

LETTER TO THE EDITOR

Letter to the editor: In response to ‘effects of work conditions and organizational strategies on nurses’ mental health during the COVID-19 pandemic’

Dear Editor

We read with great interest the report about the effects of work conditions and organizational strategies on nurses’ mental health during the COVID-19 pandemic (Li et al., 2022).

This study by Li et al. (2022) provided important insights that pandemic-related work conditions were associated with adverse mental health and intention to leave and that organizational strategies attenuated the adverse impact of the pandemic, among nurses. In particular, the fact that caring for COVID-19 patients was negatively associated with depression and stigma increased nurses’ intention to leave was significant findings and provided for a thought-provoking discussion. However, several aspects of these findings require further discussion.

First, the finding that caring for COVID-19 patients was negatively associated with depression is unique, but perhaps it should be considered in terms of differences in the acquisition of knowledge related to COVID-19. While caring for COVID-19 patients has been reported to be a risk factor for depression (Fang et al., 2021; Ren et al., 2022), previous studies have reported that it is not associated with depression (Kim et al., 2021; Takada et al., 2022). In addition to the findings of Li et al. (2022) that adequate education and training concerning the COVID-19 pandemic is negatively associated with depression, it has also been suggested that adequate COVID-19-related knowledge is a protective factor for depression (Han et al., 2020; Zheng et al., 2021). Now that time has passed since the pandemic occurred, it is expected that such COVID-19-related knowledge will be acquired not only from education and training by the organization but also through actual care of COVID-19 patients. Thus, caring for COVID-19 patients may be negatively associated with depression, mediated by the acquisition of COVID-19-related knowledge. Considering future organizational support for nurses’ mental health, research is warranted to determine the mediating factors that exist between the care of COVID-19 patients and depression, including the acquisition of COVID-19-related knowledge.

Second, as stigma increases the nurses’ intention to leave, there is room for discussion regarding how to prevent it. The finding that social stigma towards nurses caused by the COVID-19 pandemic is associated with low motivation to continue working is extremely significant. As Li et al. (2022) pointed out, preventing social stigma

against nurses requires organizations to recognize the efforts of health care professionals and educate the public about psychosocial content, such as the challenges they face. However, it is also important to educate people to have correct knowledge of the biomedical content and to correct misinformation as well as the psychosocial content of COVID-19. A randomized trial in Japan found that those who received ‘biomedical content education’ improved their stigma towards mental illness as much as those who received ‘expert consensus recommended content education (psychosocial content)’ (Ojio et al., 2019). Therefore, to prevent stigmatization towards nurses, the state must take measures to educate the public so that they are aware of the psychosocial hardships faced by nurses and other health care professionals and provide people with the correct biomedical knowledge of COVID-19. Another critical issue to consider is how to support nurses who feel socially stigmatized. A systematic review of the relationship between stigma and help-seeking shows that stigma has a small-to-moderate, negative impact on help seeking (Clement et al., 2015), and it inhibits people in difficult situations from seeking help from others. Particularly in the stigma against nurses related to COVID-19, it is likely that they are unable to disclose to others that they are nurses because it leads to discrimination and prejudice against them (Liang et al., 2021) as well as their families. Therefore, to support nurses who feel stigmatized, support from colleagues and supervisors who already know or are comfortable disclosing their profession, such as nurses and health care professionals in the same profession as themselves, and outreach support that takes into account their inability to seek help on their own are important and require proactive efforts by the organization.

ACKNOWLEDGEMENTS

We thank Editage (www.editage.jp) for English-language editing.

FUNDING INFORMATION

None.

CONFLICT OF INTEREST

The authors declare no conflicts of interest associated with this manuscript.

AUTHOR CONTRIBUTIONS

YI drafted the first version of the letter. MT provided additional input. All authors read and approved the final manuscript.

DATA AVAILABILITY STATEMENT

Not required.

KEYWORDS

mental health, nurse, pandemic, stigma

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