

# Nursing home staff responses to pandemic reveal resilience, shortcomings: study

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The ongoing health disaster of the past 12 months has exposed the crises facing nursing homes in Canada and the United States and the struggles of the staff working in them.

Writing in the *Journal of Comparative Policy Analysis: Research and Practice*, Ph.D. student Daniel Dickson, his supervisor Patrik Marier, professor of political science, and co-author Robert Henry Cox of the University of South Carolina perform a comparative analysis of those workers' experiences. In it, they look at Quebec (including those at government-run CHSLDs), British Columbia, Washington State and Ohio by reviewing 336 articles in six newspapers published between late-February and mid-June 2020.

"We wanted to see how the pandemic affected the discretion of frontline workers," Dickson says. "Their professional knowledge, their experience and their abilities make them really valuable assets."

Even if, the researchers note, they are hardly treated as such. For years, [care workers](#)—85 percent of whom are women and 50 percent of whom are born outside the country, according to a recent Canadian study—coped with low levels of pay, status and likelihood of advancement. Now, they write, care workers are also faced with "an existential threat to themselves or their immediate families" in the form of the novel coronavirus.

To analyze how care workers responded to this added job stressor, the

researchers adapted a trusted organizational studies model first developed by Albert Hirschman in 1970. They could take up a pattern of resistance, meaning increased absenteeism or refusing to work without added compensatory pay; they could try innovation, in which they communicate their concerns to management and create new protocols better suited to a new, more dangerous reality; or they could apply improvisation, where frustrated employees stay out of a sense of duty and try to make do with what they have.

"We expected a lot of resistance, that frontline workers would be looking for ways to diverge from policy intent or just quit their jobs," Dickson shares. "The ideal case would be more innovation, where the experiences of frontline workers would be privileged and a lot of weight would be given to their knowledge. But we know that they are not afforded that position in the policy process; they are not given this kind of esteem or support."

## **Coping in the epicentre**

Resistance was widespread in Quebec. The research sample of 336 newspaper articles contained 45 that explicitly mentioned resistance, with 78 percent of those originating in Quebec. Absenteeism was especially high in Montreal, where nursing and long-term care homes were hit early and hard.

The province was also the leader when it came to mentions of improvisation. A total of 77 articles discussed some form of improvisation, with 79 percent originating in Quebec. This included articles on the government recruiting health professionals from all fields and calling in the army as well as care workers using coffee filters beneath their handsewn face coverings due to a shortage of N95 masks.

Innovation was noted in British Columbia, where staff were able to

adhere to protocols by adopting Zoom meetings for virtual patient visits and "doorway bingo," and in the US, where staff stepped in for family unable to see their dying loved ones. These responses, the authors note, stemmed most from workers' experience and expertise.

The analysis exposed some serious fault lines in long-term care regimes north and south of the border, Marier adds. "We talk about how great Canada's health-care system is vis-à-vis that of the United States, especially in terms of universal accessibility, but we are not that different when it comes to long-term care."

**More information:** Robert Henry Cox et al, Resistance, Innovation, and Improvisation: Comparing the Responses of Nursing Home Workers to the COVID-19 Pandemic in Canada and the United States, *Journal of Comparative Policy Analysis: Research and Practice* (2020). [DOI: 10.1080/13876988.2020.1846994](https://doi.org/10.1080/13876988.2020.1846994)

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