The Principles of the Treatment Staff's Care of Patients with Covid-19 and being Treated in the Intensive Care Unit and Drug Therapy

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## **Abstract**

Recently, the novel coronavirus (Covid-19) pandemic has caused a lot of stress and anxiety around the world. Given that health care workers are on the front line of fighting infectious diseases and Covid-19, they are the first to be exposed to this virus. Considering the spread of the spread of covid-19 throughout the world and the number of casualties caused by this disease among health care workers due to being on the front line of dealing with this disease, it is suggested to reduce the anxiety of the medical staff, health policy makers, and Think of the necessary measures to preserve the health of this group as guardians of the health and well-being of the members of the society. When the World Health Organization announced 2020 as the International Year of Nurses and Midwives, no one could have imagined that this year would be one of the most difficult years in the lives of nurses and healthcare workers around the world. In the same way, before entering their profession, nurses were generally not familiar with the real experiences of nursing, and they did not consider this amount of job duties and even the intention of leaving the service due to the pressure of the role to be possible. As the participants admit, nurses' less realistic view of their role duties remained until they entered the profession, and despite the relative

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adaptation during the following years of professional activity, the conditions that occurred as a result of the Covid-19 virus epidemic, some nurses faced pressure. The double work has made me rethink about this job.

**Keywords:** Nurse, Hospital, Health, Covid 19 Virus.

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## Introduction

Due to the re-emergence of the corona virus in the country and the beginning of the fifth outbreak of the disease, one of the most important things in preventing the transmission of the disease in a family is to observe the correct principles of quarantine at home [1-3]. Corona virus was first detected in Wuhan, China. Of course, if we want to introduce it better, it should be said that SARS and MERS are older versions of this virus [4]. For this reason, you may also hear it under the clinical name of SARS-CoV-2. The name of the corona virus is derived from the Latin word corona, meaning crown or halo, which refers to the crown like appearance around the virus. Viruses have a very simple structure [5-7]. They have a protein layer wrapped around the genetic material DNA or RNA. In simpler terms, a virus is a protein box that contains genetic material. This genetic material itself has molecules that can be in the form of a chain of letters (Figure 1). Each part of the letters also has codes that instruct a specific part of the protein to tell the virus how to function. There are more than 200 types of corona virus [8-10].

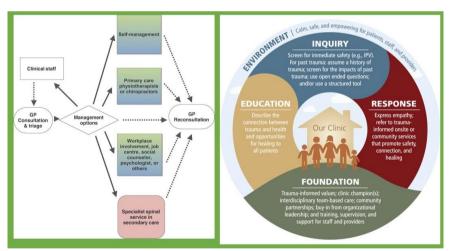


Figure 1. A conceptual framework for increasing clinical staff

With the epidemic of the virus and its penetration in all the hospitals of the province and the addition of a huge number of corona patients to the people being cared for and considering the mutual hardships of patients and nurses in these new conditions, the nursing profession is completely synonymous with the experience of shifts in the work flow. Double shifts, tiredness after the shift, lack of enough rest during the busy time and the pressure of the night shifts, and the nurses spent all their mental and physical strength to maintain the management of the new

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conditions, which had negative effects on the nurses' health. In addition, the emotional and physical strength of nurses in heavily infected and isolated departments is not responsive to the pressure. This is despite the fact that nurses are expected to continue providing services regardless of their fatigue and abilities [11-13]. In fact, heavy shifts cause nurses to burn out more than they are productive. One of the very important points that should be given serious attention in this context is the fear, anxiety and inner tension that the nurse has with her. At the beginning of the outbreak, nurses had an unpredictable fear. Because the virus had no known nature [14]. Therefore, one of their main concerns was protecting themselves while taking care of corona patients and performing their organizational duties (Figure 2). Also, because the fear of getting sick and infecting family members has always existed in the presence of nurses as well as hospitalized corona patients. These two groups suffered the most mental pressure, which delayed the healing process in patients and caused occupational disruption and professional confusion for nurses, so that many nurses were forced to resign from their profession due to the spread of this disease.



Figure 2. COVID-19 kills 203 more Iranians over past 24 hours

They had been trying to get it for years [15-17]. According to Griffiths in 1995, when there are communication conflicts and gaps between working people and the organization they are working in, the person leaves it against his heart's desire and interest in his job. In such a situation, the provision of psychological services during the epidemic by related organizations will prevent the burnout of nurses and the loss of their resilience while performing their duties [18].

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Search strategy and selection of articles

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Search in Scopus, Google scholar, PubMed databases and by searching with keywords such as "Treatment Staff's Care of Patients" and "Covid-19" and "Treated in the Intensive Care Unit" to obtain articles related to the selected keywords [17]. Case report articles, editorials, and articles that were not published or only an introduction of them were available, as well as summaries of congresses and meetings that were in languages other than English, were ignored. Only the original research articles that evaluated the effectiveness of different drugs in the treatment of COVID-19 using standard methods were studied (figure 3).

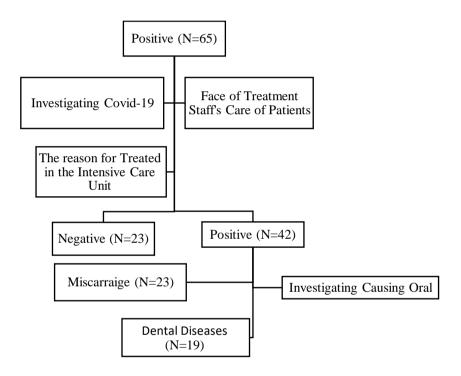


Figure 3. Flow chart of included subjects

# Special care nurse abilities

In any job situation, a critical care nurse must have the ability to perform complex patient assessments, implement ongoing interventions and treatments, and monitor patients, while remaining calm in frustrating and sometimes dangerous life situations [19]. Because the condition of a transported patient or casualty can change rapidly and without warning, the critical care nurse must be able to immediately change the current plan of care and provide emergency services if necessary.

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# Supportive role of the nurse

In addition to direct care, the intensive care nurse plays an important role as a patient advocate, and even in this situation when the patient is in a critical condition, the basic rights, values and beliefs of the patient must be respected and supported as the patient's representative [20].

### duties

- ✓ Respect the rights of the patient or your designated surrogate to make independent health care decisions, even if he or she disagrees with those decisions.
- ✓ Act as an intermediary in matters concerning the patient, family and other staff involved in the direct care of the patient or members of the care team.
- ✓ Intervene when other health care professionals or family are not acting in the best interest of the patient.
- ✓ Continuously monitor the quality of care provided to the patient.
- ✓ Act as a hero for the patient when he is unable to speak for himself.
- ✓ Train and support a person who acts as a patient spokesperson.
- ✓ Transfer care to other health care personnel if position changes.
- ✓ Introduce the wishes of the patient to other medical staff.

The researches reviewed in this section are divided into three general categories: In the first section, the threats and opportunities that Corona has created in the society will be examined and the results will be presented [21]. Then, the understanding of the people involved with Corona will be reviewed in terms of the conducted researches, and finally, the support measures taken by the medical staff for more resilience due to the difficulty of their jobs these days, as well as the demands of the nurses based on the conducted researches, will be reviewed.

The first group of these studies, which were conducted on the effects of Corona on society and the way of communication between people, are: Madani (2019) [22], Kalate Sadati and Abedi Diznab (2019) [23], Kazemi (2019) [24]. The results of these studies show that the conditions resulting from Corona are considered a threat to the civil society, and due to physical distancing, organizations are forced to limit their activities or suspend their plans. Because during the pandemic, normal activities stop. In addition to Corona, other factors such as politicization between groups, lack of sincerity and lack of unity between volunteer groups, which causes the formation of political factions, unhealthy competition, etc. Seen, groups just try to display their activities. According to Kazemi's results, in 2019 [25], besides threats, Corona has also had achievements. Among these achievements is the revival of altruism, according to which medicine should be responsible for providing human health and not a money-making commercial institution. Therefore, health care systems must deal with any kind of profit-oriented manipulation [26].

The second category is the researches that have been conducted on the understanding and understanding of the experiences of people involved with Corona, especially the nurses of this department and the patients infected with the virus in the hospital. Based on the results of these

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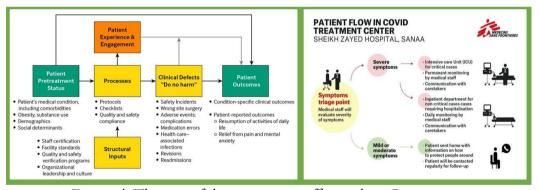
researches, among the challenges of patients suffering from covid-19 are the experiences of death anxiety, the experience of the stigma of the disease, the experience of ambiguity, the emotions caused by being in quarantine, and these painful experiences can cause a delay in the patient's recovery process [27]. According to the research of Riochi and his colleagues in 2020, when working on cases with Covid-19, nurses were afraid due to safety issues and preserving their lives, but after the establishment of standard methods, they felt somewhat confident about protecting themselves in dealing with the disease [28]. Also, in 2020, Yanli and Ixia showed that nurses involved in the disease are under serious psychological pressure, and therefore, emergency screening epidemic systems should be used to protect their health and psychological interventions should be used to help them during the epidemic [29].

In 2020, Fernandez and his colleagues emphasized in this context that based on their studies, nurses want comprehensive support from governments and nursing groups in order to prevent job burnout and loss of strength and resilience [30]. Finally, it should be said that since nurses are constantly exposed to challenges and fears caused by this disease while performing organizational duties, they need a set of support measures that can provide them with the minimum necessary facilities to continue their job duties [31]. Regarding this topic, Huachen and his colleagues examined the provision of targeted psychological services by frontline nurses involved in the management of Covid-19. The results show that the support plan that the nurses received gave them a sense of belonging, professional value and pride, and a sense of protection and selfconfidence. In 2020, Kim and his colleagues also believe that in order to keep nurses in their jobs in these special conditions, they should be given strategic social support. Because nurses have to protect the infectious patients of the corona ward for long hours, and due to the continuation of this disease, they face problems in their career, and this indicates that they are more at risk of contracting the disease than any other group [32]. Finally, according to the research of Hu and his colleagues in 2020, social support can increase the mental health of the treatment staff through resilience, especially among the middle-aged groups. Because resilience and mental health had become weaker in these groups compared to young people [33]. A recent small study suggests that the virus may also be present in feces and contaminate the sink or bathroom, but more research is needed to prove this claim. It is also said that there is a possibility of disease transmission from coolers and air conditioners that cause air recirculation. Research has shown that physical distancing policies implemented in 46 countries prevented 1.57 million cases of Covid-19 during a two-week period [34]. This will lead to a 65% reduction in new cases. According to the claim of the researchers, the implementation of physical distance policies at the national level is associated with a significant reduction in the transmission of the Sars-Covid-2 virus, which causes the corona virus, and reduces the amount of social transmission. Researchers emphasize the significant benefits that can be gained by maintaining physical social distance [35].

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# The care of the treatment staff regarding Corona

Considering two separate clean and dirty spaces for wearing and removing these clothes, or if it is not possible, dividing the dressing room into two completely separate areas and not interfering between these two environments is an important matter that must be observed. Also, as much as possible, removing and re-wearing personal protective equipment should be avoided, especially during rest and eating [36]. Nurses should minimize the possibility of contaminating the body and underwear with the virus by maintaining calm and concentration and not rushing when removing personal protective equipment. Healthcare workers should be more careful than other people to avoid touching their face with contaminated hands (Figure 4). Emphasizing on avoiding eating and drinking in the ward environment, he said: drinking healthy and warm water and liquids in a clean environment is very important to prevent dehydration and dry mouth by observing the principles of personal care. It is very important to have all the necessary facilities such as hand sanitizer solution in both clean and dirty locker rooms, and a bucket should be placed in the dirty area so that reusable items such as safety glasses can be placed in it to be washed and disinfected later. Proper nutrition, exercise, maintaining morale, adequate rest and using healthy entertainment during idle time are very important to improve the health and safety of nursing staff [37]. The direct communication of the nursing staff with the patients and the nature of caring for patients with corona and the subsequent fatigue and reduced physical strength endanger the health of this effective group in the treatment cycle. Therefore, it is very necessary to pay special attention to health tips for these people.



**Figure 4.** The care of the treatment staff regarding Corona

## Job alienation and intention to leave the service

One of the most important factors that seriously endangers the mental and physical health of employees in organizations is occupational alienation, which is a state of psychological separation of a person, which includes a person's self-image and social relationships inside and outside the workplace. Occupational alienation is one of the psychological states that occurs due to having the components of futility, dislike of society, abnormality, disability, dislike of work and social isolation, and it may cast a shadow on all dimensions of existence of the individual. It affects his behavior and feelings and has many negative consequences for the individual and the organization.

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The way society controls and manages the social reward system is such that a person cannot establish a connection between his behavior and the reward received from the organization. It is in such a situation that the feeling of alienation dominates the individual and leads him to a detached and inconsistent action towards the society. Quitting usually refers to a person's decision or action to leave the organization [37]. In other words, leaving the service is a change in a person's membership in the organization, which includes a wide range, but the most important difference is between voluntary leaving the service and mandatory leaving the employee's service in the organization.

According to Hellman's opinion, leaving service refers to the behavioral tendencies that ultimately cause people to leave the organization. Home and Griffiths in 1995 define desertion as the clear and conscious intention of the employee to permanently and voluntarily leave their job. In other words, leaving the service shows the intention of each person to leave his favorite organization, which expresses the communication gap and conflict between the organization and the employee. In other words, the desire to leave the service is defined as the degree of movement of a person towards leaving the scope of membership in a social system, which is initiated by the person himself. Mobley and his colleagues in 1979 defined it as the process of thinking, planning and intending to leave a job. In contrast to real job quitting, the desire to quit is not obvious. The costs of leaving the service of elite and expert employees are high for the organization and even irreparable in some cases [38].

The cost of leaving the service of employees, according to the efficiency of each employee, damages the organization between 20-25% annually. In addition to this, the spiritual losses caused by leaving the service, such as the loss of experiences and the reduction of the benefit of collective wisdom, the reduction of commitment, motivation and work ethics among the remaining employees are some of the things that cannot be measured. There are other costs such as the costs of attracting and re-employing people, choosing and training them, reducing efficiency until a replacement person enters the organization and is expert and skilled, spending time and credit to compensate for the shortcomings. Organizations should take measures based on which problems are identified and resolved before leaving the service at the stage of wanting to do so. Because this problem has negative effects on employee motivation and also bad effects on the attitude of other employees [39].

The intention to leave the service refers to the individual's subjective assessment of the possibility of staying or leaving the organization in the near future. There are three reasons for using intent to quit instead of actually quitting:

**First:** Leaving the service depends on the general economic conditions. People who intend to leave the service may do so only when they have alternative jobs available.

**Second:** Behavioral intention is a direct indicator of actual behavior. However, the behavioral intention of people does not always cause the behavior and may change with the passage of time.

**Third:** Previous studies have found that the intention to leave the service is the strongest predictor of leaving the service.

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# Organizational support

Social support is the support a person receives from family, friends, organizations and other people. Decreased social support is associated with increased loneliness and hopelessness. Social support deals with the issue that a person can benefit from the like-mindedness and assistance of those around him in his life and during problems and can feel close to them. One of the most important dimensions of support is organizational support [40]. The employees of an organization always believe and have a special interest in the organization based on the amount of value that the organization places on creating their well-being, comfort and security. This belief is called perceived organizational support. In fact, perceived organizational support reflects the quality of social exchanges that occur between employees and employers [41]. Social support is a multidimensional concept that is defined in different ways. For example, it can be defined as a resource provided by others and facilities to deal with stress or an exchange of resources. According to many theorists, social support has different dimensions. One of the most common categories is based on emotional, instrumental and informational dimensions. Emotional support means having someone available to lean on and trust when needed.

Instrumental support refers to material, objective and real help received by a person from others. Informational support includes giving recommendations, directions, suggestions, or feedback to a person about how he or she is doing. Organizational support increases the positive attitude of employees towards their jobs. In addition, it has an effect on increasing job commitment and involvement, and it means involvement with work-related interests. The higher the organizational support of employees, the higher their commitment to their jobs and work [42].

#### Discuss

After the first reports of unusual cases of pneumonia in Wuhan, Hubei Province, China, in December 2019, the Covid-19 disease quickly attracted the attention of the world community. Epidemiological findings indicated the rapid transmission of this disease from human to human. The spread and high prevalence of this disease, the death in severe cases and the lack of specialized treatment of this disease have turned it into a great threat to the health of the people of the society and especially the members of the health system working in hospitals.

Nurses and doctors are always on the front lines of epidemics, and since they are in close contact with patients with Covid-19 to perform their duties, they are vulnerable to contracting this disease. According to reports, a large number of hospital and health sector employees have contracted this disease. In Iran, according to the report of the Deputy Minister of Nursing of the Ministry of Health, more than 45,000 nurses have been infected with Corona [43].

Nurses are important members of the health service system of countries, who influence the health system by playing different roles. Working for a long time and dealing with sick patients, playing a supporting role in relation to patients and providing special care to special patients makes nurses

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prone to suffering from various mental disorders. Meanwhile, the quality of health care largely depends on the working conditions and mental health of nurses.

In critical situations, the rapid increase in the number of patients in epidemics makes doctors and nurses face a large amount of workload and exposure to high-risk infections, which can lead to mental health problems such as anxiety or depression [44]. Chen et al.'s study in Taiwan during the SARS epidemic showed that people who worked in high-risk units had higher mental disorders compared to other groups [45].

Another study by Wang and his colleagues in China showed that 65.2% of nurses experience various degrees of anxiety. Another study by Liu and his colleagues in 2020 in China reported that the prevalence of psychological disorder, depression and anxiety symptoms were 15.9, 16 and 34.6%, respectively. Stress and anxiety, work pressure, lack of energy and also not having the necessary time to prescribe medicine will reduce the attention of nurses and maintain the safety of patients as one of the basic principles of any healthcare system. Several factors may affect the safety of patients [46].

Medication mistakes made by the service provider groups can be one of the most important causes of serious problems in the health of patients, increasing the length of hospitalization and costs. Prescribing medicine is one of the essential and significant aspects of the nursing profession, and the implementation of medication orders is the main part of nurses' performance and an important part of the treatment and patient care process.

Therefore, the occurrence of medication errors as one of the most common and significant problems in health systems can be considered as a threat to the patient's health. In this regard, the study of Niazi and his colleagues showed that the general health status of nurses is optimal. In another study conducted by Mahmoodi et al., it showed that only 7.3% of nurses had health disorders and most nurses were in good health. On the other hand, the results of Dehghankar's study showed that the health of Iranian nurses is not in a good condition and depression and functional disorders are high in nurses.

The study of Barzideh and his colleagues showed that nurses are in a state of suspected disorder in public health and high stress level. In another study that Najafi and his colleagues conducted on nurses working in teaching hospitals in Zahedan, it was found that nearly half of the nurses have unfavorable general health and average quality of work life. As can be seen, different reports of the general health status of nurses have been noted in the studies, but what is of great importance in this context is that nursing is one of the main fields of care and a healthy nurse is one of the main factors to improve the quality of care [47].

There is a positive and strong relationship between healthy nursing and health promotion, and without a doubt, someone who has a health disorder cannot assume personal, family and social obligations and requirements and will be unable to do it properly. Long working hours, lack of support, heavy workload, violence from patients, insufficient staff, insufficient resources, lack of respect, lack of involvement in decisions and lack of sufficient equipment and high expectations from nurses cause psychological diseases such as stress, anxiety, insufficient sleep. It happens in

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nurses. Of course, the important point that is hidden in the findings of the present study is that although the covid-19 disease remains as a global and progressing problem after about a year, but its long-term effect on the general health of nurses considering that this the study was also conducted after about a year from the beginning of the pandemic. Because at the beginning of facing a crisis, it is justifiable to increase local tensions and stress and worry, which after some time, its psychological effects can be reduced due to the increase in the level of awareness and knowledge of nurses in dealing with disease and patients.

The results of the present study also showed that the average anxiety score of the nurses in the present study was low. In this regard, the results of the study by Abadi and his colleagues showed that the depression, anxiety and stress of nurses during the Covid-19 pandemic were moderate. The results of the study by Xiao and his colleagues showed that the levels of social support of the treatment staff of Corona disease are significantly and negatively correlated with the degree of anxiety and stress of the treatment staff. The results of the study by Holmes and colleagues showed that a large population of health care professionals experienced significant levels of anxiety, depression and insomnia during the Covid-19 disease.

Recent and extensive surveys on people susceptible to corona virus infection, including medical workers, reported the prevalence of traumatic stress at 73.4 percent, depression at 50.7 percent, and anxiety at 44.7 percent. In the early stage of the spread of the coronavirus in China, more than half of the respondents reported severe to moderate psychological impact and about a third reported moderate to severe anxiety. Previous findings have shown clear connections between epidemics and anxiety and increased stress symptoms of pollution concerns, health anxiety, post-traumatic stress and suicide. These findings are a part of the worrying trend of Corona anxiety that is found among the people, to the point where some people committed suicide due to the fear of contracting the disease (Figure 5 & 6). Although a lot of attention has been paid to the measures related to the identification of people infected with the corona virus infection, the identification of the mental health needs of people affected by this epidemic disease has been neglected.

1	Azizi et al.	2020			-	0.47	[0.39 – 1.06]	3.11
2	Dehghankar et al.	2016				0.95	[0.54 – 1.02]	6.05
3	Barzideh et al.	2012			•	0.93	[0.63 – 1.01]	4.06
4	Najafi et al.	2018			-	0.51	[0.25 – 1.08]	7.03
Heterogeneity t <sup>2</sup> =0.04, I <sup>2</sup> = 0.01, H <sup>2</sup> =0.42						0.38	[0.22 – 1.07]	6.03
Test of	Θ= Θ, Q (4) =1.45, P=	0.44						
1	De Oliveira et al.,	2016			-	0.14	[0.27 – 1.08]	6.08
1 2	De Oliveira et al., Abadi et al.,	2016				0.14	[0.27 - 1.08] [0.52 - 0.22]	6.08 5.82
- 7	75 755 755					10000000		5.82
2	Abadi et al.,	2020			-	0.56	[0.52 - 0.22]	7000

Figure 5. Forest plot showed Treatment Staff's Care of Patients with Covid-19

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Raw	Study Mehrabi et al.	Year		Proportion Wight 9		% Weight
1		2003		0.24	[0.11 - 1.72]	3.02
2	Alrabadi al.	2021		0.32	[0.42 – 2.11]	4.00
3	Melnyk et al	2018		0.66	[0.44 - 1.02]	6.32
4	Mohebbifar et al	2015		0.45	[0.25 - 0.98]	5.12
Heterogeneity t <sup>2</sup> =0.02, I <sup>2</sup> = 0.03, H <sup>2</sup> =0.5					[0.34 - 0.58]	1.23
Test of	Θ= Θ, Q (4) =4.55, P=	0.57				
1	Nazifi Sadr et al.	2014	•	0.16	[0.11 – 0.66]	1.55
2	Jolaee et al.	2009		0.56	[0.15 - 0.48]	4.33
3	Aminzadeh et al.	2015		0.58	[0.19 – 0.55]	6.77
4	Mahmoodi et al.	2015		0.64	[0.17 - 0.29]	3.03
Heterogeneity t <sup>2</sup> =0.01, I <sup>2</sup> = 0.07, H <sup>2</sup> =0.70					[0.03 - 0.32]	
Test of 6	Θ= Θ, Q (4) =3.01, P=	0.01				

Figure 6. Forest plot showed Treated in the Intensive Care Unit

Some stressful factors such as diseases, including covid-19, can cause anxiety and concern for health and affect self-efficacy in the treatment staff involved in covid-19 patients. Finally, the results of the study investigating the relationship between medication errors in nurses with public health and anxiety caused by Corona showed that with the increase in the level of public health and the increase in the anxiety score caused by Corona, the medication error score also increased, but the results related to the investigation of variables affecting The nurses' medication error score showed that only work variables in the covid-19 department and the decrease in general health level are related to medication error. Nurses who were in contact with patients with Covid-19 had a higher medication error score [48].

Also, nurses who had less general health reported higher medication errors. The results of Nurmeksela et al.'s study showed that there is a significant relationship between the nurse's work content and medication errors. Fatigue caused by extra work and not having enough time, high density of work and the amount of environmental noise, lack of number of nurses and mental and psychological problems of nurses are some of the factors affecting the occurrence of medication errors among nurses. In a statement, the Institute of Safe Pharmaceutical Methods has indicated that it has received cases of medication errors in connection with patients with covid-19 due to the wrong label of the drug and cases due to changes in the workplace of nurses, the inability of the nurse to assess the patient and as a result the use of Incorrect drug dosage reported [49-51].

Therefore, it is necessary to take necessary measures to increase the level of health and reduce anxiety and stress due to the special conditions created by the emergence of the disease of Covid-19 and the adverse consequences that have resulted for the people of the society and especially the frontline nurses in the fight against this disease. They should be designed and examined in future studies [52-54].

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## Conclusion

The results of the studies showed that exposure to covid-19 patients decreases the level of general health and increases the anxiety caused by corona in nurses, which increases the rate of medication errors. Therefore, it is necessary to pay special attention to the necessary planning to improve the health level and reduce the anxiety of nurses in critical situations, because the trend of spreading the disease of Covid-19 has increased the workload and mental health problems such as anxiety and depression, and with the continuation of this The crisis of fatigue and burnout of the treatment staff, followed by a decrease in the quality of services and an increase in the amount of medication errors, is not far from expected. In the meantime, the nurses on the front line of facing this virus suffered double. Nurses are under the pressure of expectations from the public, hospital management, patient companions, patients and other hospital employees. Meanwhile, the patient's companions have the highest expectations from the nurses present at the nursing station. The nursing station can be considered a meeting place between the patient and the nurse, a place where the companions look for things such as ignorance of nursing duties and medical care, impatience, lack of companionship, labeling, asking for an immediate answer, prejudice, complaints and judicial encounters, overwhelming emotions and Excitement over one's own reason, disrespect to nurses, misbehavior towards them create beyond expectations of dignity. The pressures that manifest themselves in the form of job powerlessness cause nurses to use strategies. One of these strategies is continuous and successive rethinking of career and personality. This action is actually a kind of submission to the pressures and dreaming about leaving the job, which is implemented in some cases and causes the nurse to stop working with the hospital, but for most nurses, it is not the case and after a long time of careful consideration of their job position, they feel job alienation. They continue to operate. Aversion to work and isolation, which is the result of having the components of futility, aversion to society, abnormality, disability, aversion to work and social isolation. In some cases, it casts a shadow on all dimensions of the individual's existence and the sector in which he is engaged in professional work and belongs to, and affects his behavior and feelings, and brings many negative consequences, especially for the individual and the organization. In fact, the individual bears most of the costs of this aversion on his own and prevents damage or disruption to his organizational duties. Nurses, following the application of their awareness strategies among people for the social construction of trust, sometimes see their strategies without results. As a result, their indifference towards events and stereotypes is formed. The World Health Organization says that there are no accurate statistics of infections and deaths in the health and medical staff due to the corona virus, but the statistics report an increase in depression and posttraumatic stress disorder in the medical staff, anxieties caused by exhausting work and the fear of contracting the corona virus. It has roots. The findings of the research show that the rapid spread of the Covid-19 disease at the beginning of 2020 in the world put a severe physical and mental pressure on the medical staff of the hospitals that were involved in the care of patients with Covid-19, to the extent that the risk of post-traumatic stress disorder for this group Increased. Therefore, it should be said that nurses are one of the most important groups who face this epidemic and

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corona patients every day, and also experience and understand successive mental, psychological, physical and organizational challenges due to these conditions. Therefore, in order to prevent job burnout in them and to eliminate the fear, panic and pressure that has been placed on them, they need a set of social, economic and psychological support measures so that they can work with hope and extra effort in the field of their organizational duties. and be able to tolerate long hours of communication with patients, their companions and their families as well as other personnel and treatment staff. In fact, according to the results of the research of Kim and his colleagues in 2020, it is necessary to increase their resilience through strategic measures in terms of keeping nurses and medical staff in their jobs, as well as helping patients who have serious challenges with this disease. According to the research of Hu and his colleagues in 2020, social support can increase the mental health of the treatment staff through resilience, especially among the middle-aged groups.

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