

EDITORIAL

International Nurses Day 2020: Remembering nurses who have died in the COVID-19 pandemic

International Nurses Day takes place every year on 12th May—the day of the birth of Florence Nightingale, as acknowledgement and celebration of nurses' work. However, this International Nurses Day in 2020 is also a day of sombre contemplation. In a year that was meant to be a year of celebration of the world's nurses, as we write this, the world is in the grip of an active, deadly global pandemic. COVID-19 has placed never before experienced pressures on the provision of health care around the world and, in particular, on nurses. Nurses everywhere have stepped up in all sorts of ways to tackle this emergency, including nurses returning to work from retirement, accepting redeployment and even student nurses becoming part of the active and front-line nursing effort in the COVID-19 pandemic.

Over the past weeks and months of this pandemic, we have seen loss of life of nurses from all stages of career—from students, through to nurses very well established in their careers. Exact numbers of loss of nursing life to date are not available, but based on the information available, there are real concerns for the occupational health and safety of nurses across the world during this pandemic. The pandemic is not yet over, but Health Service Journal recently reported an analysis of deaths (to date) of health workers in the United Kingdom (UK), and this revealed 106 deaths to the time of publication, representing 35 nurses, 2 midwives, 18 medical staff, 27 healthcare assistants and 10 social care workers (Cook, Kursumovic, & Lennane, 2020). In Spain, it has been reported upward of 15,000 of all cases of people testing positive for COVID-19 have been health workers (Nugent, 2020) and in Italy, the number is upward of 17,000 health workers with more than more than 30 of these cases being nurses who have since died (The Local, 2020). In the United States (US), at least 46 nurses have died consequent to COVID-19 (Rodriguez & Reyes, 2020). As we contemplate these sad statistics, we grieve the loss of these nurses; the awful loss to those who will miss them the most—their families, and friends and colleagues. When looking at collective loss of life that is represented in numbers, it can be easy to not see the real human tragedy behind each death. Yet, each and every one of these nurse deaths represents immeasurable loss to so many.

The loss of life extends to all areas of nursing and nurses working in many different settings have died. Rose Harrison worked at the Marion Regional Nursing Home in Hamilton, Alabama (US), leaving behind a grieving husband and three daughters. She is remembered as being “selfless,” as living “to serve others.” Divina Accad, known to her friends and colleagues as Debbie, worked at the Detroit VA

Medical Centre, USA. In remembering his mother, her son Mark commented that Debbie “dedicated her life to nursing... She died doing what she loved most... that was caring for people.” Daisy Doronila worked at the Hudson County Correctional Facility in New Jersey, USA. Daisy is reported to have devoted her career to providing care to marginalised people, and she is remembered as a very hard-working nurse who was “intelligent and compassionate (Bailey et al., 2020).” Quen Agbor Ako, a 53-year-old wife and mother of four worked at FutureCare nursing home in Randallstown, Maryland USA. Ako was recognised by her colleagues as “beloved by the families, the residents, and her peers” and to her family “she was positive, vibrant...made sure everyone felt special” (Round 2020). These nurses were pillars of their families and communities, and we mourn their passing.

One of the most upsetting aspects of the news around nurses' deaths following contracting COVID-19 on duty relate to the nurses who are also mothers of young children. We have selected just three United Kingdom (UK) nurse-mothers who have died. They are three of many and if we had space we would pay tribute to them all. The focus here on mothers is not to ignore the loss of fathers, brothers and sons and all the male nurses who have died as a result of this pandemic. It is also not to ignore the sisters, daughters and aunts who have died, but it is to recognise the young (now motherless) children who have lost their nurse-mothers as a result of COVID-19.

Mary Agyeiwaa Agyapong, aged 28, worked at Luton and Dunstable University Hospital and was in the final stages of pregnancy when she died. Her baby was born by caesarean section. Named after her mother, little Mary will never know her mother in person and through her own commitment to nursing; Mary was robbed of the richness of watching her own child grow. Areema Nasreen worked at Walsall Manor Hospital. She was aged 36 when she died from COVID-19. Aimee O'Rourke, aged 39, worked at Queen Elizabeth the Queen Mother Hospital, in Margate, Kent. Like Areema, she was also a mother of three. Reported by the BBC News, following her death her daughter Megan Murphy said, “You are an angel and you will wear your NHS crown forever.”

Over the years, there has been much academic debate about conceptualisations of nursing as being a “calling”; a selfless giving to others. The problem if this is the conceptualisation that society and the media hold, then the corollary is a lack of regard to their need for protection. Angels do not need protection. In many ways, all the nurses, who have died, are angels in the sense that they have lost their lives while helping others. Thinking of their mothers as angels might bring comfort to these now motherless children, as well as to

the other family members and friends left grieving the loss of loved nurses from their lives. As a profession, we need to be sure that angels get more than a halo or crown—all nurses must have access to adequate supplies of the vital personal protective equipment (PPE) needed to keep them safe and protect their lives.

We mourn the contribution these nurses would have gone on to make to nursing. Through the loss of these nursing lives, we have lost literally hundreds (if not thousands) of years of nursing service that would have greatly enriched the wider profession in addition to the communities and individuals these nurses would have directly served. At the time of writing, we are still in the midst of the emergency and it is likely after the immediate crisis has passed we may get answers to better understand the factors that have contributed to this loss of life. However, based on information that is currently available in seeking to try to account for why these deaths have occurred, it seems there should be a focus on fixing systemic issues and ensuring the availability of PPE.

In both Spain and Italy, high infection rates were found among nurses not because of carelessness or poor practice but due to environmental and resourcing factors largely due to health systems not designed to cope with a pandemic of this magnitude. These factors included overcrowding, lack of staff and lack of appropriate PPE. There were frequent reports of nurses providing care to those infected with the virus using masks not fit for purpose or no masks, gloves or eye protection (Minder & Peltier, 2020). Concerns about PPE have been broached internationally. In discussing the availability of PPE, The President of the American Nurses Association (ANA), 2020 has stated.

Our military does not send troops into battle without the equipment they need to stay safe. And as a former volunteer firefighter, I would never have been required to respond to a fire without the proper gear. Yet, this is what we are asking of our nurses... when they lack the PPE they need. (American Nurses Association, 2020)

It is very troubling to read reports that nurses have been suspended for refusing to provide care without appropriate PPE. Recent media reports reveal that ten nurses in California were suspended for refusing to enter patient rooms without N95 masks (The Guardian, 2020). Although these nurses continue to be paid, they are not allowed to return to work pending a human resources investigation. This story is being repeated across the United States and the world—with reports of staff reprisals such as dismissal for protesting inadequate protection.

In reflecting on this crisis this International Nurses Day, it is clear that for nursing, there has been an impact at either end of the professional career trajectory with nursing students joining the ranks of the nursing profession at one end and retired nurses being invited to return to the profession at the other end. There will be time in the future to reflect on how the COVID-19 pandemic can have happened but one important question that will need to be answered is why it was necessary to invite student nurses and retired nurses to join the

nursing workforce. We have yet to see hard evidence for why students were (or are) required, and many retired nurses have already given many years to the nursing profession and to the provision of health care and so to be invited to return to the profession now, especially when they might feel at greater risk because of their advanced years, again feels unfair. What is most clear about this whole situation is that no one, regardless of age, can feel safe when working as a nurse, as this invisible enemy does not discriminate by age. Very sadly, the details of those working in health care who have died with COVID-19 are a list that grows daily and includes the young, the old and all those in-between.

This pandemic has occurred against a backdrop of chronic under resourcing of nursing. In many locations, nursing has been chronically underfunded for prolonged periods of time resulting in too few nurses joining the profession and associated record numbers of nursing vacancies. It was inevitable that any additional pressure on health care was going to push current resources beyond their ability to cope. What could not possibly be anticipated is the astonishing and devastating impact that COVID-19 would have or the extraordinary steps that healthcare providers would need to take to stop healthcare services from collapsing under the pressure.

Though the nurses who have died come from all over the world and from all stages of career, they all had some things in common—for one, a willingness to step up and provide care for people in the most difficult of times. Their courage and dedication will always be remembered, and we are reminded of the fragility of human life. For those of us left behind, we have to do more as a profession and as individuals to ensure that every nurse, everywhere, has access to adequate PPE—that no more will nurses be put in harm's way; no more will nurses be asked to work with infectious diseases without access to sufficient PPE. In some countries, there are worrying patterns in the deaths, and these patterns require further examination to better understand this loss of life, to see if there are lessons that can be learned. However, this pandemic is not yet over, and more insights will come later. For now, we will remember those nurses who have lost their lives and fervently hope that no more nurses are lost to this pandemic.

As an editorial team, this International Nurses Day, we offer our thanks and gratitude to nurses everywhere and acknowledge the hard work and continued dedication to service, even in the most desperate of times and even when faced with illness and death of nurse colleagues.

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REFERENCES

- American Nurses Association (2020). *ANA's president calls nurses "Warriors without armor" - Survey finds 66% lack adequate PPE*. Retrieved from <https://nurse.org/articles/american-nurses-association-ana-president/>
- Bailey, M., Gee, A., Jewett, C., Rao, A., Renwick, D., & Varney, S. (2020). *Lost on the frontline*, Kaiser Health News. Retrieved from <https://khn.org/news/lost-on-the-frontline-health-care-worker-death-toll-covid-19-coronavirus/>
- Cook, T., Kursumovic, E., & Lennane, S. (2020). Exclusive: Deaths of NHS staff from COVID-19 analysed. *HSJ*. Retrieved from https://www.hsj.co.uk/exclusive-deaths-of-nhs-staff-from-covid-19-analysed/7027471.article?utm_source=t.co&utm_medium=Social&utm_campaign=newsfeed
- Minder, R., & Peltier, E. (2020). *Virus knocks thousands of health workers out of action in Europe*. Retrieved from <https://www.nytimes.com/2020/03/24/world/europe/coronavirus-europe-covid-19.html>
- Nugent, C. (2020). 'It's like being a war medic'. *A Madrid doctor speaks out about grave shortages in protective gear*. Retrieved from <https://time.com/5813848/spain-coronavirus-outbreak-doctor/>
- Rodriguez, A., & Reyes, L. (2020). *Nurses read names of colleagues who died of COVID-19 in protest at the White House*. Retrieved from <https://www.usatoday.com/story/news/nation/2020/04/21/us-nurses-who-died-coronavirus-honored-white-house-protest/2996839001/>
- Round, I. (2020). *Nurse at FutureCare's Randallstown nursing home dies of Covid-19*. Baltimore Brew. Retrieved from <https://baltimorebrew.com/2020/04/16/exclusive-nurse-dies-of-covid-19-at-futurecare-s-randallstown-nursing-home/>
- The Guardian (2020). *Ten California nurses suspended for refusing to work without N95 masks*. Retrieved from <https://www.theguardian.com/world/2020/apr/16/santa-monica-nurses-suspended-n95-masks-coronavirus>
- The Local (2020). *More than 100 doctors have now died in Italy's coronavirus outbreak*. Retrieved from <https://www.thelocal.it/20200409/more-than-100-doctors-have-now-died-in-italys-coronavirus-outbreak>