



## VOICES FROM THE FRONTLINES: THE LIVED EXPERIENCES OF NURSES WORKING OVERTIME AMID THE COVID-19 PANDEMIC

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### Abstract:

The COVID-19 pandemic posed unprecedented challenges for healthcare systems worldwide, placing Filipino nurses at the forefront of the response. This phenomenological study explored the lived experiences of five nurses aged 24 to 36, working in various units across tertiary hospitals in Metro Manila. Through in-depth interviews, three major themes emerged, capturing their journey of dedication, struggle, and resilience. The first theme, A Call to Duty, revealed the unwavering commitment of nurses to provide care despite the uncertainties of the pandemic. Nurses expressed a deep sense of responsibility, often working beyond their limits to save lives. The fulfillment they found in seeing patients recover and return home underscored their resilience and dedication to their profession. The second theme, Unveiling the Challenges, highlighted the physical, emotional, and systemic burdens nurses faced. Fear of contracting and spreading the virus, physical exhaustion from long hours in personal protective equipment, and the strain of witnessing patients die alone were recurring struggles. Compounding these were systemic issues such as inadequate staffing, insufficient resources, and a lack of support and recognition from institutions, which exacerbated their mental and emotional distress. Despite these adversities, the third theme, Resilience in the Face of Adversity, showcased the strategies nurses employed to

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cope with their circumstances. Patient gratitude, personal hobbies, spiritual practices, and support from loved ones were pivotal in maintaining their resilience. These strategies not only helped them navigate the challenges but also fostered a sense of purpose and emotional recovery. This study highlights the duality of dedication and struggle experienced by Filipino nurses during the pandemic, emphasizing the urgent need for systemic reforms to address their well-being. Improved compensation, adequate resources, mental health support, and recognition are essential to sustain and empower the nursing workforce. By understanding the lived experiences of these frontline heroes, policymakers and institutions can better prepare for future crises and strengthen the healthcare system's resilience.

**Keywords:** resilience, frontline nurses, COVID-19 pandemic, coping mechanisms, healthcare challenges

## 1. Introduction

The COVID-19 pandemic has significantly impacted healthcare systems worldwide, with the Philippines being one of the hardest-hit countries in Southeast Asia. Filipino nurses, the backbone of the nation's pandemic response, faced unparalleled challenges as hospitals were overwhelmed with patients. Reports revealed that more than 100,000 nurses resigned from private hospitals due to high nurse-to-patient ratios, low wages, and unsafe working conditions, while others sought opportunities abroad. In an attempt to address the critical shortage, the government temporarily suspended the deployment of healthcare workers overseas and appealed for volunteer healthcare workers. Despite these efforts, the strain on Filipino nurses persisted, particularly for those required to work overtime.

Nurses played a pivotal role as frontliners, providing care during the most critical stages of the pandemic. However, their work environment was fraught with challenges, including inadequate personal protective equipment (PPE), insufficient organizational support, and overwhelming workloads. These conditions exposed them to heightened risks of infection, burnout, and psychological distress. Furthermore, systemic issues, such as the absence of well-defined response protocols, exacerbated the challenges faced by nurses. While their contributions were hailed as heroic, the lived experiences of these nurses during the crisis remain underexplored.

This qualitative study seeks to delve into the experiences of Filipino nurses who worked overtime during the COVID-19 pandemic, uncovering the struggles they endured and the measures implemented to alleviate their conditions. By capturing their voices, this research aims to inform policy reforms, enhance institutional support, and foster a deeper understanding of the critical role nurses play during health crises. It also seeks to provide insights that may benefit not only healthcare professionals but also

nursing students, hospitals, and policymakers, ultimately contributing to the resilience of the Philippine healthcare system.

## 2. Literature Review

The COVID-19 pandemic, which began in late 2019, has caused significant global health and socio-economic disruptions, leading to over 400 million infections and 6.2 million deaths as of 2022. Healthcare systems worldwide faced severe strain, with staffing shortages, resource limitations, and overwhelming patient loads compromising the quality of care and patient safety. Nurses, the largest segment of the healthcare workforce, were at the forefront, managing patient care despite heightened risks, including inadequate personal protective equipment (PPE), long working hours, and mental health challenges such as stress, anxiety, and burnout.

Work-related stress has been recognized by the World Health Organization (WHO, 2017) as a major epidemic of the 21st century, exacerbated by insufficient organizational support, high workloads, and lack of control over work processes. Studies from various countries highlight the significant impact of COVID-19 on nurses' mental health. For example, research in Iran (Valizadeh *et al.*, 2021) and China (Tuncay *et al.*, 2020) revealed extreme stress due to inadequate PPE, fear of infection, and emotional exhaustion. Similar findings emerged in the Philippines, where high nurse-to-patient ratios and low compensation drove resignations and migration, further straining the healthcare system (Alibudbud, 2022).

Previous pandemics, such as SARS and MERS, also underscored nurses' critical role in patient care and the challenges they face. Effective patient care relies on adequate staffing, communication, and supportive environments, yet many nurses report feeling undervalued and overworked (Moghaddam-Tabrizi & Sodeify, 2021). Long shifts and poor work-life balance contribute to errors and diminished care quality (Lasater *et al.*, 2020). Additionally, nurses often suffer from emotional fatigue, loneliness, and symptoms of post-traumatic stress (Chen *et al.*, 2021).

In the Philippines, over 100,000 nurses have left their posts in private hospitals since the pandemic began, citing low wages and poor working conditions. Government interventions, such as deployment bans and modest daily allowances, have been insufficient to retain healthcare workers. Studies highlight the urgent need for mental health support, policy reforms, and better work environments to address these challenges (Lagman *et al.*, 2021; Falguera *et al.*, 2020). Ensuring adequate staffing and fostering teamwork are essential to improving care quality and mitigating medical errors (Baraka *et al.*, 2021; Gurková *et al.*, 2022).

Globally, nurses have reported feeling unprepared for the demands of the pandemic due to inadequate training and unclear response protocols. PPE use has also hindered their ability to connect with patients, impacting therapeutic relationships (Deliktas Demirci *et al.*, 2021). As the pandemic continues, many nurses express plans to

leave the profession, underscoring the need for systemic changes to retain this vital workforce (Leng *et al.*, 2021).

In summary, the pandemic has revealed critical vulnerabilities in healthcare systems, particularly regarding nurse staffing and support. Addressing these issues through better compensation, organizational policies, and mental health resources is crucial for improving outcomes for both nurses and patients.

### 3. Materials and Methods

The study was conducted with registered nurses from three tertiary hospitals in Metro Manila, referred to here as Hospital A, Hospital B, and Hospital C. These nurses, comprising two males and three females, were employed full-time and participated in virtual interviews conducted via Zoom. The interviews were scheduled at the convenience of the participants, with informed consent provided beforehand. This ensured that ethical considerations were observed and participants felt comfortable sharing their experiences.

The researchers employed snowball and purposive sampling to select participants who met the study's criteria. Snowball sampling allowed the researchers to expand the participant pool through referrals, leveraging trust and connections within the community, a crucial approach given the limitations imposed by the pandemic. Purposive sampling further ensured that the selected participants were directly relevant to the study's focus, namely nurses who worked overtime for more than four hours during the COVID-19 pandemic while caring for COVID-19 patients. These sampling methods enabled the identification of individuals whose experiences were rich in information and directly related to the research goals.

Data collection began after receiving approval for the study's proposed instruments. Participants were given at least three days to review the consent form and prepare for the interview. During the interviews, rapport was established to encourage open communication. The researchers posed six carefully crafted questions to elicit detailed responses. Notes were taken, and with participants' consent, audio recordings were made to ensure accuracy. Each interview lasted between 30 minutes and an hour, and all data were securely stored in a password-protected Google Drive, safeguarding participant confidentiality. Following the interviews, the researchers meticulously analyzed the responses to uncover meaningful insights.

For data analysis, the researchers utilized Colaizzi's approach, a structured method for phenomenological research. This involved a series of steps: gathering and repeatedly reading participant descriptions, identifying significant statements, formulating codes, and organizing these into thematic clusters. A comprehensive description of the themes was developed, and the interpretations were validated with the participants to ensure accuracy and reliability. This systematic approach allowed the

researchers to distill the lived experiences of nurses during the pandemic into clear and meaningful insights, contributing to the study's objectives.

#### 4. Results and Discussion

This phenomenological inquiry examined the lived experiences of five registered nurses—three females (60%) and two males (40%)—aged 24 to 36 years, who worked in various units such as hemodialysis, medical wards, gynecology, and rooming-in departments. All participants cared for COVID-19 patients during the pandemic, offering unique insights into the challenges and coping mechanisms of frontline healthcare workers. From the interviews, three major themes emerged: A Call to Duty, Unveiling the Challenges, and Resilience in the Face of Adversity, each with several subthemes.

##### Theme I: A Call to Duty

The COVID-19 pandemic underscored the unwavering commitment of nurses to their profession. This theme highlights their deep sense of responsibility and the fulfillment they experienced despite the overwhelming challenges. Nurses believed it was their moral and professional duty to collaborate with other healthcare professionals on the frontlines, providing critical care to save lives when their nation and communities needed them the most.

##### A. Treating and Caring for Patients

Nurses were at the forefront of patient care, spending long hours managing clinical responsibilities such as airway management, medication administration, and intensive monitoring. Their role required flexibility and adaptability, especially during times of staff shortages and high patient admissions. Participant 1 shared, *"During COVID, you had to be flexible because we handled everything, even medications and acted as charge nurses due to staff shortages. There were times when colleagues didn't show up, leaving us no choice but to work straight shifts. You can't abandon your job. We just thought, at least our patients are well cared for, they'll recover, and they'll get to go home."*

Despite the anxiety associated with the pandemic, nurses exhibited a profound sense of responsibility. Participant 2 described their efforts to save patients as deeply personal achievements: *"You do what needs to be done for your patient. For instance, you manage a code, revive them, or refer them properly. Even if no one recognizes it, you commend yourself because you saved a life."*

The emotional toll was particularly heavy when dealing with patient deaths. Nurses often witnessed COVID-19 patients die alone due to strict isolation protocols. Participant 1 expressed empathy for patients and their families, saying, *"You feel sorry for the patients because they're spending so much and yet they're alone. Some die without their loved ones, with only a video call to say goodbye."* Participant 4 echoed this sentiment, noting the difficulty of seeing patients' remains handled without the presence of their families:

*"When a COVID-positive patient died, they were immediately wrapped and removed from the building without their family seeing them. It was painful for us nurses and even more so for their relatives."*

## **B. Fulfillment from Duty**

Despite the challenges, nurses found immense fulfillment in their ability to care for patients and contribute to their recovery. Their dedication brought moments of triumph and professional satisfaction, especially when they successfully discharged patients. Participant 1 recalled, *"After a year, things improved. We started sending patients home alive and well. I remember a pregnant patient who was critical, and her baby's survival was uncertain. We fought hard, and in the end, we discharged both mother and baby alive. It felt so rewarding."*

Similarly, Participant 2 shared the personal validation they found in their work: *"There's a positive effect, too. You work overtime because you do what needs to be done for your patient. For instance, you manage a code, revive them, or refer them properly. Even if no one else recognizes it, you feel proud because you saw the signs and acted to save a life."* These moments reinforced their decision to become nurses and reaffirmed the noble purpose of their profession.

This theme encapsulates the duality of the nursing experience during the pandemic—a profound sense of duty intertwined with emotional and physical challenges. Despite the difficulties, nurses remained steadfast in their roles, motivated by their commitment to patient care and the fulfillment derived from saving lives. Their narratives reflect not only their resilience but also their critical contributions to the healthcare system during one of the most challenging periods in modern history. The insights gained from this theme emphasize the importance of recognizing and supporting the vital role of nurses in crisis situations.

## **Theme II: Unveiling the Challenges**

The COVID-19 pandemic exposed nurses to an array of overwhelming challenges, ranging from emotional and physical struggles to systemic inadequacies. These burdens were amplified by the unprecedented demands of the crisis, often pushing nurses to their physical and mental limits. This theme reflects the multifaceted challenges nurses face in their daily battles on the frontlines.

### **A. Emotional Impact**

Nurses consistently voiced their fears and anxieties about contracting COVID-19 and, more importantly, transmitting the virus to their loved ones. Participant 1 shared, *"It's scary because as long as you're exposed to the illness, there's a heightened risk of bringing it home. My father is a dialysis patient, and my mother is diabetic."* Similarly, Participant 2 expressed deep concern for their immunocompromised sibling and elderly parents. For Participant 3, the fear was particularly personal as they were pregnant during the pandemic and uncertain about the virus's transmission modes and potential effects.

The emotional toll extended beyond fear to feelings of stress and isolation as nurses struggled to maintain connections with their families while adhering to rigorous work schedules. Participant 3 described being forced to leave their child in the province: *"I imagined us strolling in a mall, but instead, I was working in the hospital."* These sentiments were echoed by Participant 2, who shared the sacrifice of working holidays, stating, *"Imagine going to work on Christmas or New Year while your entire family is at home, and you're not even compensated with double pay."* These narratives illustrate the deep emotional sacrifices nurses made during the pandemic, often prioritizing their duty over personal connections.

## **B. Physical Challenges**

The physical demands of working during the pandemic were immense, with long hours spent in personal protective equipment (PPE) being one of the most cited challenges. Participant 3 recalled, *"There was a time when I was in the ICU for just an hour, and I was already drenched in sweat and feeling dizzy because of the PPE."* Participant 4 similarly described the stifling conditions: *"The PPE, especially the Type A suits, were so hot and moist. It was hard to see clearly, and we didn't even have air conditioning then."*

Beyond discomfort, the need to conserve limited PPE supplies often led to extreme measures, such as foregoing basic needs. Participant 1 shared, *"There was a time I wore a diaper during my shift because we couldn't afford to waste PPE by taking breaks."* The combination of these physical obstacles and increased workload led to severe exhaustion and burnout. Participant 2 summarized this sentiment: *"With the rising cases and never-ending PPE, the workload felt unbearably heavy, both physically and emotionally."*

## **C. Inadequate Support and Resources**

The systemic shortcomings in the healthcare system exacerbated the difficulties faced by nurses. The shortage of staff forced many to work overtime. Participant 1 noted, *"During the peak of COVID, many colleagues resigned, leaving us no choice but to work beyond our shifts."* This was further compounded by the lack of proper PPE during the early stages of the pandemic. Participant 4 stated, *"We worked 24-hour shifts without proper protective gear, relying on reusable PPE that increased the risk of infection."*

Nurses also felt undervalued and under-compensated despite the risks they took and the sacrifices they made. Participant 3 lamented, *"It's not just about compensation. Our health and efforts weren't appreciated."* Participant 4 added, *"We weren't well-compensated for all the struggles and exhaustion we endured."* The lack of institutional and governmental support further demoralized them, with Participant 3 criticizing the absence of psychological support: *"Management didn't consider the psychological effects on us or provide stress management resources."*

The challenges faced by nurses during the COVID-19 pandemic were multifaceted, deeply affecting their mental, physical, and emotional well-being. These struggles were exacerbated by systemic inadequacies, including insufficient staffing, lack

of PPE, and inadequate support from management and government. Despite these overwhelming challenges, nurses continued to fulfill their duties, often at great personal cost. Their stories underscore the urgent need for systemic reforms to provide adequate resources, support, and recognition for healthcare workers, ensuring their well-being and resilience in future crises.

### **Theme III: Resilience in the Face of Adversity**

Amidst the overwhelming challenges brought by the COVID-19 pandemic, nurses demonstrated remarkable resilience by developing coping mechanisms to manage their physical and mental stress. Their ability to adapt and find emotional anchors highlights their resourcefulness and determination to maintain their well-being while continuing to perform their critical roles.

#### **A. Coping Strategies and Support Systems**

Nurses often derive strength from their patients' and their families' gratitude and appreciation. Participant 1 reflected, *"The gratitude of our patients and their families lightened our burden and gave us a sense of purpose."* Such recognition validated their efforts and served as a powerful motivator to persevere, even in the most difficult circumstances.

Many participants turned to leisure activities to manage stress and maintain their mental health. Participant 2 shared, *"I sing, play the guitar, watch series, and even go to the beach to relax and recharge."* Similarly, Participant 4 found solace in recreational activities, stating, *"Riding my bike or going on trips is my way of relieving burnout."* These simple yet meaningful activities helped nurses find moments of normalcy and joy amid the chaos of the pandemic.

Another significant coping mechanism was sharing experiences and staying connected with loved ones. Participant 3 expressed, *"Talking with my family in our group chat every day was one of my coping strategies to relieve stress."* This sense of connection provided emotional support and reinforced their resilience during such isolating times.

Spiritual practices also played a vital role in fostering resilience. Participant 3 added, *"I made it a point to pray or go to church at least once a week after duty."* This spiritual connection served as a source of strength and comfort, helping them find inner peace amidst the uncertainties of their work environment.

#### **B. Management Support**

Participants emphasized the importance of systemic improvements to boost morale and job satisfaction among nurses. They called for salary increases, solutions to understaffing, proper recognition of nurses' contributions, and effective management practices. These measures, they suggested, would not only encourage nurses to remain in the Philippines but also foster a sense of career fulfillment.

The nurses' ability to adapt and their emphasis on actionable systemic improvements reflect a dual perspective—one rooted in personal resilience and the other

in advocating for broader institutional change. Their suggestions align with the broader understanding of resilience as a combination of individual strategies and external support systems.

The resilience demonstrated by nurses during the COVID-19 pandemic underscores their dedication and resourcefulness in navigating adversity. By relying on personal coping mechanisms such as patient appreciation, leisure activities, familial connections, and spiritual practices, they found ways to manage the immense stress of their roles. Simultaneously, their call for systemic improvements highlights the need for a supportive and equitable healthcare system that acknowledges and addresses the challenges faced by frontline workers. These findings emphasize the importance of fostering both individual and institutional resilience to ensure the sustainability of the nursing workforce in times of crisis.

The outcomes of the study have provided insights into the lived experiences of the respondents. The first theme—A Call to Duty—highlighted how nurses fulfill their duty to stand alongside and collaborate with healthcare professionals on the frontlines in order to save lives at a time when their nation and people most needed them. Nurses have a critical role in providing support to patients and ensuring that they receive the best possible care that they can get. They shared their experiences and expressed their fulfillment and satisfaction in performing their noble duty. According to the study of Fawaz *et al.* (2020), nurses have a crucial role and actively participate in monitoring the community to ensure that patients receive high-quality care against COVID-19.

The second theme—Unveiling the Challenges—focused on the overwhelming burden that nurses faced while battling the pandemic. The participants admitted to feeling fear and anxiety of contracting and spreading COVID-19. Faced with this unknown and unpredictable situation, nurses still applied to be part of a battlefield. They expressed their thoughts and concerns about their daily battles in facing the risk of COVID-19. Lagman *et al.* (2021) found that healthcare workers in the Philippines experienced high-level distress and burnout during the pandemic due to several factors such as limited human resources, long working hours, and inadequate pay. Sampaio *et al.* (2020) revealed that working long hours results in greater levels of stress, anxiety, and depression among nurses. This also implies that working overtime has a negative impact on nurses' mental health status.

The third theme—Resilience in the Face of Adversity—explored nurses' coping mechanisms for dealing with their physical and mental challenges. Many recalled spending as much time as they could outside and developing a stronger spiritual bond with God, others, and themselves. Historically, the term “resilience” encompasses both physiological and psychological aspects, and the latter is personal to individuals, with some people having more developed strategies for personal resilience than others. Understandings of resilience vary between populations, contexts and cultures (McDonald, Jackson, Wilkes, & Vickers, 2012).

One factor that made nurses more resilient during the surge of the COVID-19 pandemic was the gratitude of their patients. The interviews revealed some of the participants' talent and strategies, which is their way to cope with stress during the COVID-19 pandemic to keep them sane. Some of the participants' talents and strategies include singing, playing guitar, watching movies and series, taking a ride, and listening to music. Letting other people know their thoughts and experiences also helped them release their stress and cope up with their everyday battles in the hospital.

## 5. Recommendations

Based on the findings of this study, several recommendations are proposed to address the challenges faced by nurses and improve their overall well-being, particularly during health crises. Healthcare institutions and policymakers should prioritize increasing nurses' salaries and providing additional allowances to reflect the high-risk nature of their work. Addressing understaffing through increased recruitment and creating contingency plans during crises is critical to reducing the workload burden on nurses. Institutions should also ensure a continuous and adequate supply of personal protective equipment (PPE) and other essential resources to minimize health risks and support nurses' physical needs during emergencies.

In addition to material support, mental health programs tailored for healthcare workers are vital. Counseling services, stress management workshops, and regular debriefing sessions can help nurses manage the emotional toll of their work. Promoting work-life balance through sufficient time off and opportunities for rest is essential in mitigating burnout. Furthermore, improvements in hospital work environments, such as ergonomic rest areas and air-conditioned facilities, can help alleviate physical strain.

Education and training should also be enhanced to prepare nurses for crisis situations. Regular training on infection control, proper PPE use, and mental health management can equip nurses with the skills and knowledge necessary to handle emergencies effectively. Resilience-building activities should be integrated into nursing curricula to prepare future healthcare professionals for the demands of the profession.

Lastly, further research should be conducted to explore the long-term impact of pandemic-related work on nurses' mental and physical health. Investigating innovative strategies to enhance job satisfaction and resilience among nurses, particularly in resource-limited settings, will provide valuable insights for future crises. By implementing these recommendations, healthcare institutions can ensure the well-being of nurses and maintain the quality of care provided to patients, ultimately strengthening the healthcare system's resilience.

## 6. Conclusion

This study explored the lived experiences of Filipino nurses during the COVID-19 pandemic, focusing on their sense of duty, the challenges they faced, and their resilience amidst adversity. Nurses displayed an unwavering commitment to their profession, standing on the frontlines to save lives despite the emotional and physical tolls. Their work often extended beyond their clinical responsibilities, encompassing moral and emotional care for patients. However, the pandemic revealed significant vulnerabilities in the healthcare system, including inadequate staffing, insufficient resources, lack of protective equipment, and inadequate support and compensation. These systemic deficiencies amplified the emotional stress, physical exhaustion, and burnout experienced by nurses.

Despite these challenges, nurses exhibited remarkable resilience, relying on patient gratitude, personal coping strategies, and spiritual connections to persevere. Their stories highlight the critical need for systemic changes to better support healthcare workers, especially during crises. Ensuring their well-being is not only an ethical obligation but also a practical necessity for maintaining the quality and safety of healthcare delivery.

## Conflict of Interest Statement

The authors of this study declare that there is no conflict of interest regarding the publication of this research. No financial, personal, or professional relationships have influenced the research process, data collection, analysis, or interpretation of the findings. This work has been conducted with integrity and transparency, adhering to ethical guidelines to ensure unbiased and independent results.

## About the Author(s)

The authors are nursing students guided by their faculty adviser who worked together to complete this research as part of their academic journey.

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