and total living space is aimed at preserving and balancing work life with personal life. Extended work periods, intense working hours, shift work with little time off can cause negative effects or serious damage to family relationships, so that the company can provide a balance in work and leisure time for professionals with their families(36).

This criterion presents negative effects, as NP are on the frontline of fighting the pandemic. This is a critical and challenging time for the total life space, because professional and personal life go out of kilter due to the deficit of NP, with demand rising exponentially in health services. In this context, the workload exceeds physical and mental limits, contributing to the occurrence of work accidents, absenteeism, exhaustion, medication errors, work overload, and lack of leisure(28). Thus, NP need urgency in the application of physical protection with reduction of working hours, psychological support and improvement in working conditions to increase their QWL.

The social relevance of life at work refers to the company’s image, if professionals are satisfied with the work in the company and with the social responsibility and services, the company’s policy and resources on social work in the community in which it involves employees are observed. When the company’s image is not good or has not been worked socially with responsibility and with few resources it leads to dissatisfaction of professionals and their self-esteem can be affected, causing a devaluation of their career and work(3). In the epidemic scenario, the media show several institutions in Brazil with problems of precariousness to the services, which leads to dissatisfaction the professional who needs to work with few resources to provide assistance to the
population, facing the restrictions of crowding and containment measures with on-site social projects becoming unfeasible.

**FINAL CONSIDERATIONS**

When reflecting on the impacts that influence the QWL of NP, facing the epidemic scenario, it was tried to observe, from the perspective of QWL theories, that it is possible to point out that Nursing still suffers from the precariousness of the work in health services, which is only aggravated by the pandemic.

The poor physical environment conditions, the lack of human and material resources, the long working hours, the increase in occupational risks, and the lack of safety at work generate physical and mental distress, aggravated by the low remuneration, inequalities of social status among the various categories in the health area, which results in a low QWL of NP. It also highlights the experience of fear, exhaustion, and separation from family members, which can lead to the illness of these professionals, who put their lives at risk to serve the population.

The study presented as a limitation the scarcity of publications on the theme, since many investigations are still under development. However, the positive reflexes were the notoriety of Nursing. It is emphasized that the development of this research corroborates the reaffirmation of the Nursing professional as an important social actor for health care and also because the profession is considered one of the essential services for human life. Thus, the presence of representatives of the category in management positions and prestige before society also stands out. Finally, this moment favors an awakening in the search for rights and appreciation of the category in the face of public and legislative policies that ensure better working conditions and remuneration, in order to provide QWL to NP.

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