



Surviving the Trauma of COVID

he Centers for Disease Control and Prevention (2021) reported 21.5 million cases of COVID-19 in the United States in early January 2021 with more than 364,000 deaths. COVID's U.S. mortality rate is higher than heart disease and cancer and was the second leading cause of death for those 85 years and older and the third leading cause of death for people 45 to 84 (Woolf et al., 2021). Clinical nurses have served as a witness to many of these deaths.

Nurse educators struggle to find clinical experiences and support students in their learning. Clinical nurses experience the loss of patients at unprecedented rates. Nurses face long work hours, staffing shortages, limited resources, changing policies, and the risk of contracting the coronavirus as well as the fear of infecting family members. One ICU nurse shared:

I'm barely upright. More than 80 hours in the last week. All our patients are on ventilators. I do this work to help people. Now we just help them die. The patients that are awake and understand cry when I hold their hands and pray aloud for them while they try to breathe. I do that with every single one of them. We're getting crushed



Christy Secor, DNP, RN, CDWF, is the Professional Ministries Director for Nurses Christian Fellowship USA She promotes living with courage, self-care, and resilience to groups, organizations, and communities as a Certified Daring Way Facilitator.

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physically and emotionally. Every day it gets worse.

Nurses cope with significant stresses at home. Long periods of quarantine and isolation, caring for family members, juggling childcare, dealing with the loss of income, and supporting the educational needs of their children are a reality. The stresses impact nurses and educators physically, emotionally, and spiritually.

In a survey of 32,000 nurses, 87% reported they were afraid to go to work (American Psychiatric Nurses Association [APNA], n.d.). A survey of 1,119 healthcare workers by Mental Health America (2021)

Ninety-three percent of health care workers were experiencing stress, 86% reported experiencing anxiety, 77% reported frustration, 76% reported exhaustion and burnout, and 75% said they were overwhelmed. (p. 2)

Understanding how the brain processes trauma can help us care for ourselves and our colleagues. The amygdala, part of the limbic system, records trauma through our five senses while the reasoning of the prefrontal cortex is hijacked into a fight, flight, or freeze state (McClelland & Gilyard, 2019). Awareness of personal signs of stress or feeling hungry, angry, lonely,

or tired can alert you to the need for additional self-care measures (APNA, n.d.) Eating healthy, media breaks, connection with others, finding ways to remain hopeful, and seeking

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outside assistance when needed can help manage stress (APNA).

Nurses Christian Fellowship nurse groups are safe places to receive support and encouragement through Bible study, prayer, reflection, and fellowship. These connection points have become a lifeline for nurses. You do not have to walk through the trauma of COVID alone.

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