

SENSES OF HOPE OF NURSING PROFESSIONALS IN THE CONTEXT OF THE COVID-19 PANDEMIC

SENTIDOS DE ESPERANÇA DOS PROFISSIONAIS DE ENFERMAGEM NO CONTEXTO DA PANDEMIA DA COVID-19

SENTIDOS DE ESPERANZA DE LOS PROFESIONALES DE ENFERMERÍA EN EL CONTEXTO DE LA PANDEMIA COVID-19

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ABSTRACT

Objective: to understand the meanings to hope attributed by Nursing professionals in the context of the COVID-19 pandemic. **Method:** this is a qualitative, exploratory study with 719 Nursing professionals from five geographic regions of Brazil. Data were collected between April and June 2020, via a virtual questionnaire consisting of sociodemographic data and an open question. Iramuteq software was used to process the data. Thematic content analysis and the hope model were adopted as an interpretive theoretical basis. **Results:** the meanings of hope are expressed in ambivalent feelings, which are overcome through spirituality and religiosity, which constitute strategies that promote hope. Interpersonal relationships and solidarity actions strengthen hope. Nursing professionals support their hopes in science, faith, and the potential of the health team. **Conclusion:** such meanings promote learning and reflections on the meaning of life, helping Nursing professionals to overcome the adverse daily life and take ownership of strategies that promote hope and resilience.

Keywords: Hope; Nursing; Nursing; Team; COVID-19; Qualitative Research.

RESUMO

Objetivo: compreender os sentidos atribuídos por profissionais de Enfermagem à esperança no contexto da pandemia da COVID-19. **Método:** estudo qualitativo, exploratório, com 719 profissionais de Enfermagem de cinco regiões geográficas do Brasil. Dados coletados entre abril e junho de 2020, via questionário virtual composto de dados sociodemográficos e uma questão aberta. Foi utilizado um software Iramuteq para processar os dados. Adotaram-se a análise de conteúdo temática e o modelo de esperança como base teórica interpretativa. **Resultados:** os sentidos da esperança se expressam em sentimentos ambivalentes, que são superados por intermédio de espiritualidade e religiosidade, que se constituem em estratégias promotoras de esperança. As relações interpessoais e ações de solidariedade fortalecem a esperança. Os profissionais de Enfermagem sustentam suas esperanças na ciência, na fé e no potencial da equipe de saúde. **Conclusão:** tais sentidos promovem aprendizados e reflexões sobre o sentido da vida, ajudando os profissionais de Enfermagem a superar o cotidiano adverso e apropriar-se de estratégias promotoras de esperança e de resiliência.

Palavras-chave: Esperança; Enfermagem; Equipe de Enfermagem; COVID-19; Pesquisa qualitativa.

RESUMEN

Objetivo: comprender los significados que los profesionales de enfermería atribuyen a la esperanza en el contexto de la pandemia de COVID-19. **Método:** estudio cualitativo, exploratorio con 719 profesionales de enfermería de cinco regiones geográficas de Brasil. Datos recolectados entre abril y junio de 2020, mediante un cuestionario virtual compuesto por datos sociodemográficos y una pregunta abierta. Se utilizó el software Iramuteq para procesar los datos. El análisis de contenido temático y el modelo de esperanza se adoptaron como base teórica interpretativa. **Resultados:** los sentidos de la esperanza se expresan en sentimientos ambivalentes, que se superan a través de la espiritualidad y la religiosidad, que constituyen estrategias que promueven la esperanza. Las relaciones interpersonales y las acciones solidarias fortalecen la esperanza. Los profesionales de enfermería apoyan sus esperanzas en la ciencia, en la fe y en el potencial del equipo de salud. **Conclusión:** dichos sentidos promueven el aprendizaje y la reflexión sobre el sentido de la vida, ayudando a los profesionales de enfermería a superar la vida cotidiana adversa y a apropiarse de estrategias que promuevan la esperanza y la resiliencia.

Palabras clave: Esperanza; Enfermería; Grupo de Enfermería; COVID-19; Investigación Cualitativa.

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INTRODUCTION

The COVID-19 pandemic has caused suffering in the lives and work of health professionals in countries that do not experience daily situations of great tragedies and deaths resulting from wars, mass migrations due to calamity, for example. Therefore, the ability of these frontline professionals to hope in countries without these characteristics is peculiar. In the case of Nursing professionals, this pandemic has produced expectations and a desire to return to their daily lives, but many find themselves hopeless¹ and unmotivated. However, they can find positive motivating forces to face and overcome adverse situations and rediscover hope-promoting alternatives that enable them to visualize positive perspectives and find the desire to live.²

Hope is closely linked to the person's condition of making plans, putting them into practice, and believing in their performance.³ It can have a beneficial effect on people's health, be the exit from the cycle of suffering, be a predictor of well-being subjective and mental health, regulating symptoms of anxiety/depression^{4,5} and when experienced as comfort,⁴ it permeates spiritual experiences^{5,6} and predicts satisfaction with life.²

Understanding the experience of hope in the context of mental health is related to positive future expectations, which involve optimistic beliefs for people to change from an adverse situation. It constitutes one of the psychosocial coping resources in the management of mental suffering and symptom control.⁵

Related to the clinical practice of Nursing, it allows the professional to help the patient/family to recognize their potential and strengths.^{2,7} It is part of human existence and is associated with personal, professional, family, and social dimensions, which makes it relevant for people's mental health² and, in this case, for Nursing professionals.

In the current scenario of the COVID-19 pandemic, Nursing professionals have been facing complex situations of emotional and physical overload, in a context of precarious working conditions,⁸ which requires activating internal and external resources that mobilize hope. To contribute to the construction of knowledge about the scope of the COVID-19 pandemic in the reality of the professional category of Nursing, we sought an answer for the following question: how Nursing professionals attribute meanings to hope in the experience of the pandemic of COVID-19? The objective of this study is to understand the meanings attributed by Nursing professionals to hope in the context of COVID-19.

METHOD

Hope, as a construct and object of study in the field of Psychology and Psychiatry, had other theories and theorists, in addition to the Hope Model, such as, for example, the American psychologist Charles R. Snyder, who developed the Theory of Hope based on from 1990. For him, hope involves positive motivation, therefore, believing in oneself and in the abilities to achieve goals and thinking about planning to achieve them.⁹

However, this study is based on the theoretical reference of Dufault and Martocchio's Model of Hope.¹⁰ Here, hope is understood as a dynamic and multidimensional life force, which involves a sense of confident expectation to reach a significant goal,¹⁰ providing empowerment when relating to external support, care, and spirituality.⁵ It can be understood in two spheres: generalized hope, which is related to the sense of some future benefit of uncertain development; it is broad and dissociates itself from the concrete or abstract object of hope. Particularized hope is related to hope as an object, which can constitute a particularly important objective, a good or a "state of soul".¹⁰

Hope is made up of six dimensions: a) affective dimension, which encompasses a series of emotions and feelings, sometimes opposites, in which there is attraction for the objective to be achieved, but also includes uncertainty and suffering; b) cognitive dimension related to the process by which the person desires, imagines, interprets and judges in relation to hope; with the perception of realistic desire for the future;

c) behavioral dimension is related to the action that seeks the objective related to hope in the physical, psychological, social and spiritual scope; d) affiliative dimension, which includes components of social relationships, interdependence, mutuality, affective bonds and intimacy, in which hope is demonstrated by people when expressing concern for themselves, with other people, with humanity and with God; e) temporal dimension involves the experience of each person in the present, past and future, in which hope is directed towards the future, although influenced by the past and the present; f) contextual dimension, which refers to the situations of life and environment that surround, influence and constitute part of the person's hope.¹⁰

This study is qualitative, exploratory research, nationwide, with Nursing professionals from different levels of health care, regardless of the professional performance scenarios, except those absent from the national territory during collection. Five duplicate and incomplete interviews were discarded.

We collected data from April to June 2020 using the "snowball" method. A Google Forms link was available on social networks (Facebook, Instagram, and Twitter) built by the researchers (nurses and university professors, a master's degree in health and seven PhDs in Nursing), consisting of sociodemographic data and the question: report the experiences as a Nursing professional in the COVID-19 pandemic. This instrument was evaluated by all researchers involved in the research, as well as by a nurse who worked in direct assistance to COVID-19, giving an opinion on the clarity of the questions. Participants were identified as "interviewed (I)" and numerical sequence of the questionnaire return (I1).

The IRaMuTeQ[®] software (R interface pour Les Analyzes Multidimensionnelles de Textes et de Questionnaires) was used to process the reports, through classical textual analyses.¹¹

Thematic content analysis was carried out,¹² and the sentences with meanings about hope, coping mechanisms, and factors that promote hope were coded, grouped, and regrouped into themes, which were related to the descriptions of each dimension of hope,¹⁰ considering that it appears that several dimensions permeated several themes.

We carried out the description of the meaning of each theme, identifying its essence and naming it to express it¹², based on the six dimensions. The constitution of the analytical narrative and elaboration of interpretative syntheses¹² were based on the respective theoretical framework¹⁰ and on literature that addressed the theme.

Four researcher-nurses specialized in the subject evaluated the reports and themes to guarantee the aspects of validity and reliability of the final result.

The study complied with the ethical precepts of Resolution 510/2016 of the National Health Council (*Conselho Nacional de Saúde*) and was approved by the National Research Ethics Commission (*Comissão Nacional de Ética em Pesquisa*) Opinion number 3,954,557. All participants signed a virtual Informed Consent Form.

RESULTS

A total of 719 professionals answer the survey, with a predominance of females (87.1%), mean age 37.9 years old, married (40.6%), white (47.7%), Catholic (45.5%), and Evangelical (23.5%). They are nurses (79.3%), Nursing assistants/technicians (20.2%) and midwives (0.5%), from the Southeast (32.3%), Northeast (26.8%), North (17.9%), Midwest (13.8%) and South (9.2%), work in direct patient care (65.6%) and had acquaintances with COVID-19 (70.9%).

Data analysis provided the emergence of five themes due to the six dimensions, according to the interpretive theoretical basis¹⁰ (Figure 1).

Building hope from ambiguous and contradictory feelings and emotions

Despite the ambivalent feelings and emotions that impact Nursing professionals, there is a hopeful feeling mobilized by inner and/or superior strength, by faith and perseverance, which helped them to proceed in the face of uncertainties and obstacles, withstand and overcome adversity.

Fear, anguish, perseverance, faith and hope, mixed feelings (I493).

I try to run away from feelings of loss, sadness, but they follow me, despite all this, I feel stronger and better able to withstand adversity (I590).

I was afraid to go back to work, I clung to God, I asked Him to give me strength, because I had to go back, in my mind He would take care of everything (I604).

Even with feelings of ambivalence, professionals build hope based on an optimistic perspective, of spiritual strength, and the desire that all adversities pass quickly and better days emerge.

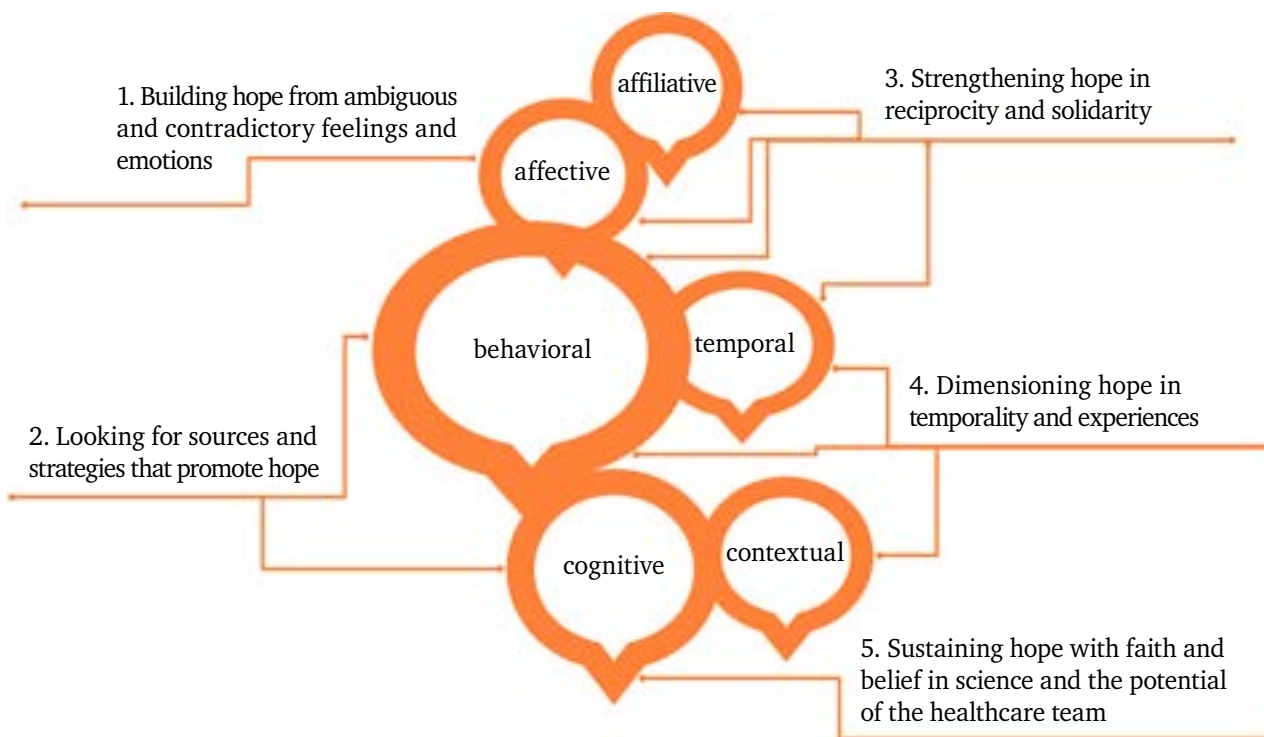


Figure 1 - Themes about the meanings of hope elaborated and articulated according to the dimensions of the Hope Model⁹
 Source: elaborated by the researchers.

I continue with hope, I know that we are going to make it through this, even though I know that many have left their lives as payment (I509).

Sometimes I'm afraid of the future, but I'm sure of victory, I link my thoughts to God, the Superior force that rules and guards us, I keep going, looking for better and better days (I388).

Searching for sources and strategies that promote hope

Professionals use hope-promoting strategies to strengthen the spiritual and religious aspect, through integrative/complementary practices, prayers, and leisure.

Very apprehensive about the situation, linked to the news; As the days went by, I let go and started doing various activities, praying, reading, listening to music, watching movies, studying, shopping for food (I534).

Strategies that helped me succeed were strengthening my spirituality, doing mindfulness, and aromatherapy (I31).

Strengthening hope in reciprocity and solidarity

Hope is strengthened in the expression of concern for oneself and others, concern for co-workers, compassion or concern for peers and family members, demonstrating feelings of reciprocity and solidarity.

I haven't lost any close colleagues yet, but I feel sorry for the others who lost their lives working in the health area (I450).

I think about everyone and I am worried, I'm trying to think positively and take good things out of this moment (I454).

The strengthening of hope involves attitudes of solidarity and benevolence towards others, whether professional colleagues and/or patients or when forming community support groups.

Just worrying about helping others; I set up an institution with friends to help needy families; we deliver food baskets and clothing; I feel useful in doing good for these people (I517).

For the professionals that I continue, I go ahead and fight to do the best I can; my learning is that I won't be able to do everything and help everyone, but I can do the best I can (I377).

The sense of hope involves the desire that the pandemic will pass soon and that everyone will remain united with the people they love.

I hope that everything passes, ends well and we can spend a good time together with those we love, admire and live with (I600).

I just ask God every day that all this will pass soon and that I don't lose anyone important to me (I450).

Dimensioning hope in temporality and experiences

Hope is related to the sense of establishing attainable goals in the temporal and experiential dimensions, performing daily and pleasurable tasks, and acquiring personal growth and maturation. Such experiences transform professionals and mobilize their senses about life and their relationships.

I'm living more than ever one day at a time, because it's a fact that we don't have ready-made answers, and as much as we're used to dealing with contingency, we don't know what's real awaiting us! The only certainty is that it will pass and we will come out different! (I25).

It's been an experience of growth and maturation as a person, I've been doing what I like, tidying up the house, cooking, reading to the children, watching TV with my husband (I700).

The life experience of the participants and the contexts in which they live influence hope, as an attitude oriented towards the future. They can reflect on their personal and professional experience in the past, which can involve daily work situations, attribute a positive meaning to adversity and transform subjects and their lives.

I was infected and the best remedy was optimism and imposing myself that I would be fine (I664).

Transforming these reflections into more pleasurable ways of life, and here I am referring to the entire complexity of existence, will certainly be extremely positive, that is not to say, that it will not be a painful process [...] to undo, deconstruct and remake itself in this very peculiar experience that we are living (I252).

By giving meaning to life events, professionals reflect on their existence as human beings and their role as a professional, even if they use spiritual and/or religious coping.

I believe that acting on the front lines of this pandemic made me a better human and professional human being (I644).

Feelings of sadness and anxiety arose when witnessing colleagues who died, we bonded more, we started to value life more and to love people more; we continue in the battle and with the thought that this will all pass (I653).

I count on the help of my family members, sometimes uncertainty about things takes over, especially in the work, I see how vulnerable we are, but I keep thinking positively and trying to strengthen myself day after day (I83).

We cannot abandon the profession to which God has entrusted us, nor patients at such a difficult time. It is asking for Divine strength and protection every day so that we can act with prudence and discernment in the face of different life-threatening situations [...] We will win! (I138).

Sustaining hope with faith and belief in science and the potential of the healthcare team

Professionals understand that they have a belief/faith in science regarding the discovery of resources for coping, curing, or controlling the coronavirus and believe in the capacity and potential of the health team in the pandemic context.

I believe in science, in the strength and commitment of health professionals (I268).

We have excellent professionals and scientists, the health team is very committed, the difficulties are many, I see that there is work by many to avoid chaos (I79).

Everything is very confusing, but what I feel most is the hope of a cure (I106).

DISCUSSION

The meanings attributed by professionals to hope in the pandemic scenario involve ambivalent feelings, which are overcome through spirituality and religiosity, which constitute strategies that promote hope,

suggesting that this is strengthened in relationships and solidarity actions with peers, patients, family, and community. Experiencing adverse situations of the pandemic impacts hope provides learning and reflections on the meaning of life and attitudes oriented towards the future. Despite this and contextual uncertainties, professionals support their hopes in science, faith, and the health team's potential.

In the first theme, despite the ambiguous feelings, professionals struggle incessantly between the need to keep hope alive and the fear of losing it. There is an affective dimension of hope, as it contemplates positive emotions and feelings, and feelings of uncertainty that trigger fear, anguish, and sadness.¹⁰ We believe that, when they present attitudes of hope, they can resist physical and psychic adversities.

Hope is perceived as strength in two perspectives: one as a personal attribute and the other as a Superior Being, both capable of positively stimulating the person to overcome the adverse situation experienced,⁴ used as a coping mechanism.

The reports suggest the expectation that the strength coming from the Superior Being can intervene and take care of everything, and affirm that God takes care of everyone. Hope in the theological perspective understands the Divine as the person's object of hope.⁷ In the spiritual aspect, understanding spirituality as related to the set of values and meaning that give meaning to life,¹³ its is used as a coping strategy by professionals, as it promotes well-being and improved quality of life.¹⁴

Despite the ambivalent feelings, we can deduce that hope is built and perceived in the spiritual aspect in an optimistic way and prospects for a future in which the pandemic will pass soon, prompting professionals to carry out actions aimed at the goals of hope. These feelings are understandable, considering that hope is a subjective human experience, which promotes spiritual well-being,⁷ as well as sustains professionals by motivating them to develop plans.⁸ Therefore, faith and hope are essential to life, enabling and strengthening the person to perceive themselves in control of their existence.^{7,15}

In the second theme, in the behavioral dimension,¹⁰ professionals seek motivation and take actions to achieve desired results, that is, maintain mental health, reduce anxiety and strengthen spirituality through religious practices, integrative activities, leisure, entertainment, and relaxation.

The cognitive dimension involves intellectual processes that enable professionals to identify the goal and/or desired result of hope, assess the work and life context, as well as identify factors that promote and inhibit hope so that they can establish goals and targets to achieve them.¹⁰

For professionals, the sense of hope can be seen in the philosophical perspective (spiritual and faith), which involves values and transcendent connection practices that help professionals to face, support, and overcome daily situations of suffering in the work and personal panorama.¹⁶ In the psychological view, hope presupposes motivation that promotes expectations and probabilities for behavioral actions, to seek and achieve answers to the desired and proposed goals.⁴ We noticed that professionals desire to maintain mental health and strengthen spirituality and religiosity to minimize psychic suffering. Such actions and desires constitute strategies and sources of hope.

From a theological perspective, we understood that human beings trust in divine goodness and omnipotence³ and, therefore, God becomes their object of hope.⁷ For professionals, faith, and prayer bring them closer to God, Who can hear them and intervene in the pandemic situation since 69% of the participants are Christians. The literature emphasizes that human beings believe that salvation depends on God. Therefore, faith allows one to have and maintain hope,⁷ and as a supreme force, it can be accessed transcendentally through prayer.¹⁶ Spirituality promotes support through faith and belief in a Superior Being who strengthens the person to face and give meaning to life, through the practice of prayer, meditation, music/art that restore spiritual strength and promote resilience.¹⁶

The third theme addresses that hope is built and strengthened through interpersonal relationships of solidarity and mutuality, which corroborates the affiliative dimension, as it encompasses components of social relationships, interdependence, mutuality, affective ties, and intimacy.¹⁰

The experience of professionals in the pandemic context involves the temporal dimension,¹⁰ in which the past and present provide positive feedback, subsidize the future and create an emergency desire in the professional that the pandemic will pass soon and that normality is anticipated, corroborating the study.⁸ In this way, religiosity and spirituality contribute to mental health as coping mechanisms,¹⁷ to help professionals with their feelings, as they exert a motivating force and are resources of hope that enable them to transcend and transform reality.

Even with the security measures and social distancing imposed by the pandemic, it is clear that professionals rediscover the value of affective bonds, the union of family members, their support networks, the simple gestures of relationships, and daily actions and practices solidarity that involve affective, affiliative and behavioral dimensions of hope. Considering these dimensions in the pandemic, these professionals promote hope for themselves and others by feeling useful, cooperative, compassionate with their peers, socially vulnerable people, and they are hopeful to fulfill their wishes through solidary actions and support.

These findings corroborate the literature^{18,19} by stating that the pandemic has aroused meanings in life directed towards hope when Nursing professionals value situations of meeting between people and recognize situations of individual and collective vulnerability. They exercise their spirituality, which awakens altruism, which is revealed in the recognition of the needs and lack of people around them, and simultaneously manage to minimize their negative emotions and strengthen valuing feelings of human beings.¹⁸ Furthermore, tragic situations arouse humanitarian feelings in people, like compassion and generosity, mobilizing them to help their peers recover and rebuild their lives.¹⁶

In theme four, hope is based on the sense perceived by the person about the events of life in relational processes and not just in isolation,⁴ as well as the contextual dimension, impacts the person's hope.¹⁰ Hope is an element that stimulates the human being in its existence, it allows for the feeling of an optimistic future,²⁰ it is nourished, moved, and maintained by optimistic feelings that contribute to developing successful plans in the pursuit of realistic goals, which often became effective and efficient in the past, impacting the present and strengthen the belief in the future.¹⁰

For professionals who live one day at a time, the temporal dimension means experiencing adversity in the present and projecting hope for the future.¹⁰ Thus, planning objects and goals of hope for the future enable us to identify and carry out actions that make it happen, which is related to the behavioral dimension.¹⁰ We believe that the experience of situations of pain and suffering by professionals can trigger a redefinition of these moments and generate different and new purposes and priorities.

This professional category, when viewing the risk of imminent death, perceives the preciousness and value of each day and clings to simple and everyday things. Nursing needs to incorporate the pandemic experience into their lives, strengthen the relational interconnections between their peers, family members, and community, since learning in the past and present pandemic can strengthen it and generate hope for the future.¹⁶

The fifth theme permeates the sphere of particularized hope when the professionals' reports highlight the expectation and desires of improving the future in the present. Since there is an object of hope that is both concrete (COVID-19's vaccine and cure) and abstract (feelings and faith), themes that transcend reality and matter are perceived. In this way, particularized hope can be valued in the present and be part of the future. Professionals identify priorities to preserve or rebuild new meanings for their lives. From this perspective, hope can be understood as an attitude directed towards a promising future, which helps them to overcome adverse situations, with cognitive projections of a future of possibilities and achievements.²¹

The limitations of this study are related to the fact that data collection took place in the first wave of the pandemic and different distinctly affected regions. At that time, little was known about the disease and there was no emergency approval of a vaccine against COVID-19.

However, the results contribute to helping public and private institutions in the elaboration of intervention strategies to support Nursing workers, promoting mental health and management of psychological distress. They enable us to understand hope as a driving force and competence for professional practice when professionals appropriate this knowledge to assist them in providing care. Also, the theme of hope can be included in academic and professional Nursing education. We suggest further research to measure the hope of this population, with the application of the Herth Hope Scale.

CONCLUSION

The meanings given by Nursing professionals to hope in the context of COVID-19, despite permeating ambivalent feelings and emotions, promote learning and reflections on the meaning of life that help them to overcome the adverse daily life, appropriating hope-promoting strategies and resilience involving areas of spirituality and religiosity.

Given the pandemic context, the hope of Nursing professionals is built by solidarity and altruistic attitudes, which lead them to rediscover the value of affective bonds, support networks, relationships, and daily actions. Despite the uncertainties of the moment, the professionals' hope is based on science, faith, and the health team's potential.

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