Work Stress Overview in Midwives during the Covid-19 Pandemic

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Abstract. The increase in the number of patients in the obstetrics room, both positive for Covid-19 and not, makes midwives often feel anxious, tired, afraid, and even worried about being exposed to the Covid-19 virus, which is undoubtedly one of the factors that can cause work stress for midwives. The aim is to determine the description of work stress based on physiological, psychological, and behavioral symptoms in the midwifery room. The population was all midwives in the midwifery room, namely 43 people, with a sample of 39. Furthermore, of respondents who experience work stress based on psychological symptoms, as much as 61.5% are in the moderate category. Work stress based on Physiological symptoms, as much as 97,4%, is in the medium category, and work stress based on behavioral symptoms, as much as 76.9%, is in the high category. This research shows that individual strategies and stress management can reduce and prevent workplace stress.

Keywords: Work Stress, Psychological Symptomsl, Physiological Symptoms, Behavioral Symptoms

Abstrak. Peningkatan jumlah pasien di ruangan kebidanan baik yang positif Covid-19 maupun yang tidak, membuat bidan seringkali merasa cemas, lelah, takut bahkan khawatir akan terpaparnya virus Covid-19, yang tentunya menjadi salah satu faktor yang dapat menyebabkan stress kerja pada bidan. Tujuannya untuk mengetahui gambaran stres kerja berdasarkan gejala fisiologis, psikologis, dan perilaku di ruangan kebidanan. Populasinya seluruh bidan di ruangan kebidanan yaitu 43 orang dengan sampel 39. Hasil penelitian menunjukkan bahwa prevalensi tingkatan stress kerja pada bidan di ruangan kebidanan berdasarkan gejala Psikologis sebanyak 61,5% berada pada kategori sedang. Stres kerja berdasarkan gejala Fisiologis sebanyak 97,4% berada pada kategori sedang dan stres kerja berdasarkan gejala Perilaku sebanyak 76,9% berada pada kategori tinggi. Penelitian ini menunjukkan agar menerapkan manajemen stres secara individu dengan beristirahat disela jam kerja, mengendalikan perasaan cemas dengan saling menjaga kesehatan mental selama bertugas di masa pandemi dengan saling mendukung rekan kerja.

Kata kunci:Stres Kerja, Gejala Psikologis, Gejala Fisiologis, Gejala Perilaku

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Introduction

Covid-19 is a significant problem that occurs today for health organizations and governments around the world. Covid-19 was first reported in China at the end of December 2019, precisely in the Wuhan area (Phelan et al., 2020). Due to its highly contagious nature, the virus can spread quickly through respiratory droplets to individuals who come into close contact with symptomatic and asymptomatic patients during incubation.

Hospitals aim to provide quality and affordable health services to the community to improve public health. Therefore, the role of hospital officials is huge. Health workers, such as nurses and midwives, work on the front lines to treat patients due to the Covid-19 outbreak so that health workers can be exposed to the virus (WHO, 2020).

Knowing the data of the Nakes Death Influence Index (IPKN) as of July 21, 2020, shows the ratio of death rates in medical personnel when compared to the total positive deaths of Covid-19 in Indonesia to be one of the highest compared to other countries, which is 2.4% (Indonesian Doctors Association, 2020), this data is also supported by data obtained from the Central Board of the Indonesian Midwife Association that about 2,291 midwives confirmed positive for Covid-19 and 22 people died.

Midwives are responsible and accountable professionals, who work as female partners to provide support, care, and advice during pregnancy, childbirth, and *nifas* (postpartum), facilitate and lead childbirth on their responsibility and provide care to the newborn the baby itself (Law 4, 2019). Knowing information from the Head of the obstetrics room of RSUD dr. T.C Hillers Maumere, the presence of the Covid-19 virus that can spread and spread quickly and spread

quickly and the increase in the number of patients in the midwifery room both confirmed positive for Covid-19 and those who have not make midwives often feel tired, anxious, and afraid to worry about the exposure of the Covid-19 virus when carrying out midwifery services. This is certainly one example of factors that can cause work stress in the midwife herself.

According to the data, there were a total of Covid-19 positive cases in East Nusa Tenggara Province until February 13, 2021, at 18.00 WITA recorded 7,283 cases, up 251 cases from the previous day. The number of active cases is currently 2,919, and 4,169 people have been cured, while 195 died with Sikka Regency alone, as many as 31 cases. In addition, data from the Sikka Regency Health Office until July 15, 2021, recorded health workers exposed to Covid-19 reached 90 people, and data owned by the Sikka Regency Health Office recorded pregnant women patients exposed to Covid-19 until September 2, 2021, as many as 41 cases.

Therefore, based on this information and data, researchers are interested in conducting a study entitled "Work Stress Overview in Midwives During the Covid-19 Pandemic in the Midwifery Room of dr T.c. Hillers Maumere Hospital".

Method

This study is a descriptive study with a quantitative approach that aims to determine work stress levels based on psychological, physiological, and behavioral symptoms. The job stress questionnaire uses a questionnaire developed by the adopted researcher from Febriani (2017) to measure work stress based on three symptoms: psychological, physiological, and behavioral. The population in the study was all midwives in the midwifery room who worked at the Regional General Hospital dr. Tc Hillers Maumere amounted to 43 people with a sample of 39, which was taken using a simple random sampling technique. In this study, the instrument used was a questionnaire that contained a statement to be filled out by the respondent, namely the midwife in the midwifery room, dr. T.C Hillers Maumere Regional General Hospital.

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In this study, the variables described are the midwife's characteristics and the level of work stress based on psychological, physiological, and behavioral symptoms. Then, determining the category stress level on the questionnaire is done by determining the level category. The formula obtains the calculation of categorization with three levels. According to Azwar's Guidebook (2012), data categorization is carried out using hypothetical statistics. The process of retrieving data in this study is through interviews. The interview was conducted using questionnaires giving several questions regarding the characteristics of respondents, Name, Age, Working Period, Education, and Marital Status.

Result

Table 1.

Distribution of respondents based on Psychological Work Stress at RSUD dr. T.C Hillers Maumere in 2022

Work Stress	Frequency	Percentage (%)
(Psychological		-
Symptoms)		
Medium	24	61.5
Height	15	38.5
Total	39	100

Based on table 1, shows that of the 39 respondents who experienced work stress with psychological symptoms, 24 (61.5%) respondents experienced moderate work stress, while 15 (38.5%) respondents experienced high work stress.

Table 2.

Distribution of respondents based on Physiological Work Stress at RSUD dr. T.C Hillers Maumere in 2022

Work Stress	Frequency	Percentage (%)
(Physiological		C C
Symptoms		
Medium	38	97.4
Height	1	2.6
Total	39	100

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Based on table 2, shows that of the 39 respondents who experienced work stress with psychological symptoms, 38 (97.4%) respondents experienced moderate work stress, while 1 (2.6%) respondent experienced high work stress.

Table 3

Distribution of respondents based on Behavioral Work Stress at RSUD dr. T.C Hillers Maumere in 2022

Work Stress (Behavioral	Frequency	Percentage (%)
Symptoms)		
Medium	9	23.1
Height	30	76.9
Total	39	100.0

Based on table 3, shows that of the 39 respondents who experienced work stress with behavioral symptoms, 12 (30.8%) respondents experienced moderate work stress, while 27 (697.2%) respondents experienced high work stress.

Discussion

Work Stress Picture based on Psychological Symptoms

Psychological stress occurs due to external pressure, for example, feeling restless and anxious, mood swings, difficulty focusing, etc. The results of research conducted in the obstetrics room of RSUD dr.T.CHillers Maumere show that from 39 respondents, it can be seen that. The majority of midwives experience moderate work stress with psychological symptoms of 24(61.5) respondents, and 15 (38.5) respondents experienced high work stress. This indicates that midwives are concerned about health conditions due to the COVID-19 pandemic. Midwives experience feelings of anxiety, worried, and anxiety in carrying out their duties. Various obstacles and challenges arise while carrying out tasks during the COVID-19 pandemic making the midwives feel uneasy and uncomfortable while on duty because of fear of contracting COVID-19.

Moreover, the midwives felt that there are still many people who still need to comply with the applicable health protocols. People also often do not tell the truth when conducting inspections things it increases the risk that midwives will

contract the disease to be even greater. The worries experienced by the midwives increase when they see their condition and their family. Some midwives carry out their duties while pregnant. Other midwives admitted that he was afraid when he had to go home and meet his family. Paramidwives are afraid that they will become carriers of the virus and transmit the disease to their families. Besides, there are symptoms such as difficulty focusing on completing work, playing with cell phones to get rid of boredom, lazy in serving a lot of patients' comments, which are only sometimes felt by them.

This research follows that described by Handayani et al. (2020), that health workers are experiencing concerns during this COVID-19 pandemic due to an increased risk of exposure, infection, and possibly infecting other people, especially the closest people who eventually become a burden separately. They also have to be willing to self-isolate from their family and friends, the closest people, even though they do not have COVID-19.

All respondents are categorized as experiencing high work stress with psychological symptoms if the respondent often feels bored writing reports a lot, easily angry when the patient wants a lot, and so on with a period which can range from a few weeks to several years.

This study follows what Febriani explained: psychological nurses in the RSKD of South Sulawesi Province are at a high level, meaning that the more. If someone is negative psychologically, the higher the work stress experienced by nurses. Meanwhile, Suroso and Siahaan, (2006) in Febriani,(2017) argue that stress is scientifically an adverse condition or factor. That is, it leads to the emergence of physical and mental illness and behaviours considered unreasonable (distress). Nevertheless, stress can also be positive power (eustress) needed by individuals to spur themselves to achieve high performance and achievement.

Work Stress Overview based on Physiological Symptoms

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The stress response to health problems or physiological reactions occurs when the body experiences stress, there will be physiological changes in response to the occurrence of stress. The system in the body that responds is mediated by nerves autonomic, hypothalamic-pituitary axis, and catecholamine release affects the functions of organs in the body such as the cardiovascular system, gastrointestinal and other disease disorders (Wantoro, 1999) in Nurdiawati(2018). The symptoms of physiological work stress: are increased heart rate and blood pressure, increased secretion of adrenaline and non-adrenaline, gastrointestinal tract (e.g. gastric upset, easily injured, quickly physically tired, death, respiratory disorders, sweating more often, headaches and difficulty problems sleep).

The results of the research conducted in the obstetrics room of RSUD dr. T.C Hillers Maumere showed that 38 (97.4%) respondents experienced physiological work stress moderate and 1 (2.6%) experienced high physiological work stress. It can be seen accordingly with the number of jobs increasing during the COVID-19 pandemic due to the increasing number of patients affecting physical conditions. Midwives experience physical exhaustion, such as being unable to sleep when many patients are admitted, heartbeats fast when performing obstetric services to patients with COVID-19, back pain, body aches after finishing work, difficulty breathing when wearing PPE for a long time, and so on. Though the midwives had moderate physiological disturbances, they were still at the eustress stage, which means the condition when experiencing pressure from outside can still be faced.

The number of respondents who experience stress is moderate because the workload they experience does not cause them much experience physical or health problems because their physical or physical endurance is still good. This research is certainly in line with the research of Michael (2013) in Febriani (2017) that from 50 respondents, 20 experienced mild physiological work stress was obtained people (40%), 24 respondents (48%) experienced moderate stress, while six respondents (12%) experienced high work stress. In addition, this research is also in line with

Nurdiawati's (2018) research that physiological work stress is dominated by employees who experience moderate physiological stress.

Supported by observations and interviews conducted by researchers, that midwife at RSUD dr. T. C Hillers Maumere, they are still physically strong to work despite the lack of human resources. Sometimes midwives often experience fatigue due to many patients and much writing the daily obstetric report. Meanwhile, midwives who experience high physiological work stress are due to experience rising blood pressure often, stomach bloating, and bloating when treating many patients, headaches when many tasks are completed, difficulty sleeping for thinking about work, and so on. This is supported by the opinion of Doni (2021), which shows that the higher the workload, the higher the stress work experienced by health workers during a pandemic. The high level of work stress among health workers was also found to be associated with increased workloads faced during the COVID-19 pandemic (Said & El-Shafei, 2021).

Work Stress Overview based on Behavioral Symptoms

Behavioral stress symptoms are related to internal behavior and personal life, such as the inability to relate closely to others, distrusting self, frequent absences, low motivation, and so on. Research conducted by Cooper (2001) in Febriani (2017) suggests that behavioral symptoms mean that employees are always in touch with others. They interact with coworkers, subordinates, or superiors when there is a mismatch due to substandard communication between the elements. This will cause feelings of discomfort for the employees themselves. Meanwhile, Terry Beehr and John Newman (1999) stated that the symptoms of the primary behavior of stress are delaying or avoiding work achievement (performance) and productivity and decreased quality of interpersonal relationships with colleagues and family.

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The results of research conducted in the obstetrics room showed that of 39 people, it could be seen that the majority of midwives experience high behavioral work stress; as many as 30 (76.9%) and 9 (23.1%) people experience moderate behavioral work stress. State stress will affect the work of midwives. Midwives experiencing high stress with behavioral symptoms show an attitude of anxiety about being exposed to COVID-19 when performing midwifery services and increase the workload experienced. This will influence the attitude of midwives toward patients when providing services. This attitude such as acting aggressively when encountering problems in the patient's obstetric action, which will lead to patient dissatisfaction with the services provided, causing poor interpersonal relationships with patients, feeling lazy when going to work, lazy to work because of much work, performance decreases because of too many patients. While the midwives were categorized as having moderate stress with symptoms of behavior, sometimes attitudes such as not communicating with other midwives because of being busy, do not get together with family because many tasks are completed, portion eating increases when there are many problems, and so on. However, midwives can still maintain a harmonious relationship and be able to work together with co-workers. Thing This is in line with Meylinda's research in Febriani, which shows that there is a negative and significant relationship between interpersonal communication and job stress in nurses at the Yogyakarta City General Hospital.

Conclusion

The prevalence of work stress levels in midwives in the obstetrics ward of RSUD dr. T.C Hillers Maumere with symptoms of psychological work stress is in the moderate category 61.5%, midwives who experience symptoms of physiological work stress are in the moderate category 97.4%, and 76.9% experiencing behavioral work stress symptoms are in the high category.

Suggestion

The hospital can implement stress management by conducting socialization or training related to ways and prevention of managing work stress and making

routine programs by doing physical exercises such as gymnastics, jogging, and cycling. Apply personal stress management, such as resting between work hours, always using Personal Protective Equipment, controlling feelings of anxiety by taking care of each other's mental health during on duty during the pandemic by always supporting co-workers so that the Midwives do not feel alone in facing this pandemic situation. Aside from that, always create a good relationship with the work environment and foster a good relationship with patients and fellow midwives so that they can reduce work stress.

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