



## FAMILY SUPPORT TO CLIENTS OF COVID-19 SURVIVORS SANTA ELISABETH HOSPITAL MEDAN

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### ABSTRACT

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Family support is the attitude, action, and acceptance of the family towards COVID-19 Survivor Clients, so it is an important factor in adherence to treatment for the disease they are experiencing. The client's healing or willingness to go through the healing phase at home can be helped by the support of their family. The purpose of this study was to determine the description of family support for clients who survived COVID-19 at Santa Elisabeth Hospital Medan in 2021. This research was quantitative descriptive. The subjects in this study were 30 people who were obtained through purposive sampling technique using the Vincent formula. The data collection technique is a questionnaire via google form. The questionnaire contains questions about the description of family support on indicators emotional/hope support, instrumental/real support, and information/knowledge support. The results of the study found that: a) descriptions of emotional/hope support in sufficient category 21 people (70%), instrumental/real support in good category 28 people (93%), information/knowledge support with good category 20 people (66%). So that in general the description of family support for clients who have survived COVID-19 at the hospital. St Elisabeth Medan 2021 is a good category of 62%.

### INTRODUCTION

Novel Corona Virus Disease (COVID-19) was first reported in the city of Wuhan, Hubei Province, At the end of December 2019, the novel coronavirus disease (COVID-19) was first reported in Wuhan, Hubei Province, China. This disease, caused by the Severe Acute Respiratory

Syndrome Coronavirus-2 (SARS-CoV-2), interferes with lung inflammation and has spread rapidly around the world, prompting the World Health Organization to declare the world a health emergency on January 30, 2020 (WHO, 2020).

The main source of transmission for COVID-19 is from human to human, so the spread

becomes more aggressive. COVID-19 is spread from symptomatic patients via droplets released when coughing or sneezing. Furthermore, COVID-19 has been found to be viable in aerosols (created with a nebulizer) for about three hours. COVID-19 has a reproductive number ( $R_0$ ) of 1.4 to 2.5, according to WHO (WHO, 2020). Other studies, on the other hand, have calculated a  $R_0$  of 3.28 (Susilo et al. 2020).

COVID-19 has a wide range of clinical manifestations, ranging from asymptomatic people to those who have respiratory distress that necessitates mechanical ventilation, ICU assistance, and can lead to multi-organ failure. Pneumonia is the most serious and common manifestation of COVID-19, with symptoms such as fever, dry cough, and dyspnea. Headaches, sore throats, and rhinorrhea are also common symptoms. COVID-19 can cause gastrointestinal symptoms, myalgia, skin rashes, and neurological disturbances, in addition to respiratory symptoms (Edlow et al. 2020). Most people with COVID-19 (> 80%) have relatively mild disease and can be managed independently outside the hospital. However, for about 20% of people exposed to COVID-19 it can cause respiratory problems severe enough to require hospitalization. At the time this study was conducted, no antiviral agents had been shown to be effective in treating this disease (Bajwah et al. 2020).

Most people with COVID-19 (> 80%) have relatively mild disease and can be managed independently outside the hospital. However, for about 20% of people exposed to COVID-19 it can cause respiratory problems severe enough to require hospitalization. At the time this study was conducted, no antiviral agents had been shown to be effective in treating this disease (Bajwah et al. 2020).

Data dated February 21, 2021, COVID-19 cases from around the world reached 110,749,023. From this figure, the number of deaths that occurred was 2,455,131 people and 63 million were reported

to have recovered. The countries in the highest order of distribution are in the United States with 24.3 million cases, Italy with 2.52 million positive cases, Brazil with a total of 9.06 million cases (OMS, 2020).

Data on COVID-19 in Indonesia was first reported on March 2, 2020, totaling 2 cases. Data on COVID-19 cases is increasing and spreading rapidly throughout Indonesia as of February 21, 2021, totaling 1,278,653 people with a death rate of 34,489 followed by a recovery rate of up to 1,087,076 people. (South et al., nd). The data includes data from: 1) North Sumatra Province is 23,658 people, with a death rate of 808 people and a recovery rate of 20,455 people (South et al., nd). 2) Medan City as the capital city of North Sumatra Province totaled 10,097 people with 8,172 recovered patients and 355 deaths. 3) Santa Elisabeth Hospital Medan as many as 374 people with 41 deaths, and 331 healing rates (Medical Records of St. Elisabeth Hospital Medan).

The criteria for a positive COVID-19 patient to be declared cured is when he no longer has symptoms of COVID-19 and without requiring confirmation of the PCR polymerase chain reaction test (WHO, 2020), but to further ensure safety, in Indonesia based on the Decree of the Minister of Health (KMK) No. HK.01.07/Menkes/413/2020 concerning Guidelines for Prevention and Control of Coronavirus Disease 2019, in Chapter III there are three recovery criteria for positive COVID-19 patients (survivors) that apply in Indonesia, namely: a) asymptomatic patients have passed the isolation period for 10 days, b) patients with mild to moderate symptoms have gone through a period of isolation for at least 10 days, plus 3 days without symptoms, and c) patients with severe symptoms, have passed a period of isolation for at least 10 days, plus 3 days without symptoms and 1 time negative result on PCR test.

WHO confirms that many recovered patients (COVID-19 survivors) experience physical and psychological problems after prolonged periods of ventilation, even after returning to their home environment. The problems that then arise for patients who are in the process of recovering in the home environment are how adequate the facilities at home are, the availability of people who care for adults and know how to communicate with the hospital, how to give the right medicine, and others (WHO, 2020).

Family support is an important factor in disease treatment adherence. The form of family support in this case is to encourage sufferers to comply with taking their medications, to show sympathy and concern, and not to avoid sufferers from their illness. In providing support for a member who is suffering, the support of all family members is very important for the healing process and recovery of the sufferer (Irnawati, et al. 2016). The family is the smallest social unit that is an important element in a person's socially important life. Families consisting of family members who are interconnected and interdependent in providing support, affection and harmonious attention carry out their respective roles for a common goal (Okwari, Etc. 2017). Forms of family support that can be used in helping COVID-19 survivors speed up recovery are ensuring patients can be adequately monitored at home to ensure that patients do not lack needs, maintaining communication with the hospital medical team or trained health workers or local community health until the patient is fully healthy, monitor patients at home via telephone, monitor and the like (WHO, 2020).

From the problems above, it is necessary to conduct research to find out how the description of family support for clients who have survived COVID-19 in hospitals. St Elisabeth Medan in 2021.

## **METHOD**

This type of research is called descriptive quantitative. Data was collected through a questionnaire to determine the extent of the picture of family support for clients who have survived COVID-19. The population of this study amounted to 331 patients who survived COVID-19 from the hospital. St. Elizabeth's data as of February 21, 2021 Through a purposive sampling technique, the sample used in this study consisted of 74 people using the Vincent formula. After getting permission from the hospital, the researcher contacted the patient via cell phone. Of the 74 people, only 30 collected questionnaires, meaning that the data processed in this study was only 30. Data collection in this study was done by distributing questionnaires to research subjects via Google Form. The questionnaire contains questions about the definition of family support on the following indicators: a) instrumental support, b) emotional support, and 3) informational support.

Analyzing data was done through the steps: editing, coding, scoring, and tabulating. The data analysis in this study is univariate analysis, which means summarising the data set into a middle measure and a measure of variation. Next, compare the images between the subject group and other subject groups according to the objectives to be achieved in the analysis (Grove, 2014), which ends with the stage of drawing conclusions.

## **RESULTS**

The following are the findings of research on COVID-19 survivor clients at Elisabeth Hospital Medan in 2021, based on demographics and indicators of family support.

**Table 1.** Frequency Distribution of Respondents' Demographic Characteristics

No	Characteristics	Frequency (f)	Percentage (%)
<b>Age</b>			
1.	17-25	1	3.3
2.	25-35	15	50.0
3.	36-45	10	33.3
4.	46-55	4	13.3
Total		30	100
<b>Gender</b>			
1.	Man	2	6.7
2.	Woman	28	93.3
Total		30	100
<b>Education</b>			
1.	Illiterate	0	0
2.	Primary School	0	0
3.	Junior High School	0	0
4.	Senior High School	7	23.3
5.	College	23	76.7
Total		30	100
<b>Occupation</b>			
1.	Private Employees	30	100
2.	Civil Servant	0	0
3.	Jobless	0	0
Total		30	100
<b>Marital Status</b>			
1.	Single	12	40
2.	Marry	17	56.7
3.	Widower	0	0
4.	Widow	1	3.3
Total		30	100

Source: Primary data for 2021

Based on Table 1, of the 30 clients COVID-19 survivors at Santa Elisabeth Hospital Medan in 2021, the majority were aged between 25 and 35, namely 15 people (50.0%), and a minority aged between 17 and 25, which was 1 person (3.3%). Based on gender the majority were women, namely 28 people (93.3%), and the minority were

men, namely 2 people (6.7%). Based education background the majority was college namely 23 people (76.7%), and a minority was senior high school as many as 7 people (23.3%).

Table 1 shows that data from 30 respondents of COVID-19 survivors at Santa Elisabeth Hospital Medan in 2021 based on occupation, 30 people (100%) were private employees. And based on marital status has the majority were married as many as 17 people (56.7%) and the minority with widowed marital status, namely a person (3.3%).

**Table 2.** Distribution Of Frequency and Percentage of Family Support Based on Emotional/ Hope Indicator

No	Emotional/ Hope Indicator	Frequency (f)	Percentage (%)
1.	Good	8	26.67
2.	Enough	21	70.00
3.	Less	1	3.33
Total		30	100

Source: Primary data for 2021

Based on Table 2, data is obtained that from 30 respondents who have family support with indicators of emotional support/hope were in good categories as many as 8 people (26.67%), 21 people were in enough category (70%) and less category is a person (3.33%).

**Table 3.** Distribution of Frequency and Percentage of Family Support Based on Instrumental/Real Indicator

No	Instrumental/ Real Indicator	Frequency (f)	Percentage (%)
1.	Good	8	26.67
2.	Enough	21	70.00
3.	Less	1	3.33
Total		30	100

Source: Primary data for 2021

Based on Table 3, data shows that from 30 respondents who had family support with instrumental/real indicator were in good category as many as 28 people (93.33%), and 2 people were in enough category (6.67%).

**Table 4.** Distribution of Frequency and Percentage of Family Support Based on Information/Knowledge Indicator

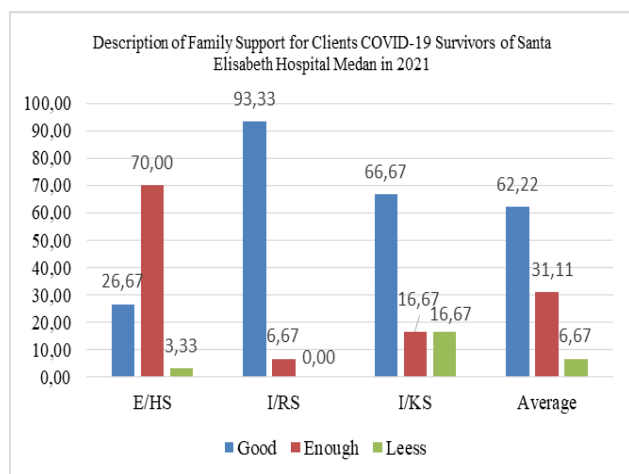
No	Information/ Knowledge Indicator	Frequency (f)	Percentage (%)
1.	Good	20	66.67
2.	Enough	5	16.67
3.	Less	5	16.67
Total		30	100

Source: Primary data for 2021

Based on Table 4, data is obtained that from 30 respondents who have family support with indicators of information/knowledge, 20 people (66.67%) were good category, 5 people (16.67%) enough category and 5 people less category (16.67%).

Of the three indicators of family support for clients COVID-19 survivors at the hospital. St. Elisabeth Medan in 2021 it can be concluded that in general the description of family support can be seen in the following graph at Figure 1.

**Figure 1.** Description of Family Support for Clients COVID-19 Survivors at Santa Elisabeth Hospital Medan in 2021



Explanation:

E/HS = Emotional/ Hope Support

I/RS = Instrumental/Real Support

I/KS = Information/Knowledge Support

Figure 1 shows an description of the family support of clients who have survived COVID-19 St. Hospital. Elisabeth Medan in 2021. Based on the three indicators of family support, the average score for good category is 19 people (62.22%), enough category is 9 people (31.11%), and the less category is 2 (6.67%) . Thus, in general, the description of family support for clients who have survived COVID-19 Hospital St. Elisabet Medan in 2021 is 62.22% in the sufficient category.

## DISCUSSION

### Respondent's Condition

Based on Table 1 above, it can be seen that of the 30 respondents, 29 people (97%). For the last education criteria, there were 23 people (77%). All of them are working, and 18 of them (60%) are married or have never been married.

Many factors affect the client's knowledge of COVID-19 healing. According to Notoatmodjo (2012), Mujiburrahman et al (2020), the factors that influence knowledge are education, age, occupation, and other external factors. Age greatly affects knowledge. This is confirmed by Budiman (2013) who states that age affects a person's perception and mindset. With increasing age, a person's ability to capture and think patterns develops, so that the knowledge gained increases as well.

The results of this study indicate that most of the respondents are at their productive age (25-45 years), namely 25 people (83.3%), and the smallest is in their late teens (17-25 years old), as much as 1 (3.3%). Four respondents (13.3%) were between the ages of 46 and 55 in this study. Mujiburrahman et al (2020), revealed that knowledge is getting better because of the perception and mindset that is growing with the increasing age of a

person. During a productive age, they have good knowledge because they can get information from health workers and their families, or they can get information from their own experiences or from other people.

Based on the results of this study, the respondents with the highest educational attainment were mostly undergraduate graduates, namely 23 (76.7%), and the smallest was at the high school level, as many as 7 (23.3%). Apart from formal education, it can be obtained through other people and mass media, including magazines, television, newspapers, and radio. And someone with a low education does not mean they have absolutely no knowledge. However, another opinion says that with higher education, it will be easier for someone to receive information so that the knowledge they have will increase (Suwaryo & Yuwono, 2017). In the opinion of the researcher, the results of this study are in accordance with the opinions of Dharmawati & Wirata (2016) and Yeni (2015), where knowledge can be obtained apart from formal education in schools but can also be obtained from non-formal education outside school and through experience. Even though the majority of respondents are highly educated, it does not mean that they are absolutely well-informed. Education does not affect their knowledge because respondents with good knowledge can obtain information from experience, or other people, as well as the mass media (Sumartini, 2020). However, according to Notoatmodjo (2012), a person's education about health will affect health behavior. This is because the education obtained will increase knowledge and will create disease prevention efforts. The higher a person's level of education, the easier it will be for him to absorb knowledge, and thus his insight will be broader.

Therefore, the knowledge of the community and those who have become COVID-19 survivors

about COVID-19 is a very important aspect of the healing period. The public needs to know the cause of COVID-19, the characteristics of the virus, signs and symptoms, terms related to COVID-19, the necessary examinations and the transmission process and efforts to prevent the disease. The post-recovery process is declared negative after going through a period of isolation (Purnamasari, 2020). Someone who has good knowledge regarding healthy behaviour has a tendency to behave well (Glady, 2016). This means that to improve healthy and safe behavior, it is also necessary to increase knowledge about health.

#### **Family Support Based on Emotional/ Hope Indicator on COVID-19 Survivor Clients Santa Elisabeth Hospital Medan in 2021**

Based on emotional indicators and client expectations of COVID-19 survivors, Santa Elisabeth Hospital, Medan in 2021, there were 1 person (3%), in the poor category, 21 people (70%), and the good category with 8 people (27%). Thus, family support for COVID-19 survivors at Santa Elisabeth Hospital Medan in 2021 based on emotional indicators and expectations is in the sufficient category (70%).

The results of this study are in line with the opinion of Friedman (2010) which states that emotional support and expectations from the family serve as a port of rest and recovery from illness and help emotional mastery through increasing family morale. Abudi, Mokodompis, and Magulili (2020) also assert that emotional support and hope involve expressions of empathy, concern, encouragement, personal warmth, love, or emotional assistance, giving praise and providing support for the belief that pain is one of the natural things in everyone's life. With all the behavior that encourages feelings of comfort and leads the individual to believe that through the spirit of the self, and

through a happy heart is the panacea for every disease.

Emotional support factors also affect the belief in the hope for a full recovery. Sari Puspita and Azis said that a person who experiences a stress response in every change in his life tends to respond to various signs of illness, perhaps by worrying that the disease can threaten his life. A person who is generally seen to be very calm may have little emotional response during an illness. An individual who is unable to cope emotionally with the threat of illness may have a tendency to get sick again. Because if someone who is sick gets good emotional support from family members, the patient's recovery rate will be higher (Sari Puspita and Azis, 2018).

#### **Family Support Based on Instrumental/Real Indicator on COVID-19 Survivor Clients Santa Elisabeth Hospital Medan in 2021**

Based on the instrumental/real support of clients who survived COVID-19 Santa Elisabeth Hospital, Medan in 2021, there were 2 people (7%), good category and 28 people (93%). Thus, family support for COVID-19 survivor clients at Santa Elisabeth Hospital Medan in 2021 based on instrumental/real support is in the good category of 28 people (93%).

The results of this study reinforce Friedman's (2010) theory that the form of instrumental/real support by the family by paying attention whose form can be seen and felt directly on sick family members in the form of meeting the basic needs needed by the client and is willing to pay for treatment from the client, so that increase the desire to heal from the client is higher and thus can speed up the recovery of the client. The real and instrumental support provided by this family is felt directly by the client so that it gets good results.

The findings of this study are also in line with the opinion (Quardona and Agustina, 2018),

that family instrumental support is a source of practical and concrete help including material assistance such as providing housing, lending or giving money and assistance in doing daily household tasks. In general, the form of instrumental support felt by the client in this study was providing energy assistance, funds such as being willing to pay for the costs of care and treatment, providing food, fruits, vegetables, drinks and matters relating to the client's nutritional intake, providing a place and facilities for the client. to bask in the sun every morning ( $\pm 15-30$  minutes), take the time to help serve and listen to client complaints in conveying their message.

The findings of this study are in line with the findings of Hart et al. that the real form of family support for patients to accelerate the healing process is to provide time and facilities, clothing, food. Families play an active role in each client's treatment and care and try to find the lack of necessary treatment facilities and equipment (Hart et al. 2020).

#### **Family Support Based on Information/Knowledge Indicator on COVID-19 Survivor Clients Santa Elisabeth Hospital Medan in 2021**

Based on information support/knowledge of clients who survived COVID-19 Santa Elisabeth Hospital, Medan in 2021, the category of less was 5 people (17%), enough category was 5 people (17%), and good category was 20 people (66%). Thus, family support for COVID-19 survivor clients at Santa Elisabeth Hospital Medan in 2021 based on information/knowledge support is in the good category of 20 people (66%).

The findings of this study confirm the opinion of Friedman (2010) that the information and knowledge support provided by the family is felt directly by the client so that they get good results. Information/knowledge support from the

family functions as a collector and disseminator of information about the world. This finding is also confirmed by (Abudi, Mokodompis, and Magulili 2020), that family support is one of the causes of patient recovery by always providing information and good news, increasing affection and mutual love.

Information support occurs and is given by the family in the form of advice, suggestions and discussions on how to overcome or solve existing problems, informing the doctor about the results of examinations and treatment clearly and appropriately, reminding clients about behaviors that can worsen the disease if they violate the rules. the healing process is likely to be bad if the schedule for taking medication is not done on time and in the right dose, and explaining to the client if there are things that the client does not understand about his illness (Hart et al. 2020). Provide good information about the benefits of carrying out health protocols and the benefits of following the government's recommendation to implement: wearing a mask, washing hands with soap and running water, keeping a distance, staying away from crowds, restricting mobility (Ministry of Health RI, 2020).

The results of this study are in line with the results of research by Abudi et al who found that family support is one of the causes of patient recovery in TB patients, by always providing information and good news, increasing affection and mutual love.(Abudi, Mokodompis, and Magulili 2020). A person's belief in the existence of external support is formed by intellectual variables consisting of knowledge, educational background and past experience. Cognitive abilities will shape a person's way of thinking, including the ability to understand factors related to disease and use knowledge about health to maintain his health (Saputri and Sujarwo, 2017).

Researchers assume that knowledge determines each individual so that it will affect behaviour in everyday life. Because the higher the

level of knowledge of a person, the easier it is to determine what he should choose and what he should do in his life. In line with what Prihantana (2016) and Mujiburrahman et al. (2020) said, that knowledge has a close relationship with the decisions to be taken, because with knowledge a person has a basis for making choices. In addition, this high level of knowledge is also supported by a person's education level. A person's high level of education will make it easier to get access to information about a problem (Yanti B et al, 2020). Other research that is in line with the results of this study is the research findings of Clements JM (2020), which shows that the people of the United States have good knowledge of and behaviour in matters for themselves and provide knowledge to people in their surrounding environment. And Zhong BL (2020), who examines behaviour of the Chinese community as the initial place where the Corona Virus was discovered, also has good and positive knowledge and behavior, and supports each other to accelerate the healing of clients from the trauma of the frightening COVID-19 virus outbreak.

#### **Description of Family Support for Clients Surviving COVID-19 Santa Elisabeth Hospital Medan in 2021**

The description of family support for clients who have survived COVID-19 Santa Elisabeth Hospital Medan in 2021, in the sufficient category as many as 3 people (10%), and the good category as many as 27 people (90%). Thus, family support for COVID-19 survivor clients at Santa Elisabeth Hospital Medan in 2021 is in the good category of 27 people (90%).

According to the researcher, the achievement of a good category of family support for clients who survived COVID-19 Santa Elisabeth Hospital Medan in 2021 was caused by the following: in general, there was a good communication relationship between the family



and the client; the high level of family support was shown through: emotional support and hope; instrumental/real support; and information/knowledge support.

The form of emotional support and hope shown by the family to the client is in the form of assistance during the treatment process, always giving praise and attention to the client, empathy from the family, and understanding that the COVID-19 outbreak is a natural disaster and can be overcome through providing support for health. The form of instrumental or real support from the family is shown through providing free time to pay attention to the client, providing facilities if the client needs them, providing medicines, vitamins, drinks, and food that the client needs, and ensuring all the facilities needed by the client can be met for the client's speedy recovery. The form of information/knowledge support from the family is shown through the ability of family members to transfer information about the results of the doctor's examination appropriately to the client, always reminding the client about behaviours that can improve or worsen the client's health condition if the doctor's rules are implemented or ignored.

Family support is an important factor in disease treatment adherence. One of the important efforts in healing and preventing recurrence is the existence of good family support (Rahmayani and Hanum, 2018; Nur Fadhilah et al, 2022). The form of family support in this case is to encourage sufferers to comply with taking their medications, to show sympathy and concern, and not to avoid sufferers from their illness. In providing support for a member who is suffering, the support of all family members is very important for the healing process and recovery of the sufferer (Irnawati, Siagian, and Ottay 2016).

The results of this study confirm the theory that through family support, the goals of family support for COVID-19 survivors were well achieved, namely, reducing anxiety, depression,

and post-hospital trauma, reducing fatigue and moral pressure for patients, creating a sense of security, calm, passionate, and full of hope to recover (Hart et al. 2020). This is in line with research by Rahmayani and Hanum (2018) that shows the better family support you have, the more helpful clients will be in controlling their recovery.

This is in line with Friedman's (2010) that the main role of the family towards the client is to change the client's behaviour patterns in terms of controlling their emotions and helping accelerate healing or health promotion and client socialization. As part of their duty to maintain the health of their members, families need to organise and carry out health maintenance activities based on what is needed by the family.

Through family support, COVID-19 survivor clients are able to reduce anxiety, depression, and post-hospital trauma, reduce fatigue and moral pressure for patients, and create a sense of security, calm, enthusiasm, and full of hope to recover well, namely (Hart et al. 2020). Family support can improve the body's immune system in COVID-19 survivors. In addition, forms of family support that can be used to help COVID-19 survivors speed recovery include ensuring patients can be adequately monitored at home to ensure that patients do not lack basic needs, maintaining communication with the hospital medical team or trained health workers or local community health until totally healthy patients are monitored at home via telephone, monitors, and the like (WHO, 2020).

The findings of this study fully support the results of previous studies (Hart et al. 2020; WHO, 2020). Based on information from the family of a client who has survived COVID-19 at St. Elisabeth Hospital, through the support provided by the family, clients experience faster healing because they have the confidence to recover because they have knowledge from their families that COVID-19 can be cured with a healthy lifestyle and increased

immunity. They always think positively, so that they lose their sense of depression and increase their motivation to recover.

### CONCLUSIONS AND RECOMMENDATION

From the results of the research and discussion, it was concluded that, in general, the description of family support for clients who survived the COVID-19 form Hospital St. Elisabeth Medan 2021 was in the good category. The description consists of of emotional support and expectations with a sufficient category, instrumental/real support with a good category, and information/knowledge support with a good category.

Based on the findings of this study, it is recommended that families always provide support to clients in a balanced way between emotional, instrumental, and knowledge-based support, to speed up recovery after recovering from COVID-19.

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