### The Relationship Of Family Support With Quality Of Life COVID-19 Patient in Hospital Inpatient Room Cibubur Family Partner in 2021

Jamiatun , Thika Marliana , Fajar Susanti Sri Nur Hartaningtyas University Respati Indonesia aninghartaningtyas@gmail.com

Abstract: A good quality of life in COVID-19 patients is very necessary to ensure that patients are able to obtain the best health status and maintain optimal physical function or abilities. One way to improve the patient's quality of life is by providing good family support. This study aims to determine the relationship between family support and the quality of life of COVID-19 patients. This study used a cross-sectional design. Sampling used a total sampling technique with a sample size of 36 respondents. Data collection used a questionnaire. The data analysis used was univariate and bivariate analysis in the form of the chi-square test. Univariate analysis obtained showed that the majority of COVID-19 patients who were treated in inpatient rooms did not receive enough family support, namely 52.8% (19 respondents) and the quality of life of most COVID-19 patients was in the poor category, namely 58.3% (21 respondents). The results of bivariate analysis showed that there was a relationship between family support and the quality of life of COVID-19 patients undergoing treatment in the inpatient room at Mitra Keluarga Cibubur Hospital (p=0.021). It is hoped that families can provide support and motivation to COVID-19 patients while still complying with the health protocols implemented at the hospital

Keywords: Covid 19, Family Support, Quality of Life

### INTRODUCTION

A person can be exposed to the coronavirus if someone holds an object that has been exposed to the corona virus and then touches the area of their face (nose, mouth, eyes) without cleaning their hands first. In efforts to prevent the corona virus, it is highly recommended to always wash your hands with soap or use a hand sanitizer with 70% alcohol content and not touch the face area, especially the nose, mouth and eyes (Zhao, 2020). One form of prevention effort other than washing hands is by practicing etiquette when coughing and sneezing, namely by covering with a folded elbow, not with the palm of the hand or not covering at all. This coronavirus infects the respiratory tract, causing people infected with this virus to experience mild to moderate respiratory illness and will recover without requiring special treatment. However, older people and those with illnesses such as heart disease, chronic

respiratory diseases and cancer are more likely to develop more serious illnesses (World Health Organization, 2020). The outbreak of this disease really shook the world community, to the point that almost 200 countries in the world were infected by this virus, including Indonesia. Various efforts to prevent the spread of COVID-19 have been carried out by governments in countries around the world to break the chain of spread of COVID-19, which is known as lockdown and social distancing (Supriatna, 2020). From 31 December 2019 to 3 January 2020 this case increased rapidly, marked by the reporting of 44 cases. The spread of Covid-19 in various other countries such as Thailand, Japan and South Korea within one month. The samples studied showed a new coronavirus etiology. Initially, this disease was temporarily named as 2019 novel coronavirus (2019-nCoV), then WHO announced a new name on February 11

2020. namely Coronavirus Disease (COVID-19) which is caused by the Severe Acute Respiratory Syndrome Coronavirus virus. -2 (SARS-CoV-2). The latest case on August 13 2020, WHO announced COVIDthere were 20,162,474 19. million confirmed cases of Covid 19 and 737,417 thousand cases died where the death rate was 3.7% worldwide, while in Indonesia it was determined that 1,026,954 million cases of the specimens examined, there were 132,138 confirmed cases of COVID-19, while there were 5,968 deaths, namely 4.5% (Ministry of Health of the Republic of Indonesia, 2020). In 2021, the cumulative number of confirmed positive COVID-19 cases was 1,476,452, patients who were declared cured were 1,312,543, and patients who died were 39,983. Based on medical record data from Mitra Keluarga Cibubur Hospital in 2020, the number of COVID-19 patients who died from January to December was 72 people, while the number of patients treated from January to December was 240 people. The clinical manifestations of COVID-19 patients have a wide spectrum, ranging from no (asymptomatic), symptoms mild symptoms, pneumonia, severe pneumonia, ARDS, sepsis, to septic shock. 80% of cases were classified as mild or moderate, 13.8% experienced serious illness, and 6.1% of patients fell into critical condition. The proportion of asymptomatic infections is unknown. Viremia and high viral loads nasopharyngeal swabs from in asymptomatic patients have been reported. The symptoms experienced by COVID-19 patients can affect the quality of life of patients who are undergoing treatment in hospital (Kam KQ, 2020). The quality of life of COVID-19 patients undergoing treatment in hospitals is categorized into two, namely poor quality of life and good quality of life. Research conducted by Hana (2020) at Bekasi City Regional Hospital showed that 60% of 80 patients had poor quality of life, while 40% of patients had good quality of life. Research by Hanif (2020) at Persahabatan Hospital showed

that of 97 patients COVID-19 19, 67% of them have poor quality of life and 33% have good quality of life. Poor quality of life will cause various problems that are not good for the patient's health and life. A good quality of life in COVID-19 patients is very necessary to ensure that patients are able to obtain the best health status and maintain optimal physical function or abilities. Quality of life is an indication of the success of patient therapy or treatment, especially in COVID-19 patients being treated in hospital. Appropriate intervention is needed to improve the quality of life or increase the quality of life in COVID-19 patients, namely by providing family support (Zhang H, 2020). Family support has a very important role in the quality of life of COVID-19 patients who are undergoing treatment. Patients with heart disease who experience psychosocial problems will have a slower healing process, more severe physical symptoms and a longer healing process. One of the factors that supports a successful healing process is family involvement (Arya, 2020). Family support is a process of relationship between the family and the social environment. At all stages, family social support makes the family able to play a role in various aspects of knowledge, so that it will improve their health and adaptation in everyday life (Setiadi, 2017). In the family, you can find family members who play an important role in caring for sick family members. A caregiver or family caregiver is someone in the family who provides care for another person who is sick, usually that person is dependent on their caregiver very (Oyebode, 2015 in Niman, 2020). The presence of family is very meaningful and makes sick family members feel more comfortable (Hasymi, 2017). According to research conducted by Nurul (2020), family support is said to have a bigger role than the support of friends and existing health workers, the strength of the family will maintain the body's immunity and provide mental strength so that it can speed up the healing process for COVID-19 patients.

## Journal Of Ageing And Family (JOAF) Edition 3, No 1, April 2023

Research conducted by Rothan (2020) said that 87% of COVID-19 patients who received good family support generally underwent shorter treatment in hospital, while 13% of COVID-19 patients who received less family support generally underwent longer treatment. Based on a preliminary survey conducted at Mitra Keluarga Cibubur Hospital, it was found that the number of COVID-19 patients treated in inpatient rooms from January 2021 to March 2021 was 108 people. From the results of interviews with 5 patients who were treated, 3 patients said they did not receive enough family support and 2 patients said their families always provided support and motivation in undergoing treatment. Patients who receive good family support have a shorter length of stay than patients who do not receive family support. Based on the description above, researchers are interested in conducting research on the relationship between family support and the quality of life of COVID-19 patients in the inpatient ward at Mitra Keluarga Hospital, Cibubur.

# FORMULATION OF THE PROBLEM

WHO announced that COVID-19, there were 20,162,474 million confirmed cases of COVID-19 and 737,417 thousand deaths, where the death rate was 3.7% worldwide, while in Indonesia there were 1,026,954 million cases from the specimens examined, with confirmed cases COVID-19 was 132,138 while deaths were 5,968 cases, namely 4.5% (Ministry of Health of the Republic of Indonesia, 2020). In 2021, the cumulative number of confirmed positive COVID-19 cases was 1,476,452, patients who were declared cured were 1,312,543, and patients who died were 39.983. Based on medical record data from Mitra Keluarga Cibubur Hospital in 2020, the number of COVID-19 patients who died from January to December was 72 people, while the number of patients treated from January to December was 240 people. The increasing number of C0VID-19 patients

who are treated every month in hospitals, especially at Mitra Keluarga Cibubur Hospital, will have an impact and influence on the quality of life of patients, the phenomenon is that patients receive less support from the family while undergoing treatment, so that patients will experience a decline in quality therefore it is necessary to have family support in the form of emotional, instrumental, information and appreciation support so that it can improve the patient's quality of life, therefore the problem in this research is whether there is a relationship between family support and the quality of life of COVID-19 patients in the hospital. inpatient at Mitra Keluarga **Cibubur Hospital?** 

# **RESEARCH PURPOSES**

## GENERAL PURPOSE

To determine the relationship between family support and the quality of life of COVID-19 patients in the inpatient ward at Mitra Keluarga Cibubur Hospital

### SPECIAL PURPOSE

1. Knowing the frequency distribution of family support for COVID-19 patients treated in the inpatient ward at Mitra Keluarga Cibubur Hospital.

2. Knowing the frequency distribution of quality of life for COVID-19 patients in the inpatient ward at Mitra Keluarga Cibubur Hospital.

3. Find out the relationship between family support and the quality of life of COVID-19 patients in the inpatient room at Mitra Keluarga Cibubur Hospital.

### METHOD

1. This type of research uses a descriptive quantitative design that studies and analyzes the relationship between family support and the quality of life of

COVID-19 patients in the inpatient room at Mitra Keluarga Cibubur Hospital. The approach used is cross sectional, namely research that emphasizes measuring/observing data on independent (free) variables and dependent (dependent) variables only once at the same time. The population in this study was all patients diagnosed with COVID-19 who received treatment in the inpatient ward at Mitra Keluarga Cibubur Hospital, a total of 36 people on average each month. The samples in this study were patients diagnosed with COVID-19 who were undergoing treatment in the inpatient room at Mitra Cibubur Hospital. The sampling technique in this research used a total sampling technique. So, the total number of respondents in this study was 36 people

### RESULTS AND DISCUSSION Univariate Analysis

# Frequency Distribution of Family Support

Tabel 5.1.1 Distribusi Responden Berdasarkan Dukungan Keluarga Pada PasienCOVID-19 Di Ruang Rawat Inap Rumah Sakit Mitra Keluarga Cibubur. Tahun 2021 (n=36)

Dukungan Keluarga	Frekuensi	Persentase	
Baik	17	47,2	
Kurang baik	19	52,8	
Total	36	100	

**2.** Based on table 5.1.1 above, of the 36 COVID-19 patients who were treated in the inpatient ward of Mitra Keluarga Cibubur Hospital, the majority of COVID-19 patients received less support from their namely families. 52.8% (19)respondents), there were only 47.2 % (17 respondents) who received good family support. These results illustrate that there are still family members who do not provide enough support

for Covid-19 patients undergoing treatment at the hospital. This research is in line with research conducted by Wina (2020) regarding the description of family support and peer support for patients undergoing Covid 19 treatment at RSPI Prof. % of patients get good family support. 65% of patients received good peer support and only 35% of patients received poor peer support. The results of this research are in line with research conducted by Ria (2020) regarding the description of family support for Covid-19 patients at Hermina Jatinegara Hospital showing that 60% of families do not provide enough family support to Covid 19 patients who are being treated in hospital while 40% of patients receive good category family support. According to the theory put forward by Kuntjoro (2020).support for COVID-19 patients undergoing treatment is very necessary. However, in the lives of COVID-19 patients, it is often found that not all patients are able to understand support from other people, so that even though they have received they still support, show dissatisfaction, which is expressed by grumbling, disappointment, annoyance and so on. According to the researchers' analysis, the lack of family support for Covid-19 patients is because Covid-19 patients who are hospitalized are treated in a special room or isolation room so that the family cannot visit the patient. There is concern from the family that if they go to hospital the family will be exposed to the Covid-19 virus. Conditions like this can affect a person's ability to control their emotions. If depression problems arise in a patient, medical assistance may be needed, but what is no less important is family support which will encourage the patient to be able to control emotions and be alert to things

that might happen. Treatment for COVID-19 patients is carried out over a long period of time. This will not only change the patient's lifestyle but will also change the family's lifestyle and habits and can cause boredom and stress for families caring for COVID-19 patients. Families can take positive steps to reduce boredom and stress by taking a few moments to call COVID-19 patients who are undergoing treatment. There needs to be a role for health workers in providing education to patient families about how to provide support to COVID-19 patients so that patients continue to receive support. and support from families undergoing treatment by calling the patient, and if they want to visit the the family patient, must wear complete personal protective equipment and comply with health protocols.

3. Frequency Distribution Tabel 5.1.2 Distribusi Responden Berdasarkan Kualitas Hidup Pasien COVID-19 Di Ruang Rawat Inap Rumah Sakit Mitra Keluarga Cibubur Tahun 2021 (n=36)

Kualitas Hidup	Frekuensi	Persentase
Baik	15	41,7
Buruk	21	58,3
Total	36	100

The research results showed that the majority of the quality of life of COVID-19 patients treated in the inpatient ward at Mitra Keluarga Cibubur Hospital was in the poor category, namely 58.3% (21 respondents). These results illustrate that the quality of life of treated COVID-19 patients is dominated by patients with poor quality of life.

The results of this study are in line with research conducted by Hana (2020) at the Bekasi City Regional Hospital, showing that 60% of the 80 patients had a poor quality of life, while 40% of the patients had a good quality of life. The results of this research are in line with research conducted by Hanif (2020) at Persahabatan Hospital showing that of 97 COVID-19 patients, 67% of them had a poor quality of life and 33% had a good quality of life. According to the theory put forward by Zhang H (2020), poor quality of life will cause various problems that are not good for the patient's health and life. A good quality of life in COVID-19 patients is very necessary to ensure that patients are able to obtain the best health status and maintain optimal physical function or abilities. Therefore, quality of life is an indication of the success of patient therapy or treatment, especially in COVID-19 patients being treated in hospital. According to the researchers' analysis, the poor quality of life of COVID-19 patients being treated in hospitals is because patients diagnosed with COVID-19 have to be treated in isolation rooms where the patient's family is prohibited from visiting the hospital so it will disturb the patient's psychology, anxiety will arise so it will be easy to think negatively about the patient. I will not see my family again forever. Symptoms that appear in COVID-19 patients, such as shortness of breath, will have an impact on activities and sleep disturbances so that they will have an impact on the patient's physical health. Another factor that worsens the quality of life of COVID-19 patients is the disruption of the patient's social relationships because the patient has to undergo isolation in the hospital.

#### **Bivariate Analysis**

Tabel 5.1.3Hubungan Dukungan Keluarga Dengan Kualitas Hidup Pasien<br/>COVID-19 Yang Menjalani Perawatan Di Ruang Rawat Inap<br/>Sakit Mitra Keluarga Cibubur. Tahun 2021 (n=36)

Variabel Independen	Kualitas Hidup Pasien Covid-19 Yang Menjalani Perawatan			Total		OR (95%CI)	Value P	
	Baik		Buruk					
	n	%	n	%	n	%		
Dukungan Keluarga:								
Baik	11	64,7	6	35,3	17	100	6,875 (1,557-	0,021
Kurang Baik	4	21,1	15	78,9	19	100	30,360)	
Jumlah	15	41.7	21	58,3	36	100		

Based on the research results, it was found that the P value = 0.021 ( $\alpha < 0.05$ ), it can be concluded that there is a relationship between family support and the quality of life of COVID-19 patients undergoing treatment in the inpatient ward of Mitra Keluarga Cibubur Hospital. According to research conducted (Nurul, 2020), family support is said to have a bigger role compared to the support of friends and existing health workers, a psychologist (Chalid, 2020) said that the strength of the family will maintain the body's immunity and provide mental strength so that it can speed up the patient's healing process. COVID-19. According to the theory put forward by Arya (2020), family support plays a very important role in the quality of life of C0VID-19 patients who are undergoing treatment. Patients with heart disease who experience psychosocial problems will have a slower healing process, more severe physical symptoms and a longer healing process. One of the factors that supports a successful healing process is family involvement. The presence of family is very meaningful and makes sick family members feel more

comfortable (Hasymi, 2017). As a social creature, a person cannot be separated from his relationships with other people. The presence of other people creates positive or negative relationships. Positive if the relationship that develops is profitable and tends to provide support such as affection, security, happiness. Negative ones are relationships rise that give to uncomfortable, threatening feelings and can even cause stress. This dimension is important for individuals who provide family support because it involves perceptions about the existence and appropriateness of family support for someone. Family support is not just providing assistance, but what is important is how the recipient perceives the meaning of the assistance. This perception is closely related to the accuracy of the support provided. This means that someone who receives support feels the benefits of the help for themselves, because it is something actual and gives satisfaction (Koentjoro 2014). According to researchers' analysis, family support is included in supporting factors that can influence a person's behavior and lifestyle so that it has an impact on health status and quality of life. Family support for COVID-19 patients who are undergoing treatment in hospital is very necessary to survive. undergoing treatment for COVID-19 patients, because the family is the person closest to the patient. Family support will make patients feel appreciated and accepted, so that it can increase their enthusiasm and motivation to undergo treatment for COVID-19 patients. Low family support can make patients withdraw, worry and feel more sensitive, so that patients feel irritable, which will reduce the patient's quality of life. One of the factors causing the poor quality of life of COVID-19 patients is low support from the family. The low level of family support is because the families of COVID-19 patients also have to undergo independent isolation at home, so families have to focus on improving the immune system. Special care for COVID-19 patients so that families

cannot visit and motivate patients who are undergoing treatment so that patients receive less support which will have an impact on the patient's psychological disorders caused by separation from the family. The large number of cases of COVID-19 patients who died while undergoing treatment in hospital will cause concern and anxiety for patients diagnosed with COVID-19 who have to undergo treatment in hospital which will have an impact on reducing the patient's quality of life.

### CONCLUSION

a. From the results of the assessment of family support for COVID-19 patients undergoing treatment in the inpatient ward at Mitra Keluarga Cibubur Hospital, it was concluded that the majority of COVID-19 patients did not receive family support well, namely 19 people (52.8%) in providing support to their families. who are undergoing treatment.

b. From the results of measuring the quality of life of COVID-19 patients undergoing treatment in the inpatient ward at Mitra Keluarga Cibubur Hospital, it was found that there were more patients with poor quality of life, namely 21 patients (58.3%). c. From the statistical test results, it was found that P value = 0.021, meaning that there is a relationship between family support and the quality of life of COVID-19 patients undergoing treatment in the inpatient ward of Mitra Keluarga Cibubur Hospital.

### SUGGESTION

### a. For the Nursing Profession

It is hoped that nurses working in the COVID-19 room can provide motivation and support to patients by asking the patient's family to call and continuously monitor the patient's progress while undergoing treatment at the hospital so that the patient can help improve the patient's quality of life and improve the patient's immune system.

### b. For Hospitals

It is hoped that hospitals can provide special visiting places and times for COVID-19 patients who can carry out independent activities, for example through glassed rooms, and create service operational standards regarding permission to visit and accompany patients who experience a decline in their health status and quality of life. The immediate family can accompany them. patient in the treatment room with the rules and (informed consent) enforced at the hospital. Cibubur Family Partners.

# c. For scientific development

It is hoped that future research can carry out further research on family support for COVID-19 patients using qualitative research methods so that they can dig deeper into the reasons why families do not provide family support for COVID-19 patients or with other variables such as length of time in patient care, use of therapy. prone sleeping in COVID-19 patients.

# Bibliography

- 1. Arya.(2020). Coronavirus: a review of COVID-19. EJMO. Vol. 4. No. 1. 10.
- 2. Chalid.(2020). Psikologi Kesehatan. Jakarta: Penerbit Buku Kesehatan EGC
- 3. Hana. (2020). Gambaran Kualitas Hidup Pasien Coronavirus Disease (COVID-19) Di RSUD Kota Bekasi.(Online).www.stikesbanisal eh.ac.id
- 4. Hanif.(2020). Gambaran Kualitas Hidup Pasien Coronavirus Disease (COVID-19) di RSUP Persahabatan.(Online).www.lib.ui.a c.id
- 4. Hasymi.(2017). Buku Ajar Keperawatan Keluarga. Yogyakarta: Nuha Medika

Journal Of Ageing And Family (JOAF) Edition 3, No 1, April 2023

- Kam KQ. (2020). Gender, Age and Comorbidities as the Main Prognostic Factors in Patients with COVID-19 Pneumonia." American Journal of Translational Research 12(10):6537– 48.
- Kementerian Kesehatan RI.(2020).
  Pedoman Pencegahan dan Pengendalian Coronavirus Disease (COVID-19). Kementerian Kesehatan RI; p. 18
- 7. Kuntjoro, W. (2020). *Keperawatan keluarga*. Jakarta: EGC.
- 8. Niman.(2020). Asuhan Keperawatan Keluarga, Aplikasi dan Praktek, EGC, Jakarta 1-35
- 9. Nurul.(2020). Keperawatan Keluarga Plus Contoh Askep Keluarga. Yogyakarta : Nuha Medika
- 10. Rothan.(2020). Angiotensin-converting enzyme 2 (ACE2) as a SARS-CoV-2 receptor:molecular mechanisms and potential therapeutic target. Intensive Care Med. 2020; published online March 3. DOI: 10.1007/s00134-020

- 11. Setiadi.(2017). Konsep dan Proses Keperawatan Keluarga, Graha Ilmu, Yogyakarta : 1 – 21
- Supriatna. (2020).Wabah Coronavirus Disease (Covid 19) Dalam Pandangan Islam. SALAM: Jurnal Sosial Dan Budaya Syar-I, 7(6), 555. https://doi.org/ 10.15408/sjsbs.v7i6.15247
- World Health Organization. (2020). Coronavirus Disease 2019 (COVID-19) Situation Report-1. [online] Indonesia: World Health Organization, p.8.
- 14. Zhang H.(2020). More Than Smell COVID-19 Is Associated With Severe Impairment of Smell, Taste, and Chemesthesis." Chemical Senses 45(7):609–22. doi: 10.1093/chemse/bjaa041.
- 15. Zhou P.(2020). Characteristics of and Important Lessons From the Coronavirus Disease 2019 (COVID-19) Outbreak in China: Summary of a Report of 72314 Cases From the Chinese Center for Disease Control and Prevention. JAMA. 2020; published online February 24. DOI: 10.1001/jama.2020.2648