President’s Message

The “Great Resignation” and Our Collective Spark

https://doi.org/10.13178/jnparr.2022.12.01.1202

It is now over two years since the SARS-COV-2 virus spread its infection, impacting the healthcare community globally and touching each one of us at a personal level. The Philippine Nurses Association of America (PNAA) created the COVID-19 Task Force on April 3, 2020, in the hopes that the COVID-19 surge is a temporary crisis. Unfortunately, that is not the case. Despite of the COVID-19 vaccine released to the public in early 2021, only a total of 63% percent of people (208.75 million) is fully vaccinated in the United States as of January 19, 2022 (Our World in Data, 2022). Our organization worked alongside the Asian Pacific Islander American Health Forum together with its partner organizations in educating healthcare workers and the community on how to prevent the spread of SARS-COV-2 virus based on the Centers for Disease Control (CDC) guidelines. Through our community partners and resources, PNAA Foundation and PNAA translated health materials in Tagalog and Ilokano. The translated content compared the signs and symptoms of Flu with SARS-COV-2 and included facts on the importance of vaccines to build immunity.

Despite these efforts, world leaders realized that the dissemination and communication of COVID-19 information must highlight facts not myths. According to Dr. Tedros, Director-General of the World Health Organization, “We’re not just fighting an epidemic; we’re fighting an infodemic where fake news spreads faster and more easily than this virus and is just as dangerous.” Through our grant funding, PNAA created a podcast, RISE UP (Real Issues and Stories of Everyone and Us Podcast) to bring in the knowledge of clinical experts and empower the audience to differentiate misinformation and help people make their own choice based on facts. We interviewed trusted leaders in our Filipino-American community from nurses and medical doctors who shared their expertise and personal stories on what is happening in the ground. As public health stewards, this responsibility to curate information through webinars, translated health materials, and podcast will hopefully propagate as people can now have an alternative source of reliable information from trusted experts that represent the interest of our Filipino American community.

Two years from the onset this pandemic, COVID-19 persisted in its mutation with the Omicron variant. With this latest variant, our healthcare administrators and nursing leaders are stretched to their capacity to find creative strategies to retain and recruit burn-out health care workers. Nurses and essential workers go on quarantine due to exposure, others getting sick and worse, quitting, or leaving the workplace for alternative work-life integration offered by traveling and float pool staffing agencies. The socio-economic impact on the hotel and hospitality and entertainment industries continues as they strived to recover and open the doors of their business establishments despite the constant changes with the masks/social distancing guidelines. The ambivalence, strong opposing views between political parties have led to an almost widespread sentiment expressed by thought leaders as the “great resignation.” According to Thompson (2022), the term “great resignation” was coined by Anthony Klotz, a professor from Texas A&M whose prediction for 2021 framed a mass exodus from the workforce.

What is the great resignation within the context of nurses and healthcare professionals?

Within the context of our current times and COVID-19, the scientific community are pivoting on their views that COVID-19 will become an endemic. CDC describes an epidemic as an unexpected increase in the number of disease cases in a specific geographical area whereas, the World Health Organization declares a pandemic when the disease’s growth is exponential and the virus covers a wide area and affects several countries and populations (Columbia Mailman School of Public Health, 2021). The WHO defines the epidemic, pandemic, and endemic based on the disease’s rate of spread. With COVID-19, the expectation is that this will become an endemic which means that the pandemic will not end with the virus disappearing but rather, that people will gain immune protection from vaccination and from natural infection such as that there will be less transmission which leads to lesser COVID-19 related hospitalization and death even if the virus continues to circulate (Harvard T. H. Chan, 2021). The ‘great resignation’ that SARS-COV-2’s presence is permanent yet remains invisible and could still be deadly (vaccinated or not) challenges our vulnerability and ability to re-calibrate our daily habits, personal interaction, health choices, circle of friends, and workplace environment.

Despite the great resignation, JNPARR’s Editorial Board spearheaded by our Editor-in-Chief Dr. Cynthia Ayres, remained resilient. We are extremely grateful for the contributions of our authors in Volume 12 Number 1, showcasing a variety of
research topics centered on top health concerns for Filipino-Americans: hypertension and cancer. Two topics look at pedi-
atriic issues related with lead and the utility of urine samples as biomarkers while there are two articles on patient education
and practice. This gives me hope that our frontline nurses, educators, and researchers transformed this time of “great resig-
nation” as a moment of “great opportunity” by focusing on their body of work and contributing to new knowledge. Many
of us have also resigned and adopted to the new normal. Personally, I know that my “old self” remains intact in terms of
my own aspirations, my desire to continue to lead our organization, in staying resilient and hopeful.

On one hand, the great resignation within the context of nursing shortage depleted everyone’s energy but revitalized the
recruitment world to offer alternatives from bonus incentives and flexible work schedules. COVID-19 brought into the
forefront the cyclical problem of the healthcare industry’s reliance on internationally educated nurses (IEN) during short-
age. This highlighted America’s educational system who fall short in growing a pipeline of nurses to address the demands
and the need for more faculty, and grants and scholarships to attract the younger generation to go into nursing. The harsh
reality that cold cash will solve the staffing crisis sounds counter-intuitive to the tenets of nursing as a caring profession, but
this also attracted second-career options for other individuals who are bringing their diverse skills in marketing, computer
science, arts, and design. This gig economy where healthcare workers become free agents presents an opportunity for the
staffing industry to offer options to low-income workers to switch jobs and make more money. As staffing experts venture
into the space of virtual nursing to augment the nursing shortage, I hope that individuals particularly our nurses, profit
from this great resignation in a positive and equitable manner and reimagine how we can transform our nursing profession
without causing additional brain-drain to our homeland.

The Year 2022 offers challenges and opportunities for PNAA as we are pulled into different ways to meet our members’
needs and recruit new members. Some of our chapters are going through their own moments of ‘great resignation’ as
they struggle to retain members. With the national election coming up in May 2022, some chapter leaders are at a cross-
road whether to volunteer and serve on top of competing priorities and family responsibilities. PNAA have offered
incentive-based opportunities to promote engagements from membership raffles, to iPad, and gift cards. Our committees
have worked hard through this pandemic offering new programs from master class workshops to self-help webinars. We
delivered world-renowned speakers at the comfort of your homes. PNAA’s collaborative partnerships with mainstream
organizations helped us navigate the challenges brought by the pandemic from Anti-Asian hate crimes to addressing health
inequities. I hope that our chapter leaders see these great opportunities to amplify PNAA’s work and share why it is signifi-
cant to continue membership to PNAA.

With less than six months remaining in my term as the 21st President of PNAA, my priority continues to focus on our
“Heal our Nurses” campaign in addressing the psychosocial needs and overall mental well-being of our members. I hope
that we can look back together five years from now, on how we brought our strong and empowered voices through our
stories memorialized not only in our publications but in the meaningful relationship and network that we formed during
this unprecedented crisis. My wish at the end of my term is for our members to agree that “WE have overcome the great
resignation in our collective stories of achievement, resilience and kindness” through our shared spark amidst the crisis.

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