

SYSTEMATIC REVIEW: JOB BURNOUT AMONG NURSES IN THE TIME SPHERE OF COVID 19 PANDEMIC

1. Mr. Sharin Koshy Varghese Research scholar, Martin Luther Christian University, Shillong, India ORCID id: 0000-0001-7942-2684 sharinkyarghese@gmail.com

 Dr. Shiju K K, Guest faculty,
 Centre for Yoga and Naturopathy, Mahatma Gandhi University, Kerala shijukkhere@gmail.com

> Corresponding author: Mr. Sharin Koshy Varghese Research scholar, Martin Luther Christian University, Shillong, India sharinkyarghese@gmail.com

ABSTRACT

Nurses frequently engage with COVID-19 patients and become vital to the health system's response during the pandemic covid 19. Additionally, nurses endure severe psychological and mental issues due to the increased danger of infection, which may induce burnout. This study aims to review the reasons for job burnout and its prevalence in the sequence of the COVID-19 pandemic between nurses. Guidelines are followed for preference of the reported items in the meta-analysis and systematic review called "PRISMA."The following search terms, "burnout," "nurse," and "COVID-19," were used to access the data from different PubMed databases online, Scopus, and using Google Scholar. The articles were retrieved from 1st February 2015 until June 2020. Following evaluation quality, retrieving of necessary data and then examining. Twenty-five articles were entered into the analysis initially out of a total of 115 articles that were identified. Nurses faced a considerable amount of burnout during the Pandemic, and several articles have reported that. Fear, anxiety, and depression were associated directly with higher burnout ratesamongnurses in the time periodof COVID-19

INTRODUCTION

The coronavirus, commonly known as *COVID-19*, is an outbreak of the disease in 2019 worldwide. "*SARS-CoV-2*" or "severe acute syndrome of respiratory" are reasoned by coronavirus two that brought this "*COVID-19*" pandemic in the year 2019. An epidemic in a city named Wuhan in China led to the novel virus's discovery. It has further expanded globally as a result of failed attempts to detect it. "*WHO*" previously claimed it was anepidemic on 30th January 2020 and again on 11th March 2020, and they called it an international emergency for the public health concern. As of 24th June 2022, this Pandemic was named one of the deadliest in history, showing 6.32 million death cases and 542 million illness cases.

HCWs or "Health Care providers" have presented an intense-risk group for the infection of SARS-Cov-2 as they are more seroprevalence than the general population globally. (Chen et al., 2020) (8.7 percent as compared to 5.3 percent). Data from meta-analysis up to 8th May 2020 shows 259 nurses among 1024 accounted for COVID-related deaths of 25.3% for workers' health care. It also shows that their mortality risk is highest among nurses with mental health (Bandyopadhyay et al., 2020).

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According to various meta-analyses and systematic reviews, mild burnout to severe burnout syndrome is revealed. (Adriaenssens et al., 2015; Lopez-Lopez et al., 2019; Gomez-Urguiza et al., 2016; De la Fuente-Solana et al., 2019; Owuor et al., 2020) Multiple rates of burnout syndrome show different areas of geophysics and specialist professionals. uppermost rate for Burnout symptoms had been mainly enlisted in sub-Saharan Africa. The data showed the lowest sign of Burnout in Europe and Central Asia (Woo et al., 2020; Owuor et al., 2020). the DepartmentofCancer Pediatrics, emergency burnout symptoms among nurses have seen the most significant prevalence. (Parola et al., 2017; Gomez-Urquiza et al., 2016; Pradas-Hernandez et al., 2018). Additionally, burnout of nurses' patients and health workers has become a general problem of health as well as a severe negative impact.

The nurses play instrumental roles in response to the health protocol related to the Pandemic as they are nominated as the front-line people implicated in the care and treatment of the patient. (Liu et al., 2020: Hu et al., 2020; Zhan et al., 2020). Since the nurses are exposed significantly to the threat of SARS-CoV-2 infection, they are under immense physiological pressure. They become tense with fear for their safety for, their health, their parents, and close members of the family (Joo& Liu, 2021). Nurses experience various mental and physiological problems that are responsible for burnout, along with clinical errors, lower productivity, and less concern for the handling of patients. (Al Magbali et al., 2021; Pappa et al., 2020). The outbreak of this epidemic had a primary collision on the physiological well-being of individuals for their health globally Godinić&Obrenovic, 2020).

Materials and Methods

In 2022, a systematic analysis of papers reporting the factors along with prevalence contributing to nursing being used upfor the COVID-19 epidemic was done. The favored reporting substancefor meta-analyses guidelines and systematic reviews were mentioned while writing the current study.

Search strategy

Through the databases of Scopus, and Google Scholar, PubMed pertinent studies were found. In order to discoverrelevant publications, the snowballing method of examining the bibliographies of retrieved references was used. The study covered papers that were released between February 2015 and June 2022. Burnout, nurses, and COVID-19 were used in a direct search. To reduce or extend the scope of search results, the Boolean operators "AND" and "OR" were utilized. Articles were incorporated if they were unique research papers, published between 1st February 2015 and June 2022 in English,

and included data on the prevalence along with factors that donate to nursing be exhausted both before and for the period of the COVID-19 outbreak.

Study selection

Two writers checked all the abstracts and found titles of duplicating records. The final study selection was made after an independent review of the whole texts of all possibly relevant studies. The inclusion criteria were satisfied by the articles chosen. The articles in the publications discussed burnout's prevalence and causes and any relevant supporting data deemed appropriate for meta-analysis. We selected articles that discussed how common burnout was amongst healthcare stafffor the duration of the outbreak of COVID-19. The aforementioned actions were repeated twice.

Data extraction

Characteristics of the study had been extracted from the eligible year or authors, articles, method, and design. The size of the sample or the meanof age was used along with the method analysis and findings for measuring burnout among the nurses with the value of p.

Data synthesis

The results (n =115) were transferred to the software of EndNote (version X7), and the titles, along with the abstracts, were individually filtered by two researchers for the duplication of their records. Additional papers were found through hand penetrating the lists about the reference of eligible articles. Two researchers independently evaluate the quality of regained studies with the use of a checklist that are included in the methodology of the research along with the size of the sample, reliability and validity, instruments of data collection, statistical tests, collection of non-based data, and the software.

Design of the study, publication year, country, author, size of the sample, process of sampling, the prevalence of burnout, main results, factors and causes that affect burnout, and the conclusion had been extracted from the articles that were retrieved with utilizing the data collection of data form. Competing essays related to all principles related to ethics were observed during the extraction of data from the above-mentioned articles.

Inclusion Criteria

English-language articles were included. Articles based on a credible and trustworthy research tool and relevant to the research issue were included. Only peer-reviewed articles were chosen. Cross-sectional, cohort studies and case-control studies were among the original articles included. Also included are review studies.

Exclusion Criteria

Studies exploring the amount of suffering

exhaustionamong the residents, medical students, plus others related to the science about health had been excluded, as were articles that did not address any of the research topic's aspects (prevalence and causes of burnout). Therefore, burnout had been evaluated with a single item along with the studies that assessed emotional exhaustion and that had been omitted. Burnout of specific experts or wards was also revealed in the reports (other than specialists in intensive care units as well as infectious diseases who may have straightgot in

touch with COVID-19 victims.)

RESULTS AND DISCUSSION

The studies systematically reviewed correlated to Job burnout amongst nurses during the Pandemic were off record into three divisions: Studies related to the incidence of job burnout between nurses, causes of job be exhausted, and solutions for job burnout about nurses through covid 19 pandemic.

Studies related to the occurrence of job burnout between nurses during covid 19

Table 1: Studies related to the frequency of job burnout between nurses at some stage in covid 19

Authors	Years	Topic	Results
Yu, H., Jiang, A., &Shen, J.	2016	Predictors along with the prevalence related to the comparison of burnout and fatigue along with satisfactioncontrast among the nurses working within oncology department is included in the cross-sectional survey.	 Nurses in oncology department having more years about nursing experience had deployed in hospitals that are secondary along with also utilized mechanisms of coping with higher compassion of burnout and fatigue
Parola, V., Coelho, A., et al	2017	Generality of the level of burnout for the professionals in health working within palliative care and considered as review through systematic.	 Higher level of exhaustion emotionally found (19.5%) along with Depersonalization. Among the social workers it had found burnout common.
Pradas-Hernández, L., Ariza, T., et,al	2018	For pediatric nurses' ubiquity of burnout has been found, and it a counted under meta-analysis and systematic review.	 A huge amount of nurses confinedas the pediatric nurse had lower self-actualization levels. This was moderated to theelevated depersonalization of weariness emotionally. Nurses were found with a higher risk of burnout that developed in them.
Kandelman et al	2018	Factors of risk related to burnout among the health personnel in the clinical arena.	 Among them, about 40 percent of caregivers in the nursing home had faced the experience of burnout.
Lopez-Lopez, I. M., Gómez-Urquiza,et al	2019	Occurrence about burnout issues within nurses associated with their mental health and the factors of risk: a metanalysis along with a systematic review	The rate of burnout, as found from the finding about mental health, has been related to 15 percent of depersonalization, and 25 percent of emotional weariness
Barello, S., Palamenghi, L., &Graffigna, G.	2020	Somatic symptomsandburnout between the healthcare workers in the front-line at a high level during the Pandemic of COVID-19 regarding Italian	 Caregivers who worked closely with the patients suffering from the coronavirus have found higher burnout levels and symptoms of somatic.

Deying et al	2020	The anxiety level of front- line nurses and level of fear and depression status, and their related factors of coronavirus spreadwithinthe city of Wuhan, China. It is a study related to cross-sectional on a large scale.	_	Several mental health issues that the front-line nurses faced, particularly burnout and terror, demand the attention and support of policymakers.
Guixia, L., &Hui, Z	2020	A project on the top of nurses'burnout within covid 19 time sphere.	-	Clinical nurses experience varying levels of burnout for the unique of nursing professionnature. The fight by COVID-19, this is a daunting task, along with nursing burnout may be less common than it once was.
Owuor, R. A., Mutungi, K., et,al	2020	A review regarding systematic shows frequency of burnout amid the sub-Saharan Nurses of Africa.	-	The emotional prevalence tiredness belonged from 33% to 100%.
SohamBandyopadhy ay	2020	Rate of mortality and infection of the caregivers globally from coronavirus.	_	Women (n=14 058, 71.6%) along with nurses (n=10 706, 38.6%) had the infectionsmajority, whereas men (n=550,70.8%) along with doctors (n=525,51.4%) had the majority of deaths.
Zhan, Y., Ma, S.,Jian, X.,	2020	The present situation along with the factors that influence job stress among the nurses working in the front-line in Wuhan city of China assists the fight against COVID-19.9		The COVID-19 epidemic's clinical front- line nurses were discovered to be under moderate work level-related pressure.
Liu and Zhang	2020	Providing support to the nurses working in the front-line during the fight of coronavirus	_	Nurses working from front-line cares the patients are more often exposed to the risk factors of getting affected with coronavirus during intimate contact with the patients. Additionally, when they commit to giving excellent nursing care, they face psychological challenges.
Pappa, S., Ntella, V., et,al	2020	AnxietyIncidents, and depression amid the caregiversin the period of theepidemic situation	-	According to the findings, at least one in five medical workers report experiencing signs of despair and anxiety. Nearly four out of five healthcare professionals have trouble falling or staying asleep.
Hu et al., 2020; Liu et al., 2020; Zhan et al., 2020	2020	Appearance of vicarious trauma among the common people, a non-member of medical and member of medical team aiding control of coronavirus.		The findings showed that front-line nurses experienced vicarious traumatization to a greater degree than non-front-line nurses, and that married and divorced or widowed nurses experienced vicarious traumatization to a greater degree than unmarried nurses.

Gomez-Urquiza et al., 2016; Parola et al., 2017; Pradas-Hernandez et al., 2018	2021	In the time sphere of theepidemic, burnout among nurses are associated with various risk factors and associated risk factors: A meta-analysis and systematic review	 Nurses experience remarkable burnout during the situation of Covid epidemic that is influenced by factors such as occupational, socio-demographic, and social.
Al Maqbali et al., 2021; Pappa et al., 2020; Salari et al., 2020	2021	Occurrence off depression, disturbance of sleep, and stess for the nurses during COVID-19: A systematic review along with metaanalysis	 Nurses about one-third experienced psychiatric problems according to this meta-analysis in the time sphere of the outbreak of COVID-19.
Chen et al., 2020	2021	Human infection as serological evidence related to SARS-CoV-2: asystematic review as well as meta-analysis.	 Near contacts with plushealthcare ofhighrisk professionals had upper seroprevalence than healthcare's low-risk workers as well as the normal population in the 82 studies of better quality. The included studies had a significant degree of heterogeneity, with an overall I2 of 99.9% (p 0.0001)
DanetDanet A	2021	COVID-19 has an impact connected to Psychological on front-line caregiver professionals about western. It is a systematic review	 Front-line workers, women, and people in the nursing profession all reported experiencing symptoms more frequently and more severely.
Gualano, M. R., Sinigaglia, et al	2021	Amount ofburnout burden betweenthe healthcareprofessionals for emergency along with units of Intensive Care during the Pandemic	The findings imply that nurses of ICU/ED experience burnout at a higher rate as compared to other professionals.
Martínez et al	2021	"Workers of Direct-care" suffered from burnout within nursing home in the time sequence of the epidemic in the European country, Spain: It focuses on sustainable education in the workplace and it is preventive also.	 The study's findings indicate minimal burnout degree but abnormally high levels of emotional exhaustion. In the long term along with medium, this may put workers who work in the middle of residentialsectors at risk of developing mental problems.
Galanis, P., Vraka, I., et al	2021	Burnout among nurses, along with the risk factors, are associated with pandemic disease.	 Nurses' experiences remarkable burnout level during the situation of Pandemic and it also influences the factors of social, socio-demographic and occupational
Kunz, M., Strasser, M., & Hasan, A.	2021	Caregivers are affected during the disease of coronavirus, and it is a comparison of systematic review between doctors and nurses.	- at COVID 19epidemic, workers experience several symptoms of melancholy, anxiety, as well as PTSD, necessitating the necessity for particular programs that cater to their needs.

Zareei M, 202	Burnout of jobsbetween	-	Nurses become	quite	burned	out,
TabanejadZ,et al.	nurses in the period of		according to the m	najority	of the res	earch
	Pandemic that is under a		during the Pandem	ic.		
	systematic review.					

Table 1 shows studies related to the occurrence of breakdown between nurses for their job during the Covid-19 situation. from the review of the studies it can be inferred that, before the COVID-19 epidemic, there seemed to be a significant frequency of burnout among oncology nurses, and it is likely that this prevalence has grown as a result of the Pandemic (Yu., Jiang., &Shen., 2016). According to Kandelman et al. (2018), 40% of nursing home caregivers experienced burnout before epidemic. Additionally, in the context of the Pandemic, nurses were reported to have had moderate burnout in four studies (57.14%) and severe levels of burnout in three studies (42.86%) (Zhan. et al. 2020, Zareei, et al. 2022, Gualano, et al. 2021,Barello al.,2020, et Lopez.et, al, 2019, Gomez-Urquiza et al., 2021, Pradas-Hernandez et al., 2021). Palamenghi, et., al. (2020), also reported that nurses burn out at high rates during the COVID-19 epidemic. Healthcare workers had a moderate level of burnout and a high level of fear and showed that 10.7%, 14.3% along with 91.2% of health workers accounted for high and moderate anxiety stages, fear and depression accordingly. The nurse's majority, around 94.8%, had single or not countable skin infections and nurses of 96.8%

described their work willingness of front-line (Hu et al., 2020).

The pandemic period had a high pace of nursing be used up, which was directly associated with anxiety and depression (Liu and Zhang, 2020). Overall burnout prevalence among nurses ranged from 49.3 percent to 58 percent (Gualano, et al., 2021). Quantitative studies from America and Europe reported ordinary and higher depression levels, levels of anxiety, disturbances of sleep, and breakdown. (Danet, 2021). According to numerous research, compared to medical experts, nurses experienced worse mental health outcomes than doctors did during the COVID-19 pandemic, which caused prevalence rates for nurses to frequently exceed 50% (Kunz, Strasser& Hasan 2021). Between 35 and 45 % of registered nurses in the US experience burnout, which poses a grim danger to the front-line staffstability as aCovid-19 outcome epidemic (David, 2020). During the COVID-19 pandemic, over half of the healthcare professionals burned out (Sulmaz et al, 2021), about nurses6.4%collapsed, 53.8% of them were expressivelytired, and 35.1% were found to suffer from depersonalization (Martínez et al., 2021).

Studies related to Causes of job burnout amongst nurses during the Pandemic.

Table 2: Studies related to Causes of job burnout in the middle of nurses during the Pandemic.

Authors	Years	Topic	Results
Kandelman, N., Mazars, T., & Levy, A	2018	aspects of risks between the professionals of healthcare working in the clinical areas.	Several factors of risks are found among the caregivers in nursing home.
Rebecca et al	2019	Well-being of nurses during the time of COVID and it is a study for longitudinal mixed methods.	Compared to other comparable samples from the pre-coronavirus-19 era, these nurses had higher burnout levels along withworse emotional levels and social, and psychological well-being.
Deying Hu, Yue Kong, et al.	2020	Burnout among front- line nurses brings depression, statuses and anxiety of fear and their related factors during the outbreak of the Pandemic in Wuhan city of China: It is cross-sectional study in large-scale.	According to this study, front-line nurses had a significant rate of sadness, burnout, anxiety, and fear. Nurses from the front-line wear PPE had experienced sores in skin quite frequently.

Hoseinabadi, T. S., Kakhki, et al	2020	Influencing factors of burnout and the nurses of front-line along with nurses from other wards during the COVID outbreak in Iran	Compared to other nurses, front-line nurses had a greater rate of burnout, and job stress was the main contributing cause.
Liu and Zhang	2020	Forefront supporting nurses in the fight against the outbreak.	Front-line nurses caring for patients with COVID-19 are more likely to be exposed to a higher risk of infection than doctors because of their frequent and intimate contact with patients. Additionally, when they commit to giving excellent nursing care, they face psychological challenges.
Di Monte, C., Monaco, S.,et al	2020	The breakdown from the resilience: General health professionals of Italy with the psychological features during the emergency of COVID.	The findings of this study indicated a bearing on GPs' ability to manage their workload during the COVID-19 emergency. It's likely that the emotions brought on by the Pandemic are too strong to control and use to deal with the work-related problems that the COVID-19 pandemic implies.
Adriaenssens et al., De la Fuente-Solana et al. Lopez-Lopez et al., Owuor et al., Gomez-Urquiza et al.,	2021	Breakdown of nurses along with the associated risk factors during thePandemic is a meta-analysis and systematic review.	Declination of support socially at a younger age with less support from family along with the coworker deals with the outburst of COVID. Increase of threats related to the coronavirus in the areas of quarantine, professionalsworking in the clinical area, I and lack of adequate materials for the resources of human. The training of the nurses increases the burnout rate in them.
Bellanti, F., Lo Buglio, A., Capuano et, al	2021	Breakdown rules for the nurses during the outbreak of coronavirus in a hospital come to University in Italy.	Data revealed that burnout in nurses was linked to emotional support, considering leaving one's job, workload, and stress rather than reliant on demographic or occupational factors like working in a COVID-19 department or being in close proximity to patients who were infected.
Ghahramani, S., Lankarani, et al	2021	Meta-analysis along with the systematic review related to the breakdown of the nurses due tothe Pandemic.	This study showed that during the COVID-19 epidemic, burnout affected almost half of the healthcare personnel. Healthcare professionals who are not on the front lines of COVID-19 exposure risk burnout.
Nwanya, M., &Rowberry, D.	2021	The importance of understanding burnout: an oncology nurse perspective.	Oncology nurse burnout has been the subject of tiny, cross-sectional studies using subpar methodology. According to the literature, the workplace, particularly elements of the environment that impede nurses from working in accordance with their principles, is where burnout is most likely to occur.
Gomez-Urquiza et al., 2016; Parola et al., 2017; Pradas-Hernandez et al., 2018	2021	Nurses' burnout and associated risk factors during the COVID-19 pandemic: A systematic review and metaanalysis	During the COVID-19 epidemic, nurses experience significant levels of burnout, which is influenced by a number of socio-demographic, social, and occupational factors.
Galanis, P., Vraka, I., et al	2021	Nurses' burnout and associated risk factors during the COVID-19 pandemic: A systematic review and metaanalysis	During the COVID-19 epidemic, nurses experience significant levels of burnout, which is influenced by a number of socio-demographic, social, and occupational factors.

Joo& Liu, 2021	2021	Nurses' barriers to caring for patients with COVID-19: a qualitative systematic review	Five difficulties were found through thematic synthesis in providing COVID-19 patients with nursing care: a lack of knowledge of COVID-19, uncertain tasks and difficult procedures, inadequate assistance, worries about family, and psychological and emotional stress
Di Trani, M., Mariani, et al	2021	From Resilience to Burnout in Healthcare Workers During the COVID-19 Emergency: The Role of the Ability to Tolerate Uncertainty	The backbone of the COVID-19 epidemic response are the healthcare professionals (HCWs) who are managing the current situation in healthcare settings. Therefore, it is imperative to make the biggest investment possible to safeguard their bodily and emotional well-being.
Ana Belen , Navarro-Prados	2022	Factors associated with satisfaction and depressed mood among nursing home workers during the covid-19 Pandemic	Experiential avoidance was a key indicator of how the COVID-19 pandemic would affect nursing care staff.
Mustafa Nal et al	2022	Mediating Role of Burnout In The Effect Of Nurses' Workload On Turnover Intention During Covid-19 Pandemic	This study demonstrated a link between rising workload and nurses' intentions to leave the profession as well as a positive mediating role for burnout in the relationship between workload and departure. In other words, the added workload for nurses has a detrimental impact on them.
Rekha et al	2022	The COVID-19 pandemic and mental health outcomes - A cross- sectional study among health care workers in Coastal South India	Findings that 49% of the investigated healthcare workers exhibited clinically significant depression symptoms and 38% of them had clinically relevant anxiety symptoms highlight the necessity of routinely monitoring HCWs' mental health throughout this current Pandemic.

Table 2 indicates that clinically significant anxiety symptoms were present in 38%, and clinically significant depressive symptoms were present in 49% of the tested healthcare workers (Rekha et al., 2022). The increased workload is linked to higher degrees of burnout and nurses' intentions to guit their jobs (Mustafa Nal et al., 2022). A negative link between burnout and staffing and resource sufficiency and a moderately positive correlation between work well-being and nurse manager ability, leadership, and support (Rebecca et al., 2022). Mental health outcomes were positively correlated with a skin lesion and negatively correlated with self-efficacy, resilience, social support, and front-line work willingness (Deying et al., 2020). Burnout was more likely to be severe in nurses who were anxious and had shorter working years (Liu and Zhang, 2020). Burnout is influenced socio-demographic, social, and mainly by occupational factors (Galanis P., Vraka, I., et al., 2021).

Workplace variables are widely cited as causes of burnout, and therapies continue to concentrate on people's coping skills rather than the known workplace elements that contribute to it (Melanie and Deborah, 2021). Nurses experienced stronger psychological effects, specifically accurate for depression, anxiety, and post-traumatic stress disorder symptoms (PTSD) from the epidemic (Rebecca et al, 2019).

Oncology nurses with more years of nursing experience, who worked in secondary hospitals, and who used passive coping mechanisms showed higher levels of compassion fatigue and burnout before the Pandemic (Hairong et al., 2016). Compared to other nurses, front-line nurses had a greater rate of burnout, and job stress was the main contributing cause (Tahere et al, 2020). Burnout was linked to both socio-demographic and workplace characteristics (Maria et al., 2021). Kandelman et al. (2018) reported that the only significant risk factor associated with burnout was bullying by the resident. Working under complex and stressful circumstances during the COVID-19 pandemic added a significant burden to an already strained and vulnerable workforce and is likely to contribute to increased burnout, turnover, and staff shortages in the long term among nursing home staff (White et al., 2021). Italian healthcare professionals reported relevant work-related psychological pressure, emotional burnout, and somatic symptoms (Barello et al., 2020). Individual levels of resilience and one's ability to tolerate uncertainty have been significant factors in determining the impact of COVID-19 burnout among healthcare workers. (Di Trani et al... 2021). Di Monte et al. (2020) stated that nurses suffer more from depression, anxiety, and PTSD symptoms during the COVID-19 pandemic.

Studies related to Solution to Burnout among nurses during covid 19.

Table 3: Studies related to Solutions to Burnout among nurses during covid 19.

Authors	Years	Topic	Results
Boerner, K., Gleason, H., & Jopp, D. S.	2017	Burnout After Patient Death: Challenges for Direct Care Workers	Findings imply that direct care workers' exhaustion is exacerbated by unrecognized sadness over patient deaths. High caregiving benefits and supervisor support may be protective against burnout, whereas high coworker support may be a sign of burnout.
Rebecca et al	2019	Nurses' well-being during the coronavirus (2019) pandemic: A longitudinal mixed-methods study	Compared to other comparable samples from the pre-coronavirus-19 era, these nurses had higher levels of burnout and worse levels of emotional, psychological, and social well-being.
Di Monte, C., Monaco, S., et al	2020	From Resilience to Burnout: Psychological Features of Italian General Practitioners During COVID-19 Emergency	The findings of this study indicated a bearing on GPs' ability to manage their workload during the COVID-19 emergency. It's likely that the emotions brought on by the Pandemic are too strong to control and use to deal with the work-related problems that the COVID-19 pandemic implies.
Janeway, D.	2020	The Role of Psychiatry in Treating Burnout Among Nurses During the Covid- 19 Pandemic	To help lower the risk of burnout, consultation-liaison psychiatry can offer support through liaison gatherings, stress management courses, and curbside consultations. Additional methods for reducing stress include mindfulness-based stress reduction, meditation apps, and narrative medicine programs.
Kunz, M., Strasser, M., & Hasan, A.	2021	Impact of the coronavirus disease 2019 Pandemic on healthcare workers: systematic comparison between Nurses and medical doctors	During the COVID-19 epidemic, nurses are more likely to experience symptoms of melancholy, anxiety, and PTSD, necessitating the necessity for particular programs that cater to their needs.
Leo Carlo Giacomo, et al	2021	Burnout Among Healthcare Workers in the COVID-19 Era: A Review of the Existing Literature	The present emergency setting has introduced new social and employment-related elements that raise the risk of burnout and have an impact on the standard of care and system effectiveness.
Di Trani, M., Mariani, et al	2021	From Resilience to Burnout in Healthcare Workers During the COVID-19 Emergency: The Role of the Ability to Tolerate Uncertainty	The backbone of the COVID-19 epidemic response are the healthcare professionals (HCWs) who are managing the current situation in healthcare settings. Therefore, it is imperative to make the biggest investment possible to safeguard their bodily and emotional well-being.

From Table 3, it was determined that better employer and family support for nurses and a decrease in workload and stress from the workplace would help prevent nurse burnout during the COVID-19 pandemic (Francesco et al., 2021). Generating positive outcomes like contentment benefits from accepting ideas and feelings as they arise would improve job satisfaction among nurses. (Ana et al., 2022). High supervisor support and caregiving benefits may have protective effects with respect to Burnout (Boerner et al., 2017). Emotional strategies that allow individuals to stay in a critical situation without needing control appear to protect against burnout in some circumstances (Di Trani et al., 2021). Implementing task-oriented problem

management rather than emotional strategies protects against burnout in these circumstances (Di Monte et al., 2020). Physical well-being, psychological well-being, and social connection were shown to be three aspects that were crucial for nurses' well-being (Rebecca et al, 2022). Measures have been suggested to prevent or reduce individual, organizational, and cultural burnout (Carlo et al., 2021).

CONCLUSION

According to the studies reviewed, it can be concluded that home nurses also experienced burnout before the epidemic. During the COVID-19 pandemic, nurses reported moderate levels of

burnout. The high rate of nursing burnout during COVID-19 was directly associated with anxiety, fear, and depression. Nurses experienced worse mental health outcomes than doctors did. Front-line nurses had a greater burnout rate than other nurses, and job stress was the main contributing cause. Studies reveal that burnout is primarily influenced by sociodemographic, social, and occupational factors, anxiety symptoms, shorter working years, and bullying by the resident. Better employer and family support, generating positive outcomes, supervisor support, caregiving benefits, and implementation of task-oriented problem management were associated with reduced risk of burnout among nurses. Research suggests the need to consider establishing training programs for health professionals in the academic environment related to coping with managing and identifying stress. Special programs addressing their needs, especially in adverse circumstances, can help to prevent burnout among nurses.

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