Phenomenological Study: Experience of Voluntary Nurses in Providing Health Services During The COVID-19 Pandemic

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Abstract

Introduction: The COVID-19 pandemic has certainly caused a significant crisis in various groups and populations in the world, especially nurses. The roles and responsibilities that nurses have to play become a dilemma when they not only have to protect themselves, but also their colleagues and their families from this deadly virus infection. This study was to identify the experiences of nurses in providing nursing care to patients during COVID-19 pandemic.

Methods: The study used a phenomenological design. Ten participants were selected by purposive sampling. The data were gathered by conducting in-depth interviews and analyzed by Colllaizi’s method. The data were collected in hospitals of the South Tapanuli area.

Results: The data were gathered by conducting in-depth interviews and analyzed by Collaizi’s method. The result emerged five themes, namely: 1) Motivation of voluntary nurses to provide health services in the COVID-19 pandemic; 2) voluntary nurse psychological response; 3) problems faced by voluntary nurses; 4) the benefits of being a voluntary nurse during the COVID-19 pandemic; 5) the expectations of voluntary nurses.

Conclusion: Voluntary nurses continue to carry out their duties in providing health services in the Covid-19 pandemic even though without any compensation received. The result of this research is recommended to the hospital and government giving the needs of voluntary nurses while providing health services during COVID-19 pandemic.

Keywords

COVID-19 pandemic; health services; voluntary nurses

INTRODUCTION

Starting from the phase when the Global Pandemic COVID-19 outbreak entered Indonesia, nurse is a profession that must carry out its professional obligations to be at the frontline of tackling this virus in health services. When most of the state government and private employees carry out work from home, one of the health professionals who still have to work and continue to serve is a nurse. As a voluntary nurse we should be taking care of our patients even those with COVID-19. The nursing profession during the COVID-19 pandemic was challenged to provide professional health services with the risk of contracting and even becoming victims of COVID-19. The duty of a nurse in the COVID-19 pandemic has certainly caused a significant crisis in various groups and populations in the world, especially nurses.

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19 pandemic is to meet the basic needs of patients and provide education so that patients can take preventive measures in the event of a similar case. Although the chain of transmission has not been broken, nurses must continue to carry out their duties by providing nursing care for infected patients. During a pandemic, nurses, together with their peers, need to decide how much care they can give to others in addition to caring for themselves (American Nurse Association, 2020).

Government employee nurses and voluntary nurses, especially those who work in hospitals and health centers that are referred to for COVID-19 patient care, are tasked with facing a choice between continuing to work to uphold professionalism or prioritizing personal and family safety. In general, nurses have a very important role both in terms of promotive, preventive, and nursing care services in the conditions of the COVID-19 outbreak. All nurses who are currently engaged in and involved in the care of COVID-19 patients in all hospitals in the world and in Indonesia, have sacrificed so-called personal and family interests. The nurses have sacrificed safety and face the threat of contracting the virus that could end in death. The phenomenon of voluntary nurses is used by government hospitals to provide health services to patients during the COVID-19 pandemic. Even though they do not get medical services, they still provide health services. The purpose of this study was to determine the experience of voluntary nurses in providing health services during the COVID-19 pandemic in the South Tapanuli area.

MATERIALS AND METHODS

Study Design

This study uses a qualitative study with a descriptive phenomenology approach which aims to reach true meanings through engaging in-depth into reality (Laverty, 2003). Husserl valued the experience of phenomenon as perceived by human consciousness which should be an object of scientific study (Lopez & Willis, 2004). The descriptive phenomenology design was chosen so that it can be explored more deeply about the experiences of voluntary nurses in providing health services during the COVID-19 pandemic.

Participant

The participants used in this study were voluntary nurses who worked in the hospital. The number of participants who participated in this study was 10 voluntary nurses. The criteria for participants in this study were voluntary nurses who had one to eight years of experience and were willing to participate in the study, and the participants were in good health so that they did not complicate the interview process.

Instruments

The data collection tool in qualitative research is the researcher himself. The data collection method used in this study was in-depth interviews using an interview guide that had been tested for the content validity index by three experts with the result being 0.85. Before conducting interviews with participants, the researcher first conducted a pilot study aimed as an exercise in conducting interview techniques and the results of the interview will be made in the form of a transcript. The interview guides were: What is your experience while providing health services to patients during the COVID-19 pandemic? How do you feel while providing health services to patients during the COVID-19 pandemic? What problems did you face while providing health services during the COVID-19 pandemic? and What are your hopes for both the government and the community during the COVID-19 pandemic?

Apart from the interview guides, field notes are also a tool used for data collection in this study. Another data collection tool used in this study is a tape recorder, which is used to record the results of conversations between researchers and other tools used by researchers in data collection were paper and pens / pencils to record important things related to important keywords.

Procedure

The data collection procedure was carried out by researchers by conducting in-depth interviews with participants using cellphones because of the COVID-19 pandemic and simultaneously recording the results of conversations between researchers and
participants. Before conducting interviews with participants, the researcher first asked the nursing field about the number of voluntary nurses working in the hospital. After that, the researcher contacted potential participants via cellphone as to whether they were willing to become participants by explaining the objectives of the study. If willing, the researcher arranged the interview time and researchers conducted interviews with participants for approximately 60 minutes. The researcher’s interviews were conducted at the place where the researcher worked, while the participants were interviewed at home. There were no distractions during the interview. After that, the researchers analyzed the data using the Colaizzi method. The researcher informed the participants of the results of data analysis to ensure the results were approved by the participants.

Data Analysis

The descriptive Colaizzi method was used to analyze the obtained data. This method consists of seven steps, as follows: (1) collecting the participants’ descriptions, (2) understanding the depth of the meanings, (3) extracting the important sentences, (4) conceptualizing important themes, (5) categorizing the concepts and topics, (6) constructing comprehensive descriptions of the issues examined, and (7) validating the data following the four criteria set out by Lincoln and Guba: known as credibility, dependability, confirmability and transferability.

Ethical Consideration

This research has gone through an ethical test conducted at the health research ethics commission of the Faculty of Nursing, University of North Sumatra and has obtained permission to research, number 2231/IV/SP/2020.

RESULTS

Demographic Data Characteristics of Participants

Description of the demographic characteristics of the participants consisted of gender, age, education and length of work. The distribution of the demographic characteristics of the participants is shown in Table 1.

The number of respondents in this study was 10 nurses. From the table above, the majority of respondents are female with a total of eight nurses (80.0%), with the majority of the respondents’ ages between 25-30 years old, nine nurses (90.0%). While the majority of respondents’ education was Ners profession, amounting to six nurses (60.0%) with a long time working as voluntary nurse; the majority of them worked for 1 - 4 years with seven nurses (70.0%).

Experience of Voluntary Nurses in Providing Health Services during the COVID-19 Pandemic

The Motives of Voluntary Nurse to Provide Health Services in the COVID-19 pandemic

Voluntary nurses explained that their motivation to provide health services in the COVID-19 pandemic was because it was an obligation for nurses to provide health services to patients regardless of their condition. In addition, voluntary nurses also gain knowledge about COVID-19, such as the following statements:

“Yes, voluntary nurses and government nurses still have to provide health services, it is our duty to provide health services, and we also know about COVID-19” (P2)

“The name is working as a nurse, so orders from superiors must be done, and who else provides services to patients, so do we” (P1)

Voluntary Nurses’ Psychological Responses

Providing health services in the COVID-19 pandemic is still carried out by voluntary nurses. There is a feeling of pleasure and it becomes a challenge to be able to provide health services to patients. However, there are nurses who also feel afraid of being infected with COVID-19 and feel uncomfortable with the stigma from the community toward nurses who provide services during the COVID-10 epidemic. Like the following participant’s statement:

“I am feeling happy can provide health services to patients, even though there is a fear of contracting them from patients who we do not know their situation” (P5)

“Yes i am afraid of contamination” (P6)
“The challenge is for me to serve patients now, there is fear, but if the personal protective equipment is complete, hopefully it will not contamination” (P4)

“People are afraid to see us, they think the nurses will transmit COVID-19” (P9)

**Problems Faced by Voluntary Nurses**

There are many problems faced by voluntary nurses while providing health services in the COVID-19 pandemic, such as incomplete and standard personal protective equipment, difficulty meeting basic needs, the impact of wearing hazmat suits and people who do not comply with health protocols that have been established by the government. As seen by the participants’ statements as follows:

“Personal protective equipment is incomplete and nonstandard” (P1)

“When you wear hazmat clothes, sometimes it’s hard to breathe, sweat is pouring out and your clothes get wet, and you get thirsty from a lot of sweat” (P10)

“Wearing hazmat clothes, you can’t eat and drink, sometimes you want to pee you have to hold it until you finish the task, the clothes are only disposable, so after a new assignment, eat and drink” (P6)

**The Benefits of being a Voluntary Nurse during the COVID-19 Pandemic**

Voluntary nurses have benefited from providing health services in this pandemic, as stated in the following participant statement:

“Get new knowledge and get new experiences about COVID-19, so it can provide health services to patients and of course can prevent contracting COVID-19” (P7)

**The Expectations of Voluntary Nurses**

Voluntary nurses hope that society will not stigmatize patients and nurses as well. In addition, the nurse hopes that the hospital can meet the needs of nurses for complete and standard personal protective equipment. In addition, voluntary nurses hope that the hospital and government will provide incentives and also make voluntary nurses become honorarium workers or government nurses. The participant’s statements are as follows:

“I hope that society does not stigmatize patients and nurses who work in health services” (P9)

“It is my hope that the public will comply with the health protocol recommended by the government, so that they can prevent the
transmission of COVID-19” (P10) “Yes, you will be given additional money during COVID-19 so that you will be more enthusiastic about providing health services to patients” (P5)

“I’ve always hoped that someday I will be appointed as a government employee, or the honorarium is what matters” (P2)

Five themes identified from the interview results which described the experiences of voluntary nurses in providing health services during the COVID-19 pandemic. These are 1) motivation of voluntary nurse to provide health services in the COVID-19 pandemic; 2) voluntary nurse psychological response; 3) problems faced by voluntary nurse; 4) the benefits of being a voluntary nurse during the COVID-19 pandemic; 5) the expectations of voluntary nurses.

**DISCUSSIONS**

In this review, researchers seek to better understand the experience of voluntary nurses who work at the frontline in providing health services and their views on the COVID-19 pandemic. The following is a discussion of five themes that have been produced through in-depth interviews:

### Table 2. Table Matrix

<p>| Theme 1: The motives of voluntary nurses to provide health services in the COVID-19 pandemic |</p>
<table>
<thead>
<tr>
<th>Sub-themes</th>
<th>Category</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Obligation</td>
<td>1. Must not refuse to provide health services to patients</td>
</tr>
<tr>
<td>2. Humanity</td>
<td>1. Giving health services to the patients</td>
</tr>
<tr>
<td>2. Increasing knowledge</td>
<td>1. Provide counseling about COVID-19</td>
</tr>
<tr>
<td>2.</td>
<td>2. Seek experience in providing nursing care</td>
</tr>
</tbody>
</table>

<p>| Theme 2: Voluntary nurses’ psychological responses |</p>
<table>
<thead>
<tr>
<th>Sub-themes</th>
<th>Category</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Positive responses</td>
<td>1. Happiness</td>
</tr>
<tr>
<td>2. Negative responses</td>
<td>1. Feelings of fear of being infected with COVID-19</td>
</tr>
<tr>
<td>2.</td>
<td>2. There is a stigma from the community toward nurses in the COVID-19 pandemic</td>
</tr>
</tbody>
</table>

<p>| Theme 3: Problems faced by voluntary nurses |</p>
<table>
<thead>
<tr>
<th>Sub-themes</th>
<th>Category</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Lacking of personal protective equipment</td>
<td>1. Incomplete personal protective equipment</td>
</tr>
<tr>
<td>2. Difficulty in wearing personal protective equipment</td>
<td>2. Non-standard personal protective equipment</td>
</tr>
<tr>
<td>3. Difficulty in providing basic needs</td>
<td>1. Not being able to eat and drink while wearing a hazmat suit</td>
</tr>
<tr>
<td>2. Restrain defecation and bowel movements</td>
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</table>

<p>| Theme 4: The benefits of being a voluntary nurse during the COVID-19 pandemic |</p>
<table>
<thead>
<tr>
<th>Sub-themes</th>
<th>Category</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Get new experience</td>
<td>1. Gaining experience in providing health services during the COVID-19 pandemic</td>
</tr>
</tbody>
</table>

<p>| Theme 5: The expectations of voluntary nurses |</p>
<table>
<thead>
<tr>
<th>Sub-themes</th>
<th>Category</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Public awareness of COVID-19</td>
<td>1. Follow health protocols</td>
</tr>
<tr>
<td>2. Hospital policy</td>
<td>2. There is no stigma in COVID-19 patients</td>
</tr>
<tr>
<td>2.</td>
<td>3. There is no stigma on nurses</td>
</tr>
<tr>
<td>2. Become a government employee nurse</td>
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</table>
Theme 1: The motives of voluntary nurses to provide health services in the COVID-19 pandemic

Nurses working in healthcare centers must be willing to provide health services in the COVID-19 pandemic regardless of the patient's condition. Nurses cannot refuse, and this has become the decision of the hospital nursing management to appoint nurses who will provide health services to patients. There is no nurse who refuses with this decision. This incident was also experienced by Filipino nurses working in the UK who were required to care for patients during the COVID-19 pandemic. If the nurse refuses, the consequences that will be accepted are related to the nurse's visa status (Catton, 2019).

One of the motivations of nurses who are willing to become voluntary nurses in providing health services is to increase knowledge, this is in accordance with what was stated by Bussell and Forbes (2006), where one of the motivations for a person willing to become voluntary nurse is to achieve certain goals (Egoistic Motives) such as getting knowledge and skill.

Participants in this study also stated that being a nurse in providing health services in the COVID-19 pandemic was to seek new experiences about dealing with patients. This is in accordance with the concept put forward by Bennett and Barkensjo (2005) that one of the motivations for a person to become a voluntary nurse is to seek new experiences.

Theme 2: Voluntary nurses’ psychological responses

The results of data analysis that have been carried out obtained the response of nurses who have been willing to become a voluntary nurse in providing health services in the COVID-19 pandemic, namely feeling happy because they can provide health services to clients in need. This is in accordance with the concept put forward by Bennett and Barkensjo (2005) that, for some people, being a voluntary nurse is a very pleasant thing because it can help sick people who need their energy and, if the client is satisfied with the services provided, the nurse will return to being a voluntary nurse. This research is also in line with that by Siregar, Nurmain and Darti (2016) which states that voluntary nurses feel happy to provide health services to patients even without any compensation.

The feeling of fear of being infected with COVID-19 from patients is experienced by voluntary nurses while providing health services in the COVID-19 pandemic and this is in line with research conducted by Kang et al. (2020) that health workers experience fear, especially at an increased risk of exposure, infection and the possibility of infecting their loved ones is also a burden in itself. Many health workers have to isolate themselves from their family and closest people even though they don’t experience COVID-19.

The results also showed that nurses working in health services received stigma from the community. The public is afraid of being infected with COVID-19 from nurses. This study is in line with the research of Ramaci, Barattucci, Ledda, and Rapisarda (2020) regarding the social stigma of health workers during the COVID-19 pandemic. The results of these studies suggest that working with potentially infectious patients carries considerable stigma.

Theme 3: Problems faced by voluntary nurses

The problem faced by voluntary nurse in providing health services to patients during the COVID-19 pandemic is that the personal protective equipment (PPE) provided by the hospital is incomplete and non-standard. Billings, Ching, Gkofa, Greene, amd Bloomfield (2020) found that, at the beginning of the pandemic the situation worsened and this was caused by inadequate PPE and inadequate resources, so that workers struggled with high workloads and long shifts. Providing standard PPE can protect nurses from being infected with COVID-19. Standard precautions are the minimum basic level of infection control precautions used in treating all patients (WHO, 2020).

Nurses who wear PPE, such as wearing hazmat suits when providing health services, feel uncomfortable, such as difficulty breathing, experiencing excessive sweating and always feeling thirsty. When the nurse is wearing the hazmat suit, the nurse cannot open the PPE before completing her task. So that the basic needs of nurses sometimes cannot be met while wearing hazmat suits. As stated by one of
the nurses who worked at the hospital, wearing hazmat suits felt hot and sweaty and she had difficulty breathing caused by the long use of the suit (Jiang et al., 2020).

Another problem faced by nurses when providing health services is that patients and families do not comply with health protocols established by the government, such as patients who come to health services not wearing masks and they also do not believe about the existence of COVID-19. The results of this study are in line with Pelangai, Pesisir, Selatan (2020) who state that the public is not obedient to the appeal from the government about the dangers of COVID-19 and the public thinks that COVID-19 is just an ordinary virus. This is due to the lack of awareness from the community itself regarding the importance of using personal protective equipment for the prevention of COVID-19.

Theme 4: The benefits of being a voluntary nurse during the COVID-19 pandemic

The narrative pervading among healthcare workers throughout all pandemics is about uncertainty fueling and perpetuating fear and anxiety. Knowledge is key in reducing uncertainty and many more participants seek information, clarity and consensus with the aim of achieving greater certainty (Billings et al., 2020). The benefits obtained by voluntary nurses while providing health services in the COVID-19 pandemic are gaining new experiences and new knowledge about providing health services, and also how to protect oneself so as to avoid COVID-19 transmission while providing health services, so that having experience and knowledge about COVID-19 will reduce anxiety and fear of infection while providing health services to patients during the pandemic.

Theme 5: The expectations of voluntary nurses

The results of data analysis that have been carried out obtained the response of nurses who have been willing to become a voluntary nurse in providing health services in the COVID-19 pandemic, namely feeling happy because they can provide health services to clients in need. This is in accordance with the concept Being a voluntary nurse for a long time certainly has hopes and dreams; especially in the COVID-19 pandemic, all health workers, especially nurses, pay attention and have a heavier workload in carrying out their duties in health services. Nurses who are at the forefront of defense are more likely to have more energy than other health workers. Voluntary nurses who work without any compensation have expectations of those who should be responsible for their welfare. In the Nursing Law No. 38 of 2014, it is stated that nurses who work to provide nursing care are entitled to get compensation for the services they provide. However, some of them still get recognition from the local government and have been appointed as honorarium workers.

The results of the research conducted show that voluntary nurses have hope for the hospital, local and central government and also the community. The voluntary nurse hopes that there will be incentives provided by the hospital and the local government for their duty to provide health services during the COVID-19 pandemic. In addition, voluntary nurses also have hopes of the central government so that all voluntary nurses who provide health services during the COVID-19 pandemic in the South Tapanuli area become government employee personnel or honorariums. This is also in line with Siregar, who states that voluntary nurses have hopes of local and central governments as becoming honorarium and government employees (Siregar, 2019).

Voluntary nurses also hope that the personal protective equipment used when providing health services is equipped and standard. So that nurses do not feel anxious in providing services and to avoid COVID-19 infection. In addition, the voluntary nurses also hope that the community will eliminate the stigma of patients and nurses, because COVID-19 is not an embarrassing disease, and this disease can be cured.

CONCLUSION

This pandemic was unprecedented. We have the opportunity to learn from this pandemic incident to provide better support for health workers, especially nurses who work voluntarily. Qualitative, higher quality research is needed to better understand the experiences, needs and preferences of healthcare workers, especially volunteer
nurses who work on the front lines and whose voices are not adequately represented. We hope that all those who are responsible can meet the needs of voluntary nurses while providing health services during the COVID-19 pandemic. When all needs are met, the performance of voluntary nurses will increase, even in the COVID-19 pandemic. Increased performance will be able to break the chain of COVID-19 transmission.

Acknowledgement

During the COVID-19 pandemic, health services really need health workers, especially nurses. Special nurses who work voluntarily are very helpful in providing health services to patients, especially patients who are indicated as having COVID-19. For this reason, hospitals that use voluntary nurses should reward them for their performance during the Covid-19 pandemic. This study is a continuation of several studies that I have done regarding voluntary nurses, because I am very concerned about the phenomenon of voluntary nurses being used by government hospitals in several regions. I really hope the government makes a policy that benefits voluntary nurses in recognition of the work they do.

Conflict of Interest

There are no conflicts occurred in the research.

REFERENCES

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