



## Original Research

# Peer Supports Was Related To Improving The Nurse's Self-Efficacy In Caring For Covid-19 Patients In Hospitals

Dadan Bardah<sup>1</sup>, Setyowati Setyowati<sup>2\*</sup>, Tuti Afriani<sup>3</sup>, Hani Handiyani<sup>4</sup>, Sarvita Dewi<sup>5</sup>

<sup>1</sup> Master Student of Nursing, Leadership and Management Faculty of the Nursing University of Indonesia

<sup>2,3,4</sup> Faculty of Nursing, University of Indonesia

<sup>5</sup> Harapan Kita Children's and Mother's Hospital, Jakarta, Indonesia

### ABSTRACT

**Background:** Nurses who fought against Covid-19 are generally under pressure, so they are prone to anxiety and stress. This problem certainly affects the nurses' self-efficacy in caring for Covid-19 patients. Therefore, it is necessary to have support from nurse managers and colleagues to overcome this problem. This study aims to identify the correlation between nurse managers and peer support with nurses' self-efficacy in caring for Covid-19 patients in hospitals.

**Methods:** This study uses a quantitative descriptive method with a cross-sectional approach. The number of samples was 167 nurses from the Covid-19 referral hospital in Cirebon with the accidental sampling technique. Data were analyzed using the Chi-square test and multiple logistic regression tests.

**Results:** The results showed that there was a correlation between peer support and nurses' self-efficacy ( $p < 0.001$ ), and there was not a correlation between nurse manager support and nurses' efficacy in caring for Covid-19 patients in hospitals ( $p = 0.229$ ). The most influential factors on nurses' self-efficacy were peer support (OR: 3.207) and gender (OR: 2.229).

**Conclusion:** Peer support was related to increasing the nurse's efficacy in caring for Covid-19 in the hospital. The recommendation is the hospitals need to increase support for nurses by providing motivation, information, and counselling for individuals who need it. Therefore the emotional burden of nurses can be reduced, and self-efficacy becomes better in doing the job.

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### CONTACT

Setyowati



[wati123@ui.ac.id](mailto:wati123@ui.ac.id)

Faculty of Nursing, University of Indonesia, FIK UI Campus, Prof. Dr Bahder Djohan Street, Depok, West Java – 16424 Indonesia.

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## INTRODUCTION

Covid-19 is a disease that can be transmitted and has become a current pandemic in many countries worldwide. Covid-19 is a new challenge in the health system, such as the roles of nurses. Nurses have essential functions in the management of Covid-19 patients.

They not only provide nursing care but also coordinate and communicate with the other health care worker and family members to discuss the goals of Covid-19 patients

(Sharma, Pohekar, & Ankar, 2020). This disease's emergence also increases the chances of infection in health care workers, including nurses (Gallopeni et al., 2020). Therefore, the situation caused psychological pressure on nurses.

Nurses battling Covid-19 are generally under pressure, making them vulnerable to mental health problems (Gallopeni et al., 2020; Mo et al., 2020). Nurses have low sleep quality and high-stress levels during the pandemic process (Bilgiç, Çelikkalp, & Mısırlı, 2021). 2.2% to 14.5% of nurses have severe stress and anxiety (Bohlken, Schömig, Lemke, Pumberger, & Riedel-Heller, 2020).

The research on Covid-19 disaster volunteers in Indonesia found that most experienced mild stress, depression, and anxiety (Agustin, Nurlaila, Yuda, & Yulia, 2020). 61.9% of nurses have moderate stress levels, and 38.1% are low-stress in caring for Covid-19 patients (Sihombing & Septimar, 2020). Anxiety, stress, and depression scores significantly increased during the first wave of the Covid-19 pandemic compared with before the Covid-19 outbreak (Zakeri, Rahiminezhad, Salehi, Ganjeh, & Dehghan, 2021).

The increasing anxiety in nursing occurs because Covid-19 is a new disease. It changed the nurse's work routine, and they were not confident in caring for Covid-19 patients (Aydogdu, 2020; Rangachari & L Woods, 2020). It also affected self-Job performance was positively correlated with self-efficacy and not significantly associated with burnout.

However, self-efficacy was negatively correlated with burnout in psychiatric nursing (Lim, Song, Nam, Lee, & Kim, 2022). Rangachari & L Woods, 2020 mention that nurses need support to reduce anxiety and increase nurses efficacy during the Covid-19 pandemic, especially from nurse managers and peer support. Thoughtful and strong managers are needed during the Covid-19 pandemic. Nurse managers play a role in ensuring motivation, courage, and morale.

All nurses need (Turkmen, Aydogdu, Göktepe, & Baykal, 2020). The lack of support for nurses during the Covid-19 pandemic can reduce nurses' trust and psychological safety in communicating patient safety issues with nurse managers (Rangachari & L Woods, 2020). It is necessary to have support from various parties to reduce nurse anxiety and increase nurses' self-efficacy, especially from nurse managers and peer support.

Self-efficacy affects how a person thinks, feels, motivates, and acts. It is needed to provide hospital nursing care (Widyawati, Supriyadi, & Komarudin, 2022). Self-efficacy was correlated with mental health, resilience, and job fatigue experienced by nurses (Hsieh, Wang, & Ma, 2019). During the covid-19 pandemic, self-efficacy is essential in predicting the nurse's willingness and readiness to care for patients with infectious diseases (Lee & Kang, 2020).

Based on the description of the condition of psychological pressure for nursing during the Covid-19 pandemic, researchers are interested in examining the nurse manager and peers' support and nurses' self-efficacy in caring for Covid-19 patients in the hospital. This study aimed to identify the relationship between nurse managers and peer support with nurses' self-efficacy in caring for Covid-19 patients in hospitals.

## **MATERIALS AND METHOD**

The design of this study used descriptive quantitative with a cross-sectional approach. The population of this study were all nurses in an isolation room for Covid-19 in referral hospital Covid-19 at Cirebon areas. The sample was taken using the

accidental sampling technique with a minimal selection was 158 respondents on duty in the Covid-19 room at RSD Gunung Jati Cirebon, RSUD Arjawinangun, and RS Paru Provinsi Jawa Barat with the criteria of being willing to be a respondent, and follow the rules of study.

Two hundred seventeen respondents followed this research, but only 167 nurses filled the questionnaire with full. Data was taken in May 2021 for one month using a questionnaire. The questionnaire was distributed with a google form via the WhatsApp application. But, there was a problem filling in the questionnaire with a google form, so it spread directly to hospitals.

The questionnaire used is a modification of several instruments. The nurse manager support questionnaire is a modified instrument from the Supervisor Support Scale (SSS) (McGilton, 2010). The peer support questionnaire was modified from Peer Caring Measurement (PCM) (Kuo, Turton, Lee-Hsieh, Tseng, & Hsu, 2007). The self-efficacy questionnaire is a modified instrument from the Self-Efficacy in Patient Centeredness Questionnaire (SEPCQ-27) (Zachariae et al., 2015).

All the questionnaires had obtained permission for modification from previous researchers by email. Chronbach's Alpha value obtained in the validity test of the nurse manager support questionnaire was 0.856, the peer support questionnaire received a value of 0.907, and for the nurse self-efficacy questionnaire, the value obtained was 0.884. Data were analyzed using the Chi-Square test and logistic regression test using SPSS.

This research was conducted after passing the ethical test at the Faculty of Nursing, the University of Indonesia with the number: SK-63/UN2.F12 D1.2.1/ETIK 2021 on March 11<sup>th</sup>, 2021, and passing the ethics test at Rumah Sakit Gunung Jati, Kota Cirebon number: No.086/LAIKETIK/KEPKRSGJ/V/2021 on May 6<sup>th</sup>, 2021. In addition, researchers also pay attention to the ethical aspects of research, including goodwill, respect for human dignity, justice, privacy, anonymity, and informed consent.

## RESULTS

This study was conducted on 167 nurses who served in the Covid-19 room at the Cirebon area hospital, most of whom were male (50.9%), had vocational education (63.5%), aged more than 35 years (53, 9%), nurses have worked for more than six years (61.7%). They have an available position 1 (42.5%).

Table 1 describes nurse manager support, peer support, and nurses' self-efficacy in the hospital. Description of nurse manager support for nurses who treat Covid-19 patients is in the excellent category, as much as 60.5%. The overview of peer support to nurses caring for patients with Covid-19 includes both categories, amounting to 53.3%.

Meanwhile, the description of the self-efficacy of nurses caring for Covid-19 patients shows that nurses' self-efficacy is still relatively low, 50.3%.

**Table 1.** Description of Nurse Manager and Peer Support and Nurses' Self-Efficacy in Cirebon Regional Hospital, May 2021 (n=167)

<b>Variable</b>	<b>n</b>	<b>Percentage (%)</b>
<b>Nurse Manager Support</b>		
Good	101	60.5
Deficient	66	39.5
<b>Peer Support</b>		
Good	89	53.3

Variable	n	Percentage (%)
Deficient	78	46.7
<b>Self-Efficacy</b>		
Low	84	50.3
High	83	49.7

Table 2 shows the relationship between the characteristics of respondents and nurses' self-efficacy. It was found that there was a relationship between gender and nurses' self-efficacy (p-value of 0.011). There was also a significant relationship between age and nurses' self-efficacy in caring for Covid-19 patients in the hospital (p-value 0.024). It also found a meaningful connection between the working period of nurses and nurses' self-efficacy in caring for Covid-19 patients in hospitals (p-value 0.013).

**Table 2.** The Relationship of Respondents' Characteristics to Nurse's Self-Efficacy at Cirebon Regional Hospital, May 2021 (n=167)

Variable	Self-Efficacy				OR	95% CI Min-Max	P-value
	Low		High				
	n	%	N	%			
<b>Gender</b>							
Male	51	60	34	40	2.227	1.19 – 4.13	0.011*
Female	33	40.2	49	59.8			
<b>Education Level</b>					0.932	0.50 – 1.75	0.826
Vocational	54	50.9	52	49.1			
Profession	30	49.2	31	50.8			
<b>Functional Position</b>					-	-	0.171
PK 1	37	52.1	34	47.9			
PK 2	28	58.3	20	41.7			
PK 3	19	39.3	29	60.4			
<b>Age</b>					2.039	1.09 – 3.80	0.024*
<35.10	55	57.9	40	42.1			
>35.10	29	40.3	43	59.7			
<b>Working period</b>					2.235	1.18 – 4.23	0.013*
< 6 years	40	62.5	24	37.5			
> 6 years	44	42.7	59	57.3			

Table 3 shows that statistically, there is no relationship between nurse manager support and nurses' self-efficacy in caring for Covid-19 patients (p = 0.229). However, there was also a significant relationship between peer support and nurses' self-efficacy in caring for Covid-19 patients in the hospital (p < 0.000). Nurses who received good peer support had higher self-efficacy than nurses who received deficient peer support (62.9%).

**Table 3.** The Relationship between Nurse Manager and Peer Support for Self-Efficacy in Cirebon Regional Hospital, May 2021 (N=167)

Variable	Self-Efficacy				OR	95% CI Min-Max	P-value
	Low		High				
	n	%	n	%			
<b>Nurse Manager Support</b>							
Deficient	37	56.1	29	43.9	1.446	0.78 – 2.73	0.229
Good	47	46.5	54	53.5			
<b>Peer Support</b>							
Deficient	51	65.4	27	34.6	3.205	1.69 – 6.04	0.000*
Good	33	37.1	56	62.9			

Table 4 shows that the influential factor on nurses' self-efficacy is gender and peer support. Peer support was the most significant variable of nurses' self-efficacy in caring for Covid-19 patients. Nurses who received good peer support had a self-efficacy of 3,207 times higher than nurses who received deficient support after being controlled by gender (95% CI).

**Table 4.** Final Modeling of the Most Influential Variables on Nurse Self-Efficacy in Cirebon Regional Hospital, May 2021 (N=167)

Step	Variable	B	S.E	Wald	df	P-value	OR	95% CI (Min-Max)
5	Peer Support	1.165	0.330	12.451	1	0.000	3.207	1.679 – 6.127
	Gender	0.802	0.329	5.927	1	0.015	2.229	1.169 – 4.250
	Constant	-1.030	0.297	12.025	1	0.001	0.357	-

## DISCUSSION

This research was conducted during the Covid-19 pandemic, and many nurses had a lot of psychological pressure because the case of Covid-19 increased. They felt stress, anxiety, and not confidence in caring for Covid-19 patients (Rangachari & L Woods, 2020; Zakeri et al., 2021). This study found that self-efficacy during the Covid-19 pandemic is low.

It can happen because the Covid-19 pandemic was a new situation for nurses, who are inexperienced in caring for Covid-19 patients. The previous study also found low nurses' self-efficacy. Nurses cause it to lack the experience and confidence to cope with it. Nurses not confident in dealing with Covid-19 may feel more anxiety (Rangachari & L Woods, 2020; Xiong, Yi, & Lin, 2020). So nurses' self-efficacy was negatively correlated with anxiety (Xiong et al., 2020).

This study found a relationship between genders and nurses' self-efficacy in caring for Covid-19 patients in hospitals. Female nurses have higher self-efficacy than male nurses. This is because females have many roles in their lives, so females are more experienced in dealing with various situations. Women who work and become homemakers will have higher self-efficacy than men who only work (Manuntung, 2018).

This result was different from the previous study, which showed that the self-efficacy of males was higher than that of females. It caused the male to have a more mature readiness to solve the problem and find solutions (Handiyani et al., 2019). The results of statistical analysis showed that age-related to nurses' self-efficacy. The

possible explanation is that older nurses are more mature, influencing their thinking and perception of their abilities to do something; it will affect their self-efficacy.

This result was conducted by the research of (Wang, Qu, and Xu, 2015), which states that the level of efficacy is higher in the age group between 30-50 years, while the group under 30 and above 50 years has a lower level of self-efficacy. According to (Manuntung, 2018), 35 years is an adult age when a person begins to focus on their efficacy. Age will affect how to think and work. A more mature person will be better at thinking and working (Robbins & Judge, 2017).

The results showed a relationship between the working period and the nurse's self-efficacy. Respondents with more than six years of work have high self-efficacy. It can happen because the longer a person work, the more experience they have. The incident dramatically affects a person's self-efficacy in providing care to patients (Mukti & Tentama, 2019).

That a good experience can increase nurses' self-efficacy, while a lack of knowledge and experience can result in low nurses' self-efficacy in clinical competence (Welsh, 2014). Another research also stated that nurses who had just worked in hospitals during the Covid-19 pandemic, incredibly fresh graduated, felt that they experienced emotional changes such as nervousness and uncertainty due to the nurses' ignorance in caring for Covid-19 patients (Gómez-Ibáñez, Watson, Leyva-Moral, Aguayo-González, & Granel, 2020).

In addition to being under pressure, they also feel responsible and highly committed to society, the profession, and themselves in dealing with Covid-19. Therefore, they will feel guilty if they only quiet during this pandemic. This of course raises the pressure on them (Gómez-Ibáñez et al., 2020). This research investigated the support of nurse managers and peers and nurses' self-efficacy in a public hospital caring for Covid-19 patients. We found that the support of nurse managers and peers was included in the excellent category.

The possible reason is nurse managers and peers it was the same situation. They were inexperienced with the Covid-19 pandemic. They are still confused, stressed, and anxious with a change in their work routine. So that they support each other to continue the best nursing care for Covid-19 patients. Peer support provides intervention for mental health (Godfrey & Scott, 2020).

In a pandemic situation, thoughtful and robust managers are indispensable for nurses. It causes managers to play a role in ensuring nurses' motivation, courage, morale, and needs during the Covid-19 pandemic (Turkmen et al., 2020). Statistically, there is no relationship between nurse manager supports on nurse self-efficacy.

This study's results differ from previous research, which states that there is a significant relationship between the role of the head of the room and the nurses' self-efficacy (Saputra, Yanti, & Suarningsih, 2019). This difference is due to the current nurse manager's stress and anxiety in the face of the Covid-19 pandemic. They strive to remain in the lead despite experiencing unprecedented challenges. Simultaneously, nurse managers have personal fears and demands to care for their families and colleagues. So this affects their attitude in their role (Gerardi & Lawson, 2021).

Nurse managers carry out interpersonal roles, such as providing nurses support, motivation, and information (Robbins & Judge, 2017). These are parts of social persuasion that can increase self-efficacy because of the self-confidence that arises from one's self-motivation (Aydogdu, 2020; Manuntung, 2018; Saputra et al., 2019). The results of this study are also not to research conducted (Zaghini et al., 2021), which

found that nurse manager support can reduce exposure to stress due to work and emotional exhaustion of nurses during work stress in a pandemic.

The study found a relationship between peer support and nurses' self-efficacy in treating Covid-19 patients. These results align with the research conducted by Wang et al., 2018, that the help of friends and co-workers has a direct positive effect on self-efficacy at the beginning of a nurse's career. A supportive work environment can improve nurses' self-efficacy and performance professionally (L. Wang et al., 2018; Welsh, 2014).

Peer support can provide proactive services during the Covid-19 pandemic by providing empathy and compassion for co-workers. It is proven to reduce difficulties, build nurse resilience after experiencing stress, build a sense of security, calm, and self-efficacy, and increase nurses' recovery expectations. During the Covid-19 pandemic, this peer support provided interventions for mental health and psychological first aid (Godfrey & Scott, 2020).

Nurses' self-efficacy will continue to increase if nurses have strong self-confidence. This self-confidence can be obtained by providing motivation, information, opportunities to express feelings, and increasing knowledge and skills to nurses as a form of support given to nurses in charge of caring for Covid-19 patients (Kackin, Ciydem, Aci, & Kutlu, 2021; Viswanathan, Myers, & Fanous, 2020). Thus, the burden nurses feel can be slightly reduced to increase self-efficacy, and it is hoped that nursing care can be carried out correctly.

## **CONCLUSION**

There was a relationship between peer support and nurses' self-efficacy in caring for Covid-19 patients in hospitals. But there is no significant relationship between nurse manager support and nurses' self-efficacy in caring for Covid-19 patients in hospitals. Nurses who receive peer support have higher self-efficacy than nurses who do not receive peer support. The variables that influence nurses' self-efficacy most are peer support and gender. The better peer support will increase the nurse's self-efficacy three times compared to nurses who lack support from peers after being controlled by gender.

This study recommends the need for support from various parties to increase nurses' self-efficacy in treating Covid-19 patients in hospitals. One of them is monitoring the health and welfare of nurses regularly, providing guidance and counselling for nurses, providing the latest information, and being empathetic to nurses. In addition, there is a need for further research related to self-efficacy in Covid-19 volunteer nurses qualitatively to deepen the factors that affect self-efficacy in treating Covid-19 patients.

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