



NURSES' EXPERIENCES AS HOSPITALIZED COVID-19 PATIENTS

Nursing

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ABSTRACT

It is a common knowledge that during COVID-19 pandemic, anyone without any exception can be contracted with the virus. Nurses, as the healthcare workers on the front line also being highly exposed to the risk. Following to the idea, it is important to get to understand on the experiences of the nurses who contracted the virus and also got hospitalized as COVID-19 patients. Methods: Data were gathered using in-depth online interview towards selected nurses who were hospitalized as COVID-19 patients. There were nine nurses who were willingly participating in this study. The interview was conducted in 2021. Researchers found keywords which later processed to become themes. The data were analyzed using Collaizi approach and validated through clarification process with the participants. Results: There were nine themes in total: (1) Confirmed with COVID-19, (2) Reaction of being the confirmed case, (3) symptoms of COVID-19, (4) medication, (5) experiences as hospitalized COVID-19 patients, (6) support system, (7) inhibiting factors during recovery, (8) benefiting factors during recovery, (9) suggestions and advice. Conclusion: Nurses' experiences as hospitalized COVID-19 patients can be invaluable resource for healthcare workers, specifically those on the front line in treating COVID-19 patients.

KEYWORDS

confirmed cases, COVID-19, hospital, nurses'experiences

INTRODUCTION

The newly found COVID-19 virus is highly contagious, human-to-human transmission in the form of human droplets, closed human contact, and touching on contaminated object causing mild-to-severe respiratory diseases. As the confirmed cases spreads like a wildfire to this day, the World Health Organization has publicly declared that the virus is categorized as pandemic, let alone in Indonesia, which is considered as a national disaster[1].

According to COVID-19 Response Acceleration Task Force in September 2020, there were 207,203 confirmed cases, among them, 51,237 were hospitalized or isolated; 174,510 were fully recovered, and 8456 were deceased[2].

International Council of Nurses (ICN) reported in August 14, 2020 that 572,478 healthcare workers from 32 countries were confirmed to be contracted with COVID-19 in which the number was only represent 10% of the total cases globally. Moreover, ICN has reported that 1000 nurses have been deceased because of COVID-19, and the number could be even greater since the data has not been statistically completed. Indonesian National Nurses Association found that there were 70 nurses reported to be deceased caused by COVID-19. In Greater Jakarta, among 1,629 nurses who were contracted with COVID-19, 18 of them were reported to be deceased from COVID-19. (data September 2020)[3].

METHODS

Qualitative research with descriptive phenomenology methods and Collaizi approach were employed in this study to trace a better understanding on nurses' experience as hospitalized COVID-19 patients[12]. In-depth interview was conducted throughout July to December 2021, three times for 45 to 60 minutes through zoom meetings.

The participants in this study were nurses who worked in hospitals or other healthcare services and were hospitalized as COVID-19 patients. The participants need to be able to tell their experience during hospitalized as COVID-19 patients, be able to speak Indonesian fluently, and need to give their consent to participate in the study by signing the informed consent. Nine participants who were an active nurses domiciled in Greater Jakarta were selected for this study. The ethic committee of Poltekkes Kemenkes Jakarta III had given the permission to carry on the study through the ethics approval letter number No.KEPK-PKJ3/087/VIII/2021.

RESULTS

All participants for this study were female. The education level of the participants were Bachelor of Nursing (50%) and Diploma 3 or Associate degree in Nursing (50%). All participants were Muslim, 90% of participants were married while 10% were unmarried/widow.

The analysis was carried out using the Collaizi approach and found nine themes.

1. Initially Confirmed with COVID-19

Most of the participants described the possibility of being exposed to COVID-19 for the first time in their respective workplaces:

"...When a friend of mine, an ER nurse, had COVID and breathing problem, also coughing up blood, I took care of him. At that moment I had to wear N95 mask, which was not very comfortable when it pressed my nose, so I had to unknowingly open the mask several times. I had time to eat in the same room with my friend even though I was sitting quite afar, it turned out that my friend had positive PCR result. I also hold my friend's child who needed to get swab test, and I only wore a surgical mask, and it turned out that the result is positive too. I'm not sure which patient I was exposed to." (P1)

"...I'm in 6 weeks pregnant, I have a high fever of 38. After taking fever-reducing medication, the fever didn't go down and my fever was getting worse, I had severe nausea as well, but I still think positively because I was pregnant at that time. My nausea and vomiting were getting worse, so I went straight to the ER. My rapid test results for both antigen and antibody were positive. Checked the PCR and it came back positive for COVID-19." (P2)

"...I work in the COVID treatment room. At that time, the number of patients were abundant. Our colleagues had started to drop ill physically and mentally. I felt tired so much, started to catch a cold, ached all over my body like DHF. I didn't get cough and breathing problems but my head hurts so bad. I was planning to get a paid leave and going back to my hometown. I did a swab, the result was positive even though I only had mild symptoms" (P3).

"I was exposed to COVID around November, there were symptoms of fever, dizziness, cold. My son was also getting a fever and dizziness, so I finally gave him paracetamol and vitamins. The next day, I got to go to work and had a swab test. Before leaving home, I rub some eucalyptus oil, but I didn't smell it, I told my nurse friends that I couldn't smell the eucalyptus. The result of the test was positive and I was immediately treated because of my comorbid asthma." (P9).

2. Reaction of being the confirmed case

Most of the participants expressed their feelings of sadness, denial, worry, guilt, and fear after receiving the result of the COVID-19 test: "... I was being denial when I found out the PCR result was positive, I was ashamed and afraid that my friends would avoid me. I took the test one time independently and the results came back the same as before." (P2)

"...I was baffled, I had no idea from whom or where did I get the virus, I overthink myself over that a lot, I felt so sad as why I had to get COVID-19. I also felt ashamed, isolated, and guilty to my roommates, because they were exposed to COVID-19 from me. I was the very first patient in the hospital where I work. The room which I usually had work in was also closed which made me feel guilty even more. I was still in denial and trying to find the source of COVID-19." (P4)

"... When I found out I was tested positive for COVID and had to be treated, the first day until the 3rd day I didn't want to receive any call, I really gave up, I was very frustrated, confused, and I didn't want to contact anyone. anxious, afraid." (P8)

"...I could not believe that I got COVID because I was so sure that I always kept doing the COVID protocol everywhere even at my home, I even always wore a mask, but in the end I thought, okay, maybe because this was a risk (for being health worker). I asked the doctor how my family was. My parents had comorbidities. Father was treated in room M, brother-in-law was treated in room N, mother and brother were in another room." (P9)

3. Symptoms of COVID-19

Differences in signs and symptoms felt by participants were divided into 2 categories: signs and symptoms felt before and during treatment.

a. Signs and symptoms before hospitalized

"...The body is hot and cold, feels weak, feels heavy, has lost 4 kg of weight in 3 days, has reduced appetite, has cold sweats. I tried to do inhalations at home but it didn't reduce the shortness of breath." (P5)

"... Before being treated, I felt feverish, chills, nausea and vomiting, severe headache, joint pain, and loss of smell." (P6)

"...I feel joint pain in the upper arm that radiates to other parts of the body such as back, fever, chills, and the body feels unwell." (P7)

"...I feel sick, suddenly dizzy, sore throat, I took paracetamol, there was no change until the afternoon. The next day I had a high fever, my body temperature was 39 degrees, I was suspicious, I decided to wear a mask, my husband wore a mask and kept his distance, I decided to sleep alone. I reported to the doctor and a swab was done. The body is still hot, does not go down, there is no cough. My results were positive and I was picked up by an ambulance." (P8)

"I felt feverish, dizzy, shivering, kept getting hotter, my son also had a fever, was hot and complained of dizziness, finally I gave him paracetamol and vitamins. When I was at work, I was asked for a swab. I use eucalyptus oil, how come it doesn't smell good, I tell my nurse friends that I don't smell the scent of eucalyptus. I tested positive, I was treated for comorbid asthma." (P9)

b. Signs and symptoms during hospitalized

"...I have a really bad head, I can't feel the fever and cough." I don't smell the soap that usually smells good." Day 3 of treatment headaches began to subside. I don't feel the sweetness of the sugar on the marrow porridge menu, my tongue can't taste the taste of every menu provided. The fifth day I felt like my chest was squeezed by something." (P1)

"...The first day of treatment, my fever has disappeared, I still feel nauseated. I have lost my sense of smell, but I haven't experienced any loss of taste. I only realized that I lost my sense of smell when I used bath soap and shampoo that didn't smell good at all. I am getting more and more nauseated, vomiting after receiving antiviral drugs. I feel dazed and very congested. After 10 days of smell I just felt again. I started to feel good eating. My PCR result was negative." (P2)

"I tested positive again after I traced it at my place of work, I have no complaints. The health center advised me to self-isolate, but the RT in my neighborhood didn't want me to self-isolate. Finally I was treated at the hospital where I worked." During the 8 days of treatment, my only

complaint was after taking antiviral medication, which was suffocation or absent-mindedness." (P3)

"... My complaint is shortness of breath, the doctor advised me to go to the emergency department of Pinere, the saturation is 91%, given oxygen 4 liters / minute, the saturation immediately rises to 100%, the emergency room is immediately good, complaints of chills and fever are still there". (P5)

"...I had joint pains that hurt so much that I cried, my legs were swollen. The doctor explained that there was a problem with the heart. I complain of headaches, nausea, vomiting, decreased appetite, I tend to be constipated, cough is getting worse and the chest x-ray shows I have pneumonia, I have shortness of breath but my saturation is 92, on the 6th day I got worse, my body condition is getting worse. not good and getting crowded". (P7)

"...The first day in the morning I didn't feel bad, but in the afternoon, when I went to the bathroom and went back to bed, I felt a lot of pain and was accompanied by a heavy cough. My blood pressure also went up, I had a severe headache, so I consulted a neurologist. When I entered my saturation was 96 but it dropped to 70, my smell was reduced but my taste was still able to feel. I was treated for 16 days, during the treatment I felt bad. On the 14th day the saturation started to rise." (P8)

4. Medication during COVID-19 treatment

Most of the participants received drug management as stated by the participants:

"...The drugs I received during the 12 days of treatment included paracetamol on the first day but it didn't help much to relieve the headache, the infusion was attached from the first day to the 10th day of treatment. Other drugs such as azithromycin, vitamin C, isoprinosine, vitamin D, vitavit capsules, ketorolac injection, diazepam, I also take probiotics that my friends brought. I got heparin because my dimer value was high. I also get the drug dextra. The fifth day I used eucalyptus oil which was dripped on a tissue and put in my nose, I still can't smell it, even my eyes are watering because they sting. On the 7th to the 10th day, I was put on oxygen because the chest still felt tight, the mix was stopped on the 8th day. My infusion was released on the 10th day. I was put on an IV for 5 days of treatment. The 7th day I was put on oxygen until the 10th day of treatment." (P1)

"...During the treatment, the drugs I received were paracetamol, azithromycin and the antiviral drug Avigan which I took 8 capsules. I got rhinos because I had a cough. The first day I was given an IV and given 5% dextrose, but on the second day the infusion was replaced with pempvlon because I felt I could still meet my own food and drink needs. I drink honey and bear milk. I feel that if I take the medicine late, the fever will come back again. The second and third day of treatment are the same as the first day. During hospitalization I was not given oxygen. On the 4th day I did a PCR test with negative results. On the 5th day I did the PCR test again and the result was negative, I went home and was given 3 days leave, after that I went back to work." (P3)

"...In the emergency room, Pinere was immediately good, at first it was mixed with general COVID patients, finally a special treatment room was prepared for employees with COVID-19. The five friends who dine with me are all positive, 3 are being treated and 2 are self-isolating. At that time in the ICU 11 people were confirmed positive. ICU closed for 8 days. For 7 days oxygen is still available. Apigan 8 tablets, methylprednisolone, vitamin C, B complex, zinc, alluvia 2 tablets, infusion. During the treatment there was no loss of smell and taste function. No headache. I have no comorbidities. Total treatment 11 days. I came home from the hospital still positive, I still wear a mask. I am isoman 1 month 21 days. (P4)

"I was given RL infusion, given 10000 units of heparin, given 8 tablets of anti-virus medication, vitamin D, vitamin E and vitamin C, 10 cc of omeprajol. I got cough medicine in the form of flumosisil, ambroxol, to relieve joint pain I was given paracetamol and ponstan. I was given oxygen via cannula 5 liters/minute, I checked AGD, PTA PTT related to blood clotting. I have comorbid hypertension and hypercholesterolemia". (P6)

"...I was given oxygen at 3 liters/minute, azythromycin injection, vitamin C injection, flumocil injection, paracetamol injection, lovenox injection to thin the blood. On the second day, it was more painful to

was required to be treated with more severe complaints than me. The news that my child was positive after the results of the examination from the Puskesmas came out also made me think this was all my fault because they were exposed to me.” (P2)

“...I feel that my swab remained positive until I came home from the hospital too, and while I was being treated, especially the first day until the 4th day, I still denied it and was still asking who the source of the COVID-19 virus spread to me.” (P4)

“...As long as I am being treated, I do not feel any obstacles, because my friends take care of me and encourage me to the maximum”. (P5)

“...I was hospitalized for 16 days, until I came home I still tested positive. Negative condition after 45 days. After returning home I had to do breathing exercises with the advice of physiotherapy. I feel like it took me a long time to be declared negative, that's what I always think about even though I got home.” (P8)

8. Benefiting Factors during Recovery

Most of the participants had experiences that were felt to support their recovery as stated by the participants:

“...During treatment, my colleagues provided the best service for me, every time they took action. The Koran activities, obligatory prayers, sunnah prayers and listening to murotals made me more confident that I would recover. Calls from my parents also encouraged me to get well and go home quickly. My superiors go back and forth to see me and give extra vitamins and always ask what do I want to bring?”. (P2)

“...My friends took care of me quickly, maybe because I was very close to other colleagues, whenever they were giving me action, they always reminded me that I had to recover because they thought that our struggle was not over.” (P3)

“...This disease is from God, I ask God to heal me, that is what strengthens me to recover quickly and be able to go home, I feel sorry for my children and husband if I am hospitalized for a long time”. (P8)

“...While I was sick and being treated, apart from my children and husband, what made me want to be healthy was my father figure. I am very close to my father because of his good nature, although my father has comorbid DM and hypertension, you are always enthusiastic”. (P9)

9. Suggestions And Advice

Most of the participants provided advice and input to health workers who treat COVID-19 patients as stated by participants:

“...Don't be afraid as health workers to treat COVID-19 patients, because we already use various PPE equipment. If we are exposed after we make an effort, it means destiny. Give the slightest attention to the patient such as teaching relaxation, practicing deep breathing, giving encouragement that our pain is one of the sinners.” (P1)

“...As a health worker during the COVID-19 pandemic, it is obligatory to maintain immunity by consuming vitamins, milk and of course prioritizing the use of PPE in accordance with the SOP. Then as a Muslim, don't forget to pray, because maybe yesterday I was often negligent in praying.” (P2)

“It turns out that COVID patients really need a support system, because many COVID patients are avoided by their families and environment. Psychological support is needed by patients”. (P5)

“...My advice for nurses is to be proud because we exist and are given the opportunity to treat COVID-19 patients during this pandemic and for the community to really maintain strict procedures so as to avoid COVID-19”. (P6)

“...My message is that the pandemic is still long, so you need extra energy, don't let the process slack, keep your distance. Many of our friends who have been vaccinated have become negligent, my friends who have been vaccinated for the second time still get it, so it all depends on our immune system. My friend who has been vaccinated 2 then gets even more severe symptoms, previously there were no complaints, so there are complaints. There is a friend of mine who is comorbid with DM and Hypertension when he got it the first time he was healthy, but after the second he got a lot of symptoms and

eventually died.”(P9)

DISCUSSION

The nine participants who were selected for this study were confirmed cases of COVID-19 and were hospitalized at the hospitals where each of the participant worked in.

Two participants were contracted with the virus twice. Meanwhile, all of participants were most likely getting caught to COVID-19 while carrying on their duty taking care of COVID-19 patients. All participants confirmed that they had worn COVID-19 personal protective equipment (PPE). One participant realized that the possibility of exposure to COVID-19 occurred when he lowered the mask in the nurse's room and he was carrying one of the nurse's children who was later found to be positive after his mother also tested positive and was treated first before the participant was treated later. Nine participants did not know for sure where the exposure to COVID-19 occurred, whether when treating COVID-19 patients in the treatment room or when interacting with fellow nurses or when traveling to and from work. The spread of COVID-19 is fast. It is one of communicable disease caused by the acute respiratory syndrome Coronavirus 2. This virus is a large family of Coronaviruses that can infect animals, mostly mammals. Coronaviruses are usually the cause of respiratory diseases such as the flu, MERS and SARS. COVID-19 itself is a new type of Coronavirus that was discovered in Wuhan, Hubei, China in 2019[4].

In this study, researchers explored the reaction of participants when they found out that they were confirmed positive for COVID-19. Most of the participants expressed sadness, denial, worry, guilt, and fear of being avoided. Participants were being denial and puzzled as to where did they get it from. Participants were sad and worried that their family members and colleagues were infected as well from them. Participants did not want to make their parents worried, because they were old.

Participants' feelings related to the psychological impact of COVID-19 on patients were in line with research which stated that patients experienced decreasing motivation, surprised, sadness, depression, insomnia, trauma to the point of needing motivational support from certain aspects such as family and fellow patients[5].

In this study, the signs and symptoms felt by participants who were confirmed positive for COVID-19 before hospitalized including: cold, fever, severe headache, weakened physics, joint pain, breathing problem, nausea, vomiting, losing appetite, and anosmia. This symptoms experienced by participants were in accordance with WHO including: fever, fatigue, myalgia, anorexia, headache, cough, dyspnea, sore throat, and nasal congestion[6].

Symptoms and signs that participants felt during treatment were severe headache, painful chest, nausea, anosmia, cough, weakness, breathing problems, cold, decreasing oxygen saturation. Some participants experienced high blood pressure, increasing pulse rate, and increasing liver function, this condition could occur in respons to patients' comorbidities.

The treatment/management received by participants who received treatment for COVID-19 including: fever-reducing meds, antiviral drugs, antibiotic drugs, antiemetics, analgesics, cough medicines, cold medicines, vitamins, and zinc. Participants who experienced breathing problems were given oxygen (cannula or NRM), blood thinner meds, and drugs to improve liver function (participants with liver function problems). Some of the participants consumed honey, milk, probiotics. Participants used eucalyptus oil to stimulate the olfactory function.

Treatment is given according to signs and symptoms in patients with appropriate treatment procedures given for COVID-19 patients[7][11].

The psychological downfall experienced by the participants in this study was such as, chaotic, worried that their parents were getting the virus as well, afraid of themselves as the effect of hallucination. Most of the participants felt sad, the family was also confirmed positive, some were felt the fear of abandonment, cried, felt bored, and feared of death.

Psychological disorders that appear in health workers in the form of anxiety, depression, and insomnia during the pandemic are increasing

put on a Non Rebreathing Mask (NRM) 8 liters/minute. You can't get out of bed, have a catheter, get antibiotics. My infusion therapy is still the same fluid, all injection drugs are included to thin the phlegm. On the 14th day the saturation started to rise, the cannula was replaced, the drugs were the same until the 14th day. While I was being treated every 6 days a swab was done." (P8)

5. Experiences during hospitalization

a. Physical experience

The theme of the experience felt is divided into 2 categories, namely psychic and spiritual experiences. Most of the participants had various psychic and spiritual experiences during hospitalization as stated by the participants:

"...I felt the lowest point in my life, when I was confirmed positive, especially after I found out that my elderly mother and father also tested positive. I feel I have brought the disease to both parents. I am excited when my husband can meet and meet face to face even though it is limited by glass. The first day until the third day I felt afraid because I was sleeping alone, the position of my head near the window without a curtain, I felt that someone was watching from behind the window. I felt someone knocking on the sink while I was brushing my teeth, plus I heard scary stories that his friend heard the sound of kuntilanak in the room I was in." (P1)

"...After I self-checked to convince myself and my family and the results were positive too, for 3 days I was still in denial because I was sad. I asked myself how come I got COVID? I regretted that time remembering the incident that I used hasmat belong, and was lazy to eat even though I was often reminded. At that time I did not know that I was pregnant. I cried to the lung doctor, I didn't accept that I was positive and I didn't want my family to be positive too. I dropped back after I found out that my husband was also treated for exposure from me and had more severe complaints than me. I am still worried about my baby's health because the information is that it might be born prematurely." (P2)

"...I was devastated by the positive PCR test results for COVID, I was sad and crying, how come I could be infected, even though I have used complete PPE but I am still exposed to the virus. I was wondering what if my husband and children were infected, because at that time I didn't know they were positive either because the test results had not yet come out. I also wondered where I was exposed to, I thought I might get caught on public transportation, even though I was very careful. The third day I started to accept it, I thought it had happened and it turned out that the symptoms and complaints had decreased, moreover, the complaints to my children and husband were also reduced." (P5)

"...I felt my mentality drop during the 6th day to the 10th day of treatment, I prayed while lying down, I couldn't go to the toilet alone, I had to be helped by the nurse, I cried constantly in excruciating pain. I feel maybe my age is here because I feel excruciating pain in my body. On the 11th and 12th days my condition was getting better and after the 12th day I was swab and the results were negative, then I wanted to be transferred to a non-COVID treatment room, but I refused and I still asked to go home". (P6)

"...I felt sad, scared and didn't want to be contacted by anyone from the first day to the 7th day. As long as I still feel suffocated I am overcome with fear. After passing the 7th day and the shortness of breath began to decrease, I have started to get up the courage to receive calls from my husband". (P8)

b. Spiritual Experience

"...I was most afraid on the first day until the 3rd day because I had a roommate who died, I was so scared I asked God not to take my life at that time because I still have children. I keep reminiscing about a friend who died because when he sucked I was the one who took care of him. I always thought that my father died, for a week I thought about it, but after a week my father was moved to another room." (P9)

"...I listen to murotals from youtube that I play over and over again, I pray every day after performing the obligatory and sunnah prayers, because after reciting and praying my mind is calmer and I believe that my illness is an expiation for my sins". (P1)

"... Diligently pray dhuha, tahajjud prayer, morning and evening remembrance. I pray in bed using IV and oxygen." (P4)

"...I pray that the results will be negative, even though I know the symptoms and signs lead to positive results, I even dream that the results are negative because of the details". (P5)

"...I think worship activities increased during treatment, I recited the Koran in a louder voice, so that the virus would get out of the body. I have trouble sleeping, after morning prayers it's hard to sleep until the afternoon, but I don't know what causes it." (P9)

6. Support System

a. Family

The support system theme is divided into 2 categories, namely family and colleagues. Most of the participants get the support system as stated by the participants;

"...My extended family called me or messaged me via WA asking about my health. My husband and children from home often make video calls and that makes me even more excited. My mother and father, who were being treated in the same room with me, whose condition was getting better, made me excited to get well soon and go home from the hospital, even though I came home from the hospital still positive." (P1)

".....Because my husband ended up being treated at the hospital where I work, I ended up making phone calls with my husband every day telling each other their complaints and strengthening each other. I know from the nurse who took care of my husband that my husband's complaints are more severe than what I felt during the treatment, so I continue to encourage my husband. My mother and father also call me every day to encourage me and don't forget to pray and recite the Koran." (P2)

"...The support system that I feel the most as a substitute for my family because I live in a boarding house are my roommates when they find out I have been exposed to COVID-19. During treatment and until I tested negative, I didn't tell my parents about my condition." (P3)

b. Colleagues and Superiors

"...While I was being treated, my husband was also self-isolating at home with my children, who also tested positive, but my husband's symptoms were milder than mine. My husband and children kept calling while I was being treated, I was encouraged by my husband and children. My extended family from my side and my husband's family also called me to keep me motivated." (P5)

"...Friends who take care of me are always encouraging, colleagues also pay attention to me by calling, or chatting on whatsapp, giving me encouragement by asking what I want to buy. The head of the ward and nursing management always ask about my condition via whatsapp or direct phone to me. I am 50 days out of service with permission from the hospital management". (P1)

"...My colleagues encourage me and remind me that I have to love my baby. The doctors who treated me also gave me advice that I should be grateful that I was the chosen one and should live it with passion. My colleagues call me every day, as well as the head of the room and my superiors in management continue to strengthen me to keep my spirits up and get well soon". (P2)

"...Friends who are hospitalized are very good at taking care of them, while being treated I try to make myself happy, often greet my friends first who are looking from across the glass, I always make myself happy to strengthen myself who is sad, they look I'm very happy, many send food, what makes me happy is that my friends always love me". (P9)

7. Inhibiting Factors during Recovery

Most of the participants had experiences that were felt to hinder their recovery as stated by the participants:

"...I once felt annoyed, did I stay positive because the patient in the same room with me changed, so I was exposed to it? I heard a story from my sister who lives at home, that the merchants who used to pass by either the vegetable seller or the food vendor did not want to stop when my children called to buy them, knowing that I was positive and was being treated at the hospital, it broke my heart. sad". (P1)

"...I felt down again after knowing my husband tested positive and

due to the emergence of anxiety[8]. The psychological downfall experienced by all participants in this study are also in accordance with the results of research which states that the impact of COVID on psychological changes such as the emergence of feelings of sadness, depression, denial, and insomnia[5].

The spiritual experiences experienced by participants while undergoing treatment for COVID-19 at the hospital became better, diligent in obligatory prayers, sunnah prayers, dhikr, praying, listening to Qur'an recitation, longing for the call to prayer, believing in pain as an expiation of sins, still take medicine and be eager to heal, and believe in pain from Allah and the healer is also from Allah. as follows. In this study, the support system/family support received by the participants was greatly increased. The support provided by the family includes: having conversation through phones, WhatsApp, video calling, sending pictures to each other for encouragement. All participants considered that family support was very meaningful while undergoing COVID-19 treatment at the hospital. Family support for COVID-19 patients has an impact on increasing self-confidence and motivation to recover soon[9].

The support from colleagues and superiors for the participants was also greatly increased. The support provided includes: asking for news via telephone or whatsapp, sending gifts, support from the Indonesian Nurses National Association.

Colleagues at work have a high intensity of interaction, so they have physical and psychological closeness. Psychic closeness is defined as a form of strengthening each other when conditions are healthy or sick. Superiors or leaders who pay attention when subordinates are sick will provide their own motivation for subordinates who are undergoing treatment. Support from the people around is an important point that can affect a person's ability to survive and deal with the stressors they experience. Family is the closest person who can provide support that gives high meaning to nurses[10].

Participants had experiences that they felt were hampering their recovery such as, the isolation in the home environment, the recovery time, still tested as positive COVID-19 even when they had returned to home, lying down on bed all day, and having difficulty to sleep.

The factors that are felt greatly helping the recovery process including: being pious, the urge to reunite with family, friends' support, superiors' support, the urge to get better to continue being the front liner during pandemic. Moreover, family support plays a huge role in increasing the patient's confidence and motivation to recover quickly from COVID-19[9].

The suggestions conveyed by the participants were: continuing to maintain COVID-19 protocols, always using PPE, maintaining immunity by consuming vitamins, milk, praying, and being optimistic during the pandemic. COVID-19 patients need a support system, both from family and colleagues, superiors, and the management of the workplace. COVID-19 patients should not be avoided.

CONCLUSION

The experience of nurses who are confirmed positive for COVID-19 and undergoing treatment is an interesting experience and provides many benefits for nurses in particular and health workers in general. The exposure to COVID-19 experienced by all participants for the first time made the participants deny, angry, sad until they finally accepted the fact that being exposed to COVID-19 with various prevention efforts that had been carried out was a destiny from God that had to be accepted.

the reaction of participants when they found out that they were confirmed positive for COVID-19. Most of the participants expressed sadness, denial, worry, guilt, and fear of being avoided. Participants were being denial and puzzled as to where did they get it from. Participants were sad and worried that their family members and colleagues were infected as well from them. Participants did not want to make their parents worried, because they were old.

The management/medication that all participants received while undergoing treatment for COVID-19 in general were oxygen therapy, parenteral therapy, antivirals, antibiotics, blood-thinning analgesics, cough medicines, cold medicines, antiemetics, vitamins, and other medicines needed according to the symptoms caused.

Being at the lowest point, feeling mentally dropped, feeling worried about being avoided became psychological pressure for some participants, however, various types of worship activities that were felt to be ritualistic increased into separate spiritual experiences for all participants. All participants surrender to Allah SWT for the destiny that must be lived.

Family support (husband, children and extended family) is perceived as the biggest support system as well as support from peers and superiors. Worship activities, family support, colleagues and superiors are also perceived as factors that are felt to accelerate recovery from exposure to COVID-19 during treatment. The symptomatic symptoms that the participants felt and the duration of their reduction became one of the inhibiting factors for their recovery.

SUGGESTION

This research can be used as material for further research, both quantitative and qualitative. Hopefully the experience of the nurse who was confirmed positive for COVID-19 can be used as a consideration in improving governance in the room. Hopefully nurses in particular and health workers in general are given health, blessings and of course the spirit of serving in caring for COVID-19 patients during this pandemic.

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