FULL PAPER

Spiritual well-being, perceived social support, and its correlation with psychological resilience of health workers in covid-19 unit at special infection hospital (RSKI) universitas airlangga during pandemic

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During Covid-19 pandemic, health workers were among vulnerable groups to experience psychological problems related to the pandemic. Some protective factors were provided to maintain the mental health of health workers, among which one is psychological resilience where spiritual well-being and perceived social support are said to be factors that can mediate it. This study examined the correlation between spiritual well-being and perceived social support on the psychological resilience of health workers during the pandemic era in Indonesia. Furthermore, results of this study can be used as basic data for consideration in formulating policies to protect health worker's mental health in the future. This aim of this study was to analyze correlation between spiritual well-being and perceived social support with psychological resilience of health workers in Covid-19 Unit, RSKI Universitas Airlangga. This is a cross-sectional observational analytic study. Spiritual well-being was measured using Spiritual Well-being Items (SWBS) questionnaire, perceived social support using Multidimensional of Perceived Social Support (MPSS) while psychological resilience using Connor-Davidson Resilience Scale 10 (CD RISC-10). This study sample consisted of 33 health workers. Subjects had high and moderate levels of spiritual well-being, perceived social support and psychological resilience. No significant correlation was found between total score of spiritual well-being, perceived social support and psychological resilience. From the sub-dimensional of perceived social support, only friends' sub-dimension has a significant effect on the psychological resilience. There is no significant correlation between spiritual well-being, total perceived social support and psychological resilience. Only perceived social support of friends has an effect.

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KEYWORDS

Introduction

The World Health Organization (WHO) declared the pandemic status of Corona virus disease 2019 (Covid-19) in March 2020. Until the beginning of 2023, the number of diagnosed positive for Covid-19 reached more than 698 million people worldwide with a death rate exceeding 6.9 million people. It has created a global health crisis and has an

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impact on many aspects of life [1-3]. Health workers are one of vulnerable group to experiencing the negative effects of pandemic. This condition has put health workers all over the world in a difficult situation and working under pressure [4-6], and causes negative effect on mental health, including burn out, compassion fatigue, anxiety, depression, Post Traumatic Stress Disorder (PTSD), and moral injury. Survey conducted on 1257 health workers from 34 hospitals in China during the beginning of Covid-19 pandemic reported symptoms of depression in 50.4%, anxiety in 44.6%, insomnia in 34.0%, and distress in 71.5% of respondents [6-8].

During a pandemic, it is important to maintain mental health and psychosocial well-being. Protective factors must be promoted to reduce the negative effects of pandemic on the mental health of health workers [2,9]. Psychological resilience can protect the mental health of health workers who are exposed to the negative effects of the Covid-19 pandemic [2,4,7]. Psychological resilience varies from one individual to another, and is something complex that is an interaction of various things that will influence how a person responds to stressful events. Clinical evidence regarding perceived social support states that health workers who have strong and meaningful relationships with their environment have happier lives and lower levels of burnout. A good level of spiritual well-being has a positive association with the mental health of health workers [10,11].

Health workers have significant contribution to handle pandemic and are directly affected from a psychological side. Therefore, it is important to pay attention to mental health of health workers who work in Covid-19 services. Special Hospital for Infections (RSKI) Universitas Airlangga in Surabaya, Indonesia is one of the special hospitals for treating Covid-19 patients provided by Airlangga University in collaboration with the East Java Provincial Government with a capacity of more than 190 beds. However, study that investigating the correlation between spiritual well-being and perceived social support on the psychological resilience of health workers during the pandemic era in Indonesia is still limited. Furthermore, results of this study can be used as basic data for consideration in formulating policies to protect health worker's mental health during pandemic and in the future.

Materials and method

Study sample

This study is an observational analytical study with cross sectional approach, carried out in the Covid-19 unit of Special Infection Hospital (RSKI) Surabaya in January-February 2023. The subjects in this study were health workers on duty in the Covid-19 unit who met inclusion, exclusion criteria and filling out the questionnaire directly. The total number of research subjects was 33 people consisting of 11 doctors, 20 nurses and 2 hospital care assistants (Figure 1).

Measurement tool

Spiritual well-being was measured using Spiritual Well-being Items (SWBS) questionnaire [12], perceived social support using Multidimensional of Perceived Social Support (MPSS) [13], while psychological resilience using Connor-Davidson Resilience Scale 10 (CD RISC-10) [14]. Demographic data was obtained using a demographic questionnaire created by the researcher himself. Data is collected and processed in the form of distribution tables. Spearman correlation test was carried out to see correlation between variables that were not normally distributed, while Pearson correlation test was used for variables that were normally distributed. In addition, a multivariate linear regression test was carried out to see the strength of the influence of each variable.
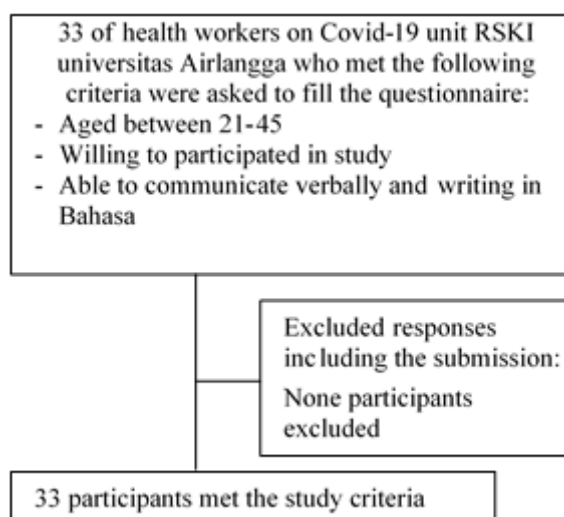
FIGURE 1 Flowchart of enrolment of participants of study

Results

Subject demographic characteristics

TABLE 1 Demographic characteristic

Characteristic	n	%
Age		
Mean ± Standard deviation	28.33 ± 3.397	
Tribe		
Javanese	30	90.9
Maduranese	3	9.1
Religion		
Islam	33	100
Gender		
Men	10	30.3
Women	23	69.7
Marriage Status		
Unmarried	13	39.4
Married	20	60.6
Educational Level		
High School	2	6.1
College or university	31	93.9
Income		
< 4.300.479	8	24.2
> 4.300.479	25	75.8
Field Works		
Doctor	11	33.3
Nurse	20	60.6
Hospital Care Assistant	2	6.1
History of Chronic Disease		
Yes	2	6.1
No	31	93.9
History of Psychiatric Disorder		
No	33	100
Duration of works		
< 6 months	5	15.2
> 6 months	28	84.8
Units		
Emergency Unit	33	100

Table 1 indicates that the 33 subjects had an average age of 28.33 years, 30 people were Javanese (90.9%). All subjects were Muslim (100%), and 23 people (69.7%) were female. Based on marital status, 13 study subjects were unmarried (39.4%). Educational level of subjects: 31 people graduated from university (93.3%), most of whom had an income of more than Rp. 4,300,479, namely 25 people (75.8%). Based on occupation, 11 subjects work as doctors (33.3%), 20 people are nurses (60.65) and 2 people are Hospital Care Assistants (HCA) (6.1%). All of subjects work at Emergency unit.

Spiritual Well-being among Health Workers at Covid-19 Unit of RSKI

Table 2 shows that SWBS measurement shows that subjects had a high level of spiritual well-being as many as 31 people (93.9%) with a total mean spiritual well-being score of 100.97.

Perceptions of Social Support for Health Workers in the Covid-19 Unit of RSKI

The total MPSS score was high in 29 people (87.9%). In the sub-dimension related to social support from the family, 30 people (90.9%) scored high, 21 people (63.6%) in sub-dimension of friend had a moderate score, and in sub-dimension from significant others, 28 people had high scores (84.8%). Psychological Resilience in Health Workers in the Covid-19 Unit of RSKI.

The average psychological resilience score of the research subjects was 38.67. The highest score was 46 and the lowest score the research subjects had was 31.

Analysis of Correlation between Spiritual Well-Being, Perceived Social Support, and Psychological Resilience of Health Workers at Covid-19 Units RSKI. The results of Pearson correlation test showed a correlation coefficient of 0.074 with a p value of 0.684. This shows that there is no significant correlation between spiritual well-being and the psychological resilience of subjects (Figure 2). Table 3 indicates there is no significant correlation between the perceived social support from family social support and psychological resilience (p > 0.05). Significant correlation has been found between perceived social support from friends and psychological resilience (p < 0.05) with the strength of the relationship being moderate. Furthermore, Spearman correlation test showed that there was no significant correlation between perceived social support from significant others and total score of perceived social support with psychological resilience (p > 0.05).

Analysis of Correlation between Spiritual Well-Being and Perception of Social Support with Psychological Resilience of Health Workers at Covid-19 Unit RSKI

Results of the multiple linear regression test show that only perceived social support from friends have an influence on psychological resilience. It can explain psychological resilience by 25.2%, and the rest is explained by other factor.

TABLE 2 Statistical results

|		Total SWB	Total Family	Total Friends	Total Significant Others	Total MSPSS	Total CD-RISC10
N	Valid	33	33	33	33	33	33
	Missing	0	0	0	0	0	0
Mean		100.97	24.27	19.82	24.45	68.55	38.67
Std. Error of Mean		1.577	.473	.553	.651	1.188	.707
Median		103.00	24.00	20.00	25.00	71.00	39.00
Std. Deviation		9.057	2.719	3.177	3.742	6.824	4.059
Minimum		78	17	14	15	52	31
Maximum		113	28	26	28	77	46
Percentiles	25	92.50	23.00	17.00	23.50	64.00	36.00
	50	103.00	24.00	20.00	25.00	71.00	39.00
	75	107.00	26.50	22.50	27.50	74.00	42.00
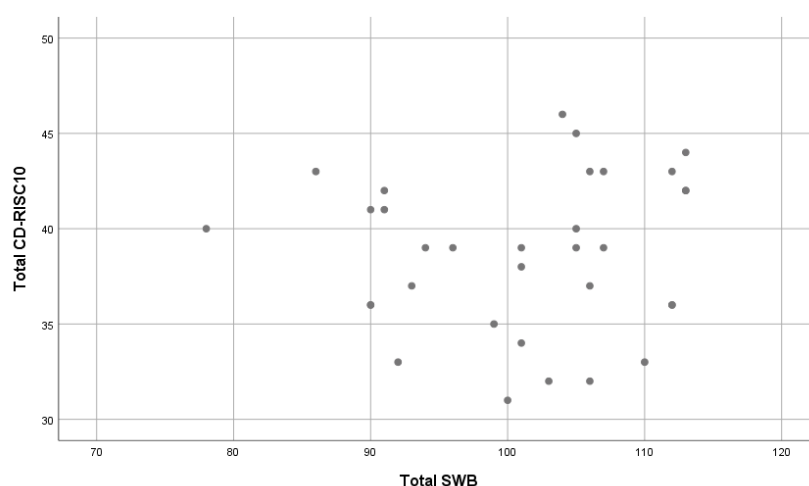
FIGURE 2 Pearson correlation test of spiritual well-being and psychological resilience

TABLE 3 Correlation between perceived social support and psychological resilience

	n	Pearson / Spearman Correlation test	*P*- value
Family	33	-0.062[a]	0.731
Friend	33	0.502[a]	0.003
Significant Others	33	-0.009[b]	0.958
Total Skor MSPSS	33	0.226[b]	0.206

Discussion

Majority of subjects have a high level of spiritual well-being and perceived social support. These results are similar to research conducted by Putri *et al.*, on 221 nurses who served in four Covid-19 referral hospitals in West Sumatra [15]. During Covid-19 pandemic, health workers throughout the world experienced an unpleasant situation and increased work load. Spiritual well-being has a significant role during periods of crisis and recovery process after disasters. Health workers with high spiritual well-being have good resilience that increase their capacity to overcome stressful situations [16,17]. This also happened to health workers in Covid-19 unit at RSKI. In addition, Indonesia is a

country where majority of population is religious and devout, so this might explain the high level of spiritual well-being among subjects.

Result of MPSS measurement showed that the majority of subject had a high perceived social support (29 people) and 4 people were in medium level. These results are in accordance with previous research conducted by Kilinic and Celik in April 2020 on 340 nurses working in Turkish hospitals treating Covid-19 patients, where the average MSPSS results were high [18]. Dimension of perceived social support is further divided into family, friends and significant others, and majority of subjects have high MPSS scores in these three sub-dimensions. There was a lot of support from both the community and government for health workers who treated Covid-19 patients during pandemic. RSKI Universitas Airlangga provides a lot of social support, including providing adequate PPE for officers since the beginning of the pandemic, proportional distribution of shift work, providing free rest areas for health workers who cannot go home, routine PCR swabs after duty, providing additional multivitamins, as well as providing facilities for health workers who must undergo self-isolation. All of this action influences the perception of social support for subject. Apart from that, providing special incentives for health workers who handle Covid-19, priority in getting the Covid-19 vaccine when the vaccine was first discovered is also considered a form of social support for them. The factors above can explain the high results of perceived social support of subjects.

Majority of subjects have high psychological resilience, where the total average score for CD RISC 10 is 38.67. These results are in accordance with study conducted by Kilinic and Celik in April 2020 [18]. Several factors that are mentioned to significantly influence the psychological resilience of health workers as found in research conducted in Turkey, include age

and economic level. Age is associated with longer professional experience which increases ability to adapt to risks or work-related problems, so that health workers with older age have better crisis coping abilities [18,19]. Most of subjects in our study were aged between 22 and 37 years and had worked in Covid-19 unit for more than 6 months. This makes them be more able to adapt to pressure in the work environment and develop good psychological resilience. Apart from that, the monthly income earned by health workers is already above the minimum wage for Surabaya City, and the provision of additional incentives for health workers can be a factor which causes high psychological resilience in subjects.

Related to culture, a study by Faruq *et al.* (2022) regarding the coping strategies used by Javanese people during the pandemic, found that *Tangguh* and *Narimo Ing Pandum* were the cultural values most widely used as coping strategies during the Covid-19 pandemic. Resilience is defined as a value that includes hard work, self-confidence, determination, having the will, motivation, innovation, patience, and thoroughness, and always being grateful. Meanwhile, *Narimo Ing Pandum* is described as *Narimo* meaning to receive, and *pandum* is a gift, so it means receiving what has been given without having to ask for more than what has been received. The psychological aspect of narimo ing pandum is the attitude of accepting one's rights, patience, and acceptance, where this can mediate the formation of psychological resilience in individuals [20]. Most of subjects are Javanese (90.9%) where these cultural values influence their acceptance of the situation faced during the pandemic. This may also be one of the factors that influence the level of high psychological resilience in subjects.

There is no significant correlation between spiritual well-being and psychological resilience. These results are different from study conducted by Rogers *et*

al. (2022) on health workers working in hospitals in Great Britain during the first wave of Covid-19 [21]. Several things that might explain the lack of correlation between spiritual well-being and psychological resilience include research by Bozdag and Ergun which assesses that psychological resilience should be assessed using a systems approach and various stages of interaction between the individual and the environment. This opinion emphasizes external and environmental factors as factors that have a greater influence on an individual's psychological resilience [19]. Another explanation that might explain the difference in results is that, in research in the United Kingdom, it was conducted in the first 4 months of the Covid-19 wave, at which time social support for health workers was still lacking, so might be the internal factors, one of which was spirituality and spiritual well-being plays a more important role and is used by health workers as coping. Meanwhile, our study was conducted in January 2023 in the period after omicron variant wave, where social support for health workers was better and the disease severity was different compared to the start of pandemic. This is likely to be a factor that has a greater influence on the psychological resilience of subjects.

The results of Pearson correlation test showed that there is no significant correlation between perceived social support and psychological resilience. However, in statistical testing on the sub-dimensions, a significant correlation was found between social support from friend and psychological resilience. A possible explanation for this result is that during the pandemic, most of subjects chose to live in dormitories provided by hospitals. This was chosen because health workers were worried about the possibility of carrying and transmitting the virus to other family members (especially vulnerable groups such as the elderly and children). In this period, closeness was formed among

health workers and they provided each other with support in stressful situations in handling and caring for Covid-19 patients. This support from fellow health workers makes them believe that they are not alone in facing the Covid-19 pandemic situation.

The results of the multiple linear regression test showed that only perceived social support of friend had an influence on the psychological resilience of subjects. It can explain psychological resilience by 25.2%, while the rest is explained by other factors. Buddy system is a cooperative arrangement in which individuals are paired or work in small groups and are mutually accountable to each other. Buddy system can be applied in various fields. During the Covid-19 pandemic where the level of stress and work pressure faced by health workers is very high, buddy system is one of the recommended interventions to reduce distress, compassion fatigue and encourage the formation of resilience among health workers [22]. Subjects of this study indirectly formed a buddy system during the Covid-19 pandemic. They live in dormitories provided by hospital and support each other. Emotional closeness was formed because of the feeling of being in the same boat and together facing the work pressures experienced during the increase in Covid-19 patients.

The absence of a statistically significant correlation between spiritual well-being, perceived social support and psychological resilience of health workers of subjects could be due to the limited number of subjects in the study sample, where previous studies used larger samples. Apart from that, this study was also carried out after the pandemic had lasted for 2 years, where the new normal had begun to take hold, the severity of infection with Omicron variant was not as severe as the Alpha and Delta variants, vaccination coverage for health workers and adequate personal protective equipment for officers caused stressful situations is decreasing which indirectly affects the

psychological resilience of health workers, so that spiritual well-being and perceptions of social support are not the main factors influencing the psychological resilience of health workers working in the RSKI Covid-19 Unit.

Limitation

This study was conducted in January to February, 2023 after the wave of omicron variant, where the disease severity had decreased, so that tension and the level of stressful events had decreased further. During this period, adjustments were also made that influenced the results of the research.

The research location which was initially planned at the RSKI Covid-19 Unit which includes ER, inpatient, ICU and out-patient clinic, could only be carried out in the ER because of Covid-19 cases undergoing Hospitalizations have dropped considerably. Only ER that still treating Covid-19 patients, which causes limited health workers who can be used as research subjects.

Conclusion

There is no significant correlation between spiritual well-being, total perceived social support, and psychological resilience. Only perceived social support of friends has an effect for psychological resilience of health workers in Covid-19 units RSKI Universitas Airlangga and could explain psychological resilience by 25.2%, while the rest is explained by other factors.

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Ethical statements

This study has received Ethical Approval from the Research Ethics Committee of Airlangga University Hospital on January 9 2023 with protocol number UA-01-22148

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