



## Original Research

## Insightful The Precious Reflection Of Volunteer Nurses Caring For Covid-19 Patients

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## ABSTRACT

**Background:** The shock of the Covid-19 transmission forced the implementation of learning methods by volunteer nurses during the academic period of learning. Nurse volunteers face the complexities of dealing with Covid-19 as the backbone of saving the unavoidable Covid-19 victims. However, the exploration of the valuable experience of volunteer nurses is still minimal, even though the information provided has implications for efforts to improve the health care system during a pandemic. This study reports on the experience of volunteer nurses in hospitals in treating Covid-19 patients.

**Methods:** This qualitative research uses a phenomenological approach. Purposive sampling technique was used to determine the sample, the exploratory process involved seven volunteer nurses and two head nurses through in-depth interviews and observations to obtain an in-depth narrative about the volunteer nurse experience. This research was conducted in two hospitals located in South Sumatera Province. The process of data analysis was carried out using the Colaizzi's method. The formulation of the theme begins with the writing of the transcript, the formulation of coding, categories, sub-themes until finally the formulation of the theme. The ethical clearance has been submitted prior to the conduct of the study and has been declared to have passed the ethical review.

**Results:** Based on the results of Colaizzi's analysis, three themes have been formulated, namely the driving factors for volunteering, preparation as a volunteer nurse and events caring for Covid-19 patients.

**Conclusion:** This research implies that it is necessary to modify the volunteer nurses in interacting and communicating with patients and contacting the families of volunteer nurses to increase the retention of volunteer nurses.

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## **INTRODUCTION**

The Covid-19 pandemic created confusion and uncertainty among patients in the health system. The World Health Organization has declared the Covid-19 outbreak a health emergency at the global level (He et al., 2021). The coronavirus pandemic as the cause of Covid-19 has still not subsided in Indonesia. The high accumulation of positive cases and death rates in Indonesia fluctuates in various remote areas (Kementerian Sosial, 2020; Lazarus et al., 2021). However, the number of available nurses is still lacking. Especially during this Covid-19 period, Indonesia needs much medical personnel, including nurses, because the number of patients who must assist is far more significant during the pandemic (Kementerian Sosial, 2020).

Many challenges need to be addressed in handling the problem of the coronavirus pandemic. The need to increase the number of volunteer nurses is one of the challenges faced by Indonesia. The second challenge is optimizing the provision of knowledge for them about Covid-19 handling standards (Biddle & Gray, 2020; Gan et al., 2020; Gresh et al., 2021; Rupley et al., 2020). Implementing various plans to fight the coronavirus is even more difficult because of the performance of large-scale social restrictions. Furthermore, the number of victims infected with the coronavirus or Covid-19 has increased by almost a thousand people per day (Alomar et al., 2021; Follmann et al., 2021); it is imperative to increase volunteer nurses.

Based on a systematic review, obtained information that the motivation of volunteers occupies a powerful position in maintaining positive volunteer behavior and long-term retention (Chacón et al., 2017). Volunteer motivations are a critical factor in both volunteer recruitment and the continuation of volunteer activity (Alomar et al., 2021; Kpanake et al., 2019; Poortaghi et al., 2021; Same et al., 2020). Moral values were the most important motivations among volunteers (Alomar et al., 2021; Kpanake et al., 2019). Efforts to encourage health students and interns to volunteer and providing those with appropriate educational programs are recommended. It is important to explore the experiences of volunteer nurses, as they are as part of the health care system and their caring contribution will affect the quality of health services.

In China, the conditions experienced by volunteer nurses, firstly, appear tired, discomfort and helplessness due to the high intensity of work and concern for patients and their family members are the beginning of the emergence of negative emotions. Second, overcoming or managing oneself includes psychological and life coping, altruistic implementation, group support, and cognitive rationality. Third, growing affection and increasing gratitude, greater responsibility, professional spirit, and the ability to do self-reflection.

In the end, positive emotions gradually develop and the emergence of negative emotions (Sun et al., 2020). The results of previous studies provide a psychological picture of the Covid-19 disaster volunteers experiencing mild anxiety, mild depression, and mild stress (Agustin et al., 2020). However, no research explores qualitatively specifically for nurses related to the reasons for volunteering, the preparations that must be passed, and volunteers' needs when caring for Covid-19 patients.

## **MATERIALS AND METHOD**

This qualitative research applies a phenomenological approach to identify the experiences of volunteer nurses when assigned to treat Covid-19 patients. Purposive sampling technique was used to determine the participants were seven volunteer nurses who were coded P1-P7, and two head nurses. The inclusion criteria of volunteer nurses

are who underwent online during academic learning, have experience working in a hospital at least three months and were willing to become participants, then the exclusion criteria were being in a state of illness.

The in-depth interviews with observations were carried out during in-depth interviews and comments in the head nurse's room. Researchers ask questions using questions in the in-depth interview guide, and sometimes new questions arise based on answers given by previous participants. The questions asked are not always appropriate and not sequentially as stated in the in-depth interview guidelines.

Interviews in this study only brought notes containing the main topics to be asked. The interview method used is an unstructured interview that follows the flow of the subject's conversation, but interview guidelines are used as a reference. At the time of conducting the interview, the researcher must describe these general guidelines and adapt them to the conditions of the participants during the interview. This study also used this interview to focus on the experience of aspects of the subject's life, carried out from February-April 2021.

The validity of the data was tested by detailed observation, triangulation, peer debriefing, comparing with the results of other studies and member checking. Data analysis is systematically searching, and compiling data obtained from interviews, field notes and documentation so that they are easy to understand and can inform the findings to others. After completed the entire data collection process, the researcher analyzed it using a Colaizzi's analysis.

This analysis begins with organizing the data, breaking it down into units, synthesizing it, arranging it into a pattern, choosing which components are essential and what will be studied, and making conclusions. Researchers collected participant data, including age, length of work, year of graduation, and gender. Researchers listened to the results of repeated interviews and made transcripts. Furthermore, researcher reads the transcript many times so that the meaning can be formulated by marking important participant statements. Followed by grouping the data to be expressed as a category. Based on these categories, the researchers grouped them into sub-themes and main themes.

The following is an in-depth research interview guide why are you willing to volunteer, how was your experience when treating Covid-19 patients, would you please tell me, what is the essential thing to prepare before volunteering, do you have any concerns, what actions are taken when anxiety is felt, what problems must be faced when treating COVID-19 patients, what kind of support do you need when you volunteer, and what lessons have benefited you personally and professionally. The study protocol has obtained ethical approval from the Health Polytechnic Ethics Committee of the Palembang Ministry of Health, number 950/KEPK/Adm1/I/2021.

## **RESULTS**

This study describes the experiences of 7 volunteer nurses aged between 21-24 years with minimum 3 months of work experience, unmarried, five female participants and two male participants. The data analysis process was carried out immediately after the in-depth interview, so that it could immediately be seen the similarity of meaning to the information conveyed. When a similarity of meaning was found between participants, the in-depth interview was stopped, and the similarity emerged after interviewing seven participants.

Determination of 7 participants was considered based on data saturation and determination of saturation was carried out simultaneously between the theme formation process and data collection. When the information disclosed by the participants is almost the same or similar, the in-depth interview process is terminated. Participants came from different two hospitals in South Sumatera Province, Indonesia.

All volunteer nurses are placed in hospitals that provide care for Covid-19 patients. Two head nurses were also participants in the study, as an effort to triangulate the method, aged 35 and 40 years old, female and married. All participants have agreed with the formulation of the resulting theme. Each theme presented to participants is accompanied by an interview quote, according to the words spoken by the participants.

The following table shows the process of forming a theme, starting from interview quotes, sub-themes, and themes.

**Table 1.** Theme Formulation

<b>Theme</b>	<b>Sub theme</b>	<b>Interview quotes</b>
The driving factors for volunteering	Humanitarian reasons	I am concerned because the number of patients is increasing day by day. (P2)
		My primary motivation is being driven by a sense of humanity and also wanting to help medical personnel. (P4)
		We carry out humanitarian duties, if not from us, who else? (P5)
		For me, being a volunteer starts with a calling from the soul, being a Covid-19 volunteer is a noble and challenging job. (P1)
		With a high spirit to help others, it is not considered burdensome. (P7)
	Feeling concerned	I feel sad about the many victims of covid-19 who fell, many died. (P6)
		I'm sad to see the number of victims increase. (P1)
		I am aware of the threat of the coronavirus, which can strike at any time. Moreover, in carrying out duties as a volunteer, he often interacts with positive Covid-19 patients. (P3)
	Professional responsibility	I'm sad to see the number of victims increase. (P4)
		For me, volunteering in this pandemic situation is a call from the state that must be done, especially for me, who is a nurse. (P5)
I am very burdened when I see the increasing need for medical personnel and health workers (P2)		
To devote herself as a nurse to help the government and her colleagues who have become volunteers. (P4)		
		Being a nurse during this pandemic is an act of heroism for the nation; my soul feels called to help fellow nursing professions. (P1)
		I want to help Indonesia to overcome this covid-19 pandemic and also to add experience and insight.

Theme	Sub theme	Interview quotes	
		(P3) Help break the chain of the spread of Covid-19. As nurses, we must obey the oath of the nursing profession (P6)	
Preparation as a volunteer nurse	Physical readiness	It is necessary to practice wearing complete personal protective equipment because it is an experience of its own after being in an isolation room. (P1)	
		I was also required to wear personal protective equipment and enter the isolation room; this is a challenging experience, so it must be taught. (P3)	
		The practice of wearing personal protective equipment requires extra patience because wearing a mask can also reduce the oxygen that enters the body. (P2)	
		Previously, I only saw medical personnel wearing personal protective equipment in videos. (P5)	
			Can't breathe freely, can't eat and drink for a long time until you have to hold back on urinating. (P6)
	Psychological readiness	Psychologically we must be ready and strong in various situations. (P2)	
		We hear news of disease transmission constantly; the virus is easy to transmit, we are terrified of being infected. (P3)	
		I felt apprehensive the first time I treated a patient, was afraid of it, and still had some doubts. (P5)	
		I am not yet ready to treat patients, but we have to do it even though we are worried about being prepared. (P6)	
	Readiness of understanding about personal protective equipment	There are no worries in dealing with Covid-19 patients, considering that we have been equipped with Personal Protective Equipment. (P1)	
Convince yourself that you will not be infected if you continue to wear complete Personal Protective Equipment when interacting with patients. (P2)			
Although I often work in isolation rooms, to be honest I'm not too afraid of getting infected. The important thing is to continue to wear complete personal protective equipment and comply with health protocols. (P6)			
		Don't panic when dealing with Covid-19 patients, just relax and enjoy and happy to carry out their duties as volunteers, on the other hand, there are those who judge it because of money and pay. (P4)	
Volunteer administration readiness	I went through a number of stages such as administrative selection, online interviews, and health screening. (P4)		

Theme	Sub theme	Interview quotes
		I continued to register, then I did a Medical Check Up, and attended training. (P2)
		I follow the procedure given by the hospital in need. (P7)
Events caring for Covid-19 patients	lack of communication interaction	there are limitations to interacting with patients. (P2)
		wearing this protective equipment makes it difficult to speak and assess the patient's condition. (P3)
		Collecting conditions with patients is very difficult because you can't talk directly. (P5)
	getting closer to God	maybe this condition makes me more obedient to worship. (P1)
		Even though I'm afraid of being infected, I believe in the greatness of God. (P3)
		After all, everything is God's destiny, I have to believe in it. (P5)
	Getting the most beautiful impression	getting the experience of caring is a memorable experience. (P7)
		feel valuable if you can take care of patients, help during the pandemic. (P2)
		It's very moving to treat Covid patients, there are a lot of uncertainties to deal with. (P6)
	The importance of environmental support, deep hope	the resilience of the accompanying family strengthens me in caring for patients. (P4)
My family's support really strengthens me so that I can continue to care for patients. (P6)		
I am grateful that now my husband, children, parents understand my work. (P7)		
need environmental assistance in helping patients during this pandemic (P3)		
		I hope that understanding support for our emotional state will get better. (P5)

## DISCUSSION

The problem of Covid-19 has had a tremendous impact on all aspects of human life, and many lives have fallen. The high number of Covid-19 victims indicates an imbalance in the number of health workers and the severity of the Covid-19 problem that threatens human life. The following discussion is presented based on the themes that have been formed and based on research results, implications for nursing care during the Covid-19 pandemic in hospitals.

Theme 1: The driving factors for volunteering (humanitarian reasons, feeling concerned, professional responsibility). The majority of participants made humanity the main reason for becoming a volunteer nurse. In keeping with Watson's theory of value and deep respect for the wonders and mysteries of life, Watson recognizes the spiritual dimension of life and believes in the internal power of the healing and healing process.

Volunteers are a tremendous resource in Indonesia by considering the total population (Kementerian Sosial, 2020). Humanitarian workers and volunteers work

based on humanity, neutrality, impartiality and independence (Biddle & Gray, 2020; Poortaghi et al., 2021; Sun et al., 2020; Turtle et al., 2015). Volunteer motivation is a critical determinant in recruiting volunteers and the sustainability of volunteer activities. The most important motivation is the moral values of the volunteers. The training is an effort to encourage volunteer nurses as a recommendation for preparation materials.

A volunteer nurse is an individual or assembly of nurses proficient and caring to function voluntarily and truthfully in disaster management efforts. Volunteers required competence, fast ability and precision, prioritizing actions, synchronizing, being efficient and effective, responsibility, establishing affiliations, encouraging, and non-discriminate, as long as a volunteer does not spread belief, advocating gender equality and respect local wisdom (Kementerian Sosial, 2020).

The willingness of healthcare professionals to arrange services on the backbones of an outbreak is stimulated by many considerations. It dismisses also fluctuate by epidemic and segment. Psychological stress, epidemic above experience, safety involvement at the period of contagion (Khalid et al., 2016; Oh et al., 2020; Turtle et al., 2015).

Another study stated that the experience of disaster volunteers included having the motivation to help according to their field of expertise and the feedback facilities they received during and after carrying out their volunteer duties (Kpanake et al., 2019; Lazarus et al., 2021; Victoria, 2020). Professional responsibility is also an essential component in determining the motivation of volunteer nurses to be willing to carry out this profession. Motivation is a force contained in humans that causes, directs, and organizes behavior. This behavior arises because of the encouragement of internal factors and external factors.

Behavior is seen as a reaction or response to incitement. Performance occurs since motivation or drive directs individuals to accomplish by the interests or goals to be achieved. Without encouragement, there will be no force that requires the individual to a mechanism for the emergence of behavior. The need activates the drive because the market generates a purpose, and this drive ultimately starts or contributes to behavioral mechanisms. Likewise, the agency that occurs is that there are participants. The profession's sense of humanity, concern, and responsibility motivated participants to become volunteer nurses.

Theme 2: Preparation as a Covid-19 volunteer nurse (physical, psychological readiness, use of personal protective equipment and administration). Disaster conditions will provide various physical and psychological impacts for each individual, including disaster volunteers. Disaster volunteers are a vulnerable group who can experience physical and psychological problems. Various Covid-19 disaster management activities have caused different psychological responses for health workers who treat patients and volunteers on duty.

Some of the psychological reactions are negative emotions such as fatigue, discomfort, and helplessness caused by high-intensity work, fear and anxiety, and concern for patients and family members. Individual coping includes psychological and life adjustments, selfless actions, team support, and rational cognition. Negative psychological responses develop alongside positive psychological responses (Sun et al., 2020).

The increased workload of volunteer nurses due to an unpredictable increase in the number of sufferers also occurred in participants, especially since they were unfamiliar with personal protective equipment. Therefore, the attendance of volunteer

nurses is very imperative throughout the pandemic. Hiring health workers to provide services during epidemic outbreaks of infectious diseases remains challenging to accomplish.

The investigation in the UK conveyed that only 1.7% of health care experts had volunteered to work in West Africa because of the Ebola outbreak. In particular, the shared facilities obtained by volunteer health professionals include receiving training, availability of adequate care (Draper & Jenkins, 2017; Turtle et al., 2015), perceived professional obligations, support from hospital administration, financial compensation (Khalid et al., 2016), protection of adequate equipment, good staff, and family support (Jacob et al., 2021). Inadequate information, fears of being infected and concerns of their families are the most cited reasons for nurses not to help on the front lines (Solomon et al., 2014; Turtle et al., 2015).

Psychological problems experienced by a disaster volunteer is a sense of stress during activities as a volunteer. Disaster volunteers also convey the fear of death to produce cognitive preparation, positive and negative emotions (Sun et al., 2020; Travers et al., 2020). The service performed by volunteer nurses like heroes is based on a sincere intention to sacrifice accompanied by a high sense of responsibility and deep concern.

Volunteer nurses are very supportive of services at hospitals to maintain the resilience and continuity of COVID-19 services for medical personnel at the forefront.

The high humanitarian spirit of nurses throughout Indonesia to join hands in fighting Covid-19 at the forefront. After completing the training, the nurses work in hospitals where Covid-19 patients are treated with accommodation attention.

Theme 3: Events caring for Covid-19 patients (lack of communication interaction, getting closer to God, getting the most beautiful impression, the importance of environmental support, deep hope). Caring for Covid-19 patients by volunteer nurses is an ability to provide attention and action to other people (patients) by assisting, supporting, respecting, and empathizing with physical care to avoid something terrible from happening, supported by aspects of knowledge, patience, hope and courage. For caring to be given, caring moments and interactions between nurses and patients are needed. Many factors determine the success of caring, including intense communication and interaction.

In the Covid-19 condition, because the potential for disease transmission is immense, interaction and communication between volunteer nurses and patients must be minimized and still adhere to health protocols. Caring moments are simple human-to-human interactions. This interaction has the potential to create a moment of transcendence (healing). The moment of concern the nurse refers to the time of acting according to the agreement with the patient. The moment of interacting allows the nurse and patient to decide on the condition in which to care.

Moments of caring are transpersonal; each party feels the interaction with each other to the spiritual level, thus penetrating place and time, opening up the possibility of healing and deep interactions between humans, not just physical interactions. Family support contributes significantly in encouraging the quality of caring for Covid-19 volunteer nurses. Participants need family support when caring for patients and are aware of the risks carried by participants. Psychological problems experienced by volunteer nurses come from within themselves and because of the low family support for volunteer activities (Sun et al., 2020; Turtle et al., 2015).



Family support is considered an added strength for participants to feel confident in their abilities to help Covid-19 patients. Happiness is felt when the patient has shown his recovery. However, fear of being infected was felt when the participants took care of the patient for the first time. It is essential to equip volunteer nurses with cognitive aspects, positive and negative emotions (Belfroid et al., 2018; Lazarus et al., 2021; Oh et al., 2020; Same et al., 2020).

Various conditions experienced by Covid-19 patients have made nurse volunteers closer to God, as stated by participants. The situation changes very quickly, and she surrenders to Allah for the treatment results given to the patient. The participants' spiritual closeness was felt, including the desire to help the patient as optimally as possible, expecting the patient to be physically healthy and spiritually. According to experts, religiosity or spirituality underlies a person in carrying out voluntary activities (Alomar et al., 2021; Kpanake et al., 2019). By treating COVID-19 patients, volunteer nurses are getting closer to God, and the level of sincerity and humility is getting higher.

## **CONCLUSION**

The hospital service system must strengthen the initiation of volunteer nurses to help victims of COVID-19 based on humanity, concern, and professional responsibility. Family support is an integral component to enhancing the intention to help others. Volunteers must optimally prepare physical, psychological and administrative protection so that sincerity to help is reflected in every assistance given, ultimately handing over the treatment results to God Almighty.

Optimizing in mobilizing volunteer nurses for support projects during the Covid-19 pandemic must face many challenges. The development of the rapidly changing situation requires hospital leadership to modify and update practice guidelines. This condition makes the project flexible to adapt to the changes quickly in structure and needs. Greater attention is needed for volunteers to provide comfort, peace of mind in serving patients. The hospital's ability to provide volunteer nurses allows rapid service to critically ill patients with strict supervision.

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