



ASSESSING AND MANAGING PROFESSIONAL QUALITY OF LIFE AMONG NURSES TO FACE PANDEMIC CHALLENGES

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ABSTRACT

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The rapid adaptation of health services significantly burdens healthcare professionals, especially nurses. It is crucial to balance healthcare professionals' professional quality of life with their fatigue and stress levels. The study aims to assess nurses' professional quality of life, particularly in the context of the challenges posed by the COVID-19 pandemic. The researchers aim to understand the levels of compassion satisfaction, burnout, and secondary traumatic stress experienced by nurses in Padang City hospitals. Employing a descriptive design with a cross-sectional methodology, this study aims to portray nurses' professional quality of life by concurrently assessing compassion satisfaction, burnout, and the level of secondary traumatic stress using the Perceived Stress Scale and the Professional Quality of Life Scale (ProQoL-21). Eighty-eight nurses participated in this study and were selected using purposive sampling techniques between August and November 2023. This study revealed that 54.5% of respondents reported a moderate level of compassion satisfaction related to COVID-19, 68.2% experienced a moderate level of burnout, and 40.9% had a moderate level of secondary traumatic stress. Additionally, 1.1% of respondents reported a high level of secondary traumatic stress. The Perceived Stress Scale and Professional Quality of Life Scale (ProQoL-21) questionnaire were used to measure nurses' stress levels and professional quality of life. This study was conducted between August and November 2023. Data were analyzed using descriptive analysis. The results of this study indicate that most nurses exhibit adaptability in their roles as Covid-19 nurses. The optimization efforts implemented by nursing management and the hospital organization contribute to low burnout and secondary traumatic stress among nurses. It is recommended that nursing managers and hospital organizations focus on addressing the small percentage of nurses experiencing high levels of burnout and secondary traumatic stress.

Keywords:

Nurses, Pandemic, Professional quality of life

BACKGROUND

Under circumstances unrelated to natural disasters, such as the COVID-19 pandemic spanning from 2020 to 2022, substantial alterations were introduced to the healthcare system. The imperative for health services to swiftly adapt under these non-natural disaster conditions imposes a significant burden on healthcare professionals, with nurses mainly affected (Blixt et al., 2023). Notably, nurses have an important role in addressing the challenges posed by the global COVID-19 pandemic, both on a global scale and specifically within the context of Indonesia. The healthcare system, recognized as a primary line of defense against Covid-19, the modifications as a strategic response to the pandemic (Hou et al., 2020). In the concluding months of 2022, nurses have acclimated to persistent and challenging conditions, consistently positioned on the front due to their resilient capabilities. Their resilience has been instrumental in assisting patients in overcoming challenges, enabling them to muster the essential strength to persevere amidst the trials of Covid-19, they process from the Covid-19 Pandemic, it is imperative to implement organizational and managerial initiatives that support health workers' optimal and effective performance, particularly nurses, in delivering services to the community.

Professionals in healthcare, including nurses, are entitled to a secure and comfortable work environment while fulfilling their responsibilities to the community. In managing non-natural disasters, (Khairina et al., 2023a) research underscores the necessity to enhance the capabilities of emergency nurses and increase their knowledge regarding the conditions associated with non-natural disasters. This proactive approach aims to ensure that nurses feel secure and are adequately protected while confronting the challenges posed by disasters. It is crucial to balance the professional quality of life of healthcare workers and the fatigue and stress levels they may encounter (Remegio et al., 2021). Failure to address the well-being of health workers and stress-related factors can lead to a decline in performance and adverse effects on the metastudy (Lu et al., 2019). The taxing nature of their work, professional demands, and the heightened public expectation for nurses in hospital settings contribute to physical and emotional fatigue (Xu et al., 2021).

Professionals in healthcare bear the brunt of the adverse consequences brought about by Covid-19, encompassing experiences such as death, isolation, fear, the constant risk of infection, and an over-

whelming workload (Jiang et al., 2021). Navigating daily responsibilities in hospitals, social centers, health services, and primary care settings proves challenging, with significant and far-reaching impacts. A comparable situation is observed among nurses stationed in the COVID-19 Emergency Room and the COVID-19 Inpatient Room in Padang City. The research reveals that nurses grapple with a notably high workload, fear of transmitting the virus to their families, and societal pressures (Khairina et al., 2023b). The pressures and stressors encountered while delivering nursing care are collectively called professional quality of life (Blixt et al., 2023). The study from Indonesia showed that there was an increase in mental health issues experienced by professionals in health care, and it was associated with a decline in health status (Iskandarsyah et al., 2021). The research results also obtained by Syamlan showed that health workers experienced mental health problems during Covid-19 with incidents of depression, anxiety and stress (Syamlan et al., 2022).

The professional well-being of nurses encompasses dimensions such as burnout, stress, depression, secondary traumatic stress, and compassion satisfaction, as outlined by Blixt (Blixt et al., 2023). Nurses operating in emergency settings face the potential risk of diminishing their professional quality of life. Nurses operating in emergency settings face the potential risk of diminishing their professional quality of life. According to Ludvigsson, in 2023, the Swedish healthcare system effectively managed COVID-19 services with the dedicated efforts of healthcare staff. However, the necessary adaptations placed immense pressure on the team (Ludvigsson, 2023). This pressure is not limited to specialized Covid-19 children's inpatient rooms. Du, Zhang, Huang, & Wang, in 2023 research similarly highlights nurses grappling with significant challenges to provide comprehensive services to the community, even under suboptimal conditions (Du et al., 2023). This research aims to describe the quality of life of professional nurses during Covid-19.

METHODS

This study used a descriptive design utilizing a cross-sectional methodology to characterize nurses' professional quality of life. The assessment encompasses three key components: compassion satisfaction, burnout, and secondary traumatic stress, all evaluated concurrently. The study population consists of nurses actively engaged in health services at RSUD dr. Rasidin and the Andalas University Hospital were

assigned to the emergency room and isolation inpatient room and on duty during the COVID-19 pandemic for a minimum of 6 months. With a total population of 103 nurses and a sample formula, the research involved the participation of 88 nurses. The respondents who participated were selected by purposive sampling.

The instrument in this research is ProQoL®, first developed by Stamm in 2010 and subsequently developed and revised several times (The Centre for Victim Torture, 2021). This instrument uses a Likert scale with five responses, namely Score 1, "Never," Score 2, "Rarely," Score 3, "Sometimes," Score 4, "Often," and Score 5, "Always." The reliability value uses Cronbach Alpha with a value of 0.86 (Lu et al., 2019). The reliability test value for the Compassion Satisfaction Level component is 0.90, 0.84 for the secondary traumatic stress component, and 0.80 for the burnout component (Heritage et al., 2018).

This research has passed the ethical test at the Health Research Ethics Committee, Faculty of Nursing, Andalas University, with number 161.laiketik/KEPKFKEPUNAND.

RESULTS

The findings of this study can be delineated through three tables: the first and the second table referred to as the demographic table, illustrate the critical attributes of the participants, while the third table, denoted as Table 3, elucidates the quality of life experienced by professional nurses in the aftermath of the Covid-19 pandemic.

Table 1 shows that from the descriptive results of the respondents' demographic data, it was found that the average age of nurses who had cared for COVID-19 patients at Padang City Hospital was 32.42 years, with an average length of work of 6,918 years.

Table 2 shows data on the characteristics of respondents in this study, namely that 85.2% of respondents were female.

The facets of Professional Quality of Life can be categorized into three distinct components. As illustrated in Table 3, the professional quality of life variable is evaluated through compassion satisfaction, burnout, and secondary traumatic stress levels. The data in Table 2 indicates that 54.5% of respondents exhibited a moderate level of compassion satisfaction in their work related to COVID-19, 68.2% reported a moderate level of burnout, and 40.9% experienced a moderate level of secondary traumatic stress, with an additional 1.1% encounter-

ing a high level of secondary traumatic stress.

DISCUSSION

The study's findings revealed that over 50% of Covid-19 nurses exhibited a moderate level of compassion satisfaction post-pandemic, with 45.5% reporting a high level of satisfaction. A heightened job satisfaction level suggests positive reinforcement within the nurses' work environment, typically correlating with lower to moderate burnout levels and secondary traumatic stress characteristics (Stamm, 2010; The Centre for Victim Torture, 2021). This observation aligns closely with the study's results, indicating that 68.2% of COVID-19 nurses experienced moderate levels of burnout, and 58% displayed low levels of secondary traumatic stress.

A sense of contentment defines compassion and satisfaction with one's job and associated endeavors. This is typified by individuals experiencing enthusiasm for enjoyable tasks (Stamm, 2010; The Centre for Victim Torture, 2021). It involves a sense of adeptness in adapting to new technologies and protocols, fostering positive thoughts, a feeling of accomplishment, overall happiness with the work undertaken, a desire to persist in the profession, and a belief in making a meaningful impact (Zaghini et al., 2021). By increasing affection satisfaction, nurses can develop their competencies significantly.

This situation can alleviate nurses' apprehensions about their efficacy on both individual and organizational levels. A study from A. Fatih shows that nurses can adapt to the psychological stress they experience at work with support from more senior nurses, nurse managers, and colleagues. This support can be an effective coping for nurses to optimize patient care (Fathi & Simamora, 2018). It also indicates that nurses can enhance their capabilities through educational and training opportunities, ultimately improving community services. Research conducted in Padang corroborates this, demonstrating that, during the COVID-19 emergency response, nurses in Padang hospitals received education on COVID-19 management from the Government and Hospital Management (Khairina et al., 2023b). They were also provided sufficient personal protective equipment (PPE) and isolation facilities despite the demanding adaptability required from nurses in managing COVID-19 cases.

The Covid-19 pandemic has underscored the imperative for resilience within healthcare teams. Strategies to foster individual and departmental resilience were shared, encompassing regular meetings,

Table 1. The Average Age and Length of Work for Nurses as Covid-19 Nurses

No	Variable	Min	Max	Mean	Std Deviation
1	Age	24	47	32.42	6.208
2	Length of Work	1	20	6.918	4.728

Table 2. The Gender of Nurses

No.	Variable	f	%
1	Gender:		
	Male	13	14.8
	Female	75	85.2

Table 3. The Professional Quality of Life of Covid-19 Nurses based on their Sub-Components

No.	Variable	f	%
	Professional Quality of Life		
1	Compassion Satisfaction:		
	Low	0	0
	Moderate	48	54.5
	High	40	45.5
2	Burnout:		
	Low	0	0
	Moderate	60	68.2
	High	28	31.8
3	Secondary Traumatic Stress:		
	Low	51	58
	Moderate	36	40.9
	High	1	1.1

the establishment of journal clubs, educational sessions, and staff mentoring (Jang & Cho, 2022). The study findings also indicated that 31.8% of Covid-19 nurses experienced high burnout. This elevated burnout level underscores the potential threat a small subset of COVID-19 nurses may pose to their organizations or healthcare institutions if their well-being could be more effectively managed and optimized (Lopez et al., 2022). The state of saturation or burnout reflects a condition where individuals feel incapable, within the work environment, of delivering services to the community. The results of research from Amaliyah and Sansuwito, 2022 show that burnout experienced by nurses has a moderate correlation with the quality of work provided to patients.

This saturation may arise due to perceived heavy workloads and inadequately managed system conditions. In alignment with the research by Khairina et al. (2023), handling patients with a high disease spread using Level 3 Personal Protective Equipment (PPE) (wearing hazmat) is particularly challenging. This difficulty is compounded by additional tasks such as managing laboratory results and a need for more

professional collaboration during the early stages of the pandemic. Burnout is a component of Compassion Fatigue, characterized by discontent, detachment, and desensitization to the work environment. Symptoms include exhaustion, feeling overwhelmed, feeling blocked, and disconnection from individuals one wishes to engage with, coupled with a lack of supportive beliefs (Stamm, 2010; The Centre for Victim Torture, 2021). Stress was the determinant factor that impacted the nurse's professional quality of life (Khairina et al., 2024).

The findings of this study also reveal that 1.1% of COVID-19 nurses experience elevated levels of secondary traumatic stress. Secondary Traumatic Stress constitutes a form of occupational fatigue characterized by persistent preoccupation with thoughts about individuals the nurse has assisted (Stamm, 2010; The Centre for Victim Torture, 2021)). Indicators include sleep disturbances, occasional forgetfulness, an inability to separate personal and professional life, and exposure to trauma from those they assist, sometimes leading to avoidance of activities triggering reminders (Lu et al., 2019). The occurrence

of high secondary traumatic stress is linked to COVID-19 nurses exhibiting elevated burnout levels accompanied by diminished job satisfaction (Quinn & Fitzpatrick, 2021). Nurses in such circumstances often encounter adverse workplace experiences coupled with feelings of fear (Liu et al., 2022).

This aligns with the research by Khairina et al. in 2023, which asserts that nurses harbor concerns and anxiety about contracting COVID-19, extending to worries about transmitting the virus to their families at home (Khairina et al., 2023). Traumatic incidents encountered while caring for COVID-19 patients can be classified as secondary traumatic events for nurses (Valizadeh et al., 2023). Nursing managers and healthcare institutions should consider this condition seriously, aiming to enable nurses to concentrate on providing community care while effectively managing secondary traumatic stress to prevent its exacerbation or potential progression to depression (Martín-rodríguez et al., 2022). Besides, support from nurses' managers, peers, and social support in the workplace can reduce stress, so by optimizing these three things in health facilities, nurses' coping can improve more quickly (Simamore, 2018). Healthcare personnel management is one of the strategies needed to face the COVID-19 pandemic (Asmaningrum et al., 2022). Besides coping mechanisms, good professional values and an ethical climate can enhance nurses' professional quality of life if nurse managers optimize their roles (Tehranineshat et al., 2020). The limitation of this study was that the data collection process was carried out after the COVID-19 pandemic status changed to an endemic disease in Indonesia, so the description of the nurses may have an adaptation process and a positive coping mechanism to face the pandemic.

CONCLUSION

It is crucial to prioritize nurses' professional quality of life, given their significant role as the primary human resources in hospitals. By effectively managing the professional quality of life through nursing leadership, it becomes possible to mitigate a potential weakness and transform nursing resources into a valuable asset for community service. This proactive approach not only contributes to achieving the goals of hospital services but also serves as a strength in the strategic planning of health facilities or hospitals.

Health service facilities should aim to conduct periodic assessments to gauge the professional quality of life among nurses. Evaluating nurses' pro-

fessional quality of life is a valuable guide for optimizing healthcare services to the community, considering the three components of professional quality of life values. Disparities in the levels of job satisfaction, burnout, and secondary traumatic stress values can inform nursing managers in designing interventions and programs. This proactive approach ensures that the organizational climate is maintained in optimal condition. The limitation of this study was that the data collection process was carried out after the COVID-19 pandemic status changed to an endemic disease in Indonesia.

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