

Perception of Social Stigma and Subjective Well Being of Nurses On The Covid-19 Pandemic Situation

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ABSTRACT

Subjective well being of nurses affects all aspects of the life. Today, many nurses feel anxiety, fear, and dissatisfied in the life. Many factors causes this condition on the Covid-19 pandemic situation, including perception of social stigma. This study aims to identify the relationship between perceptions of social stigma and subjective well-being of nurses on the Covid-19 pandemic situation. This study can be a reference for nurses to increasing subjective well being. The subject is 50 nurse who helping Covid-19 patients at a referral covid-19 hospital in Surabaya. This study used quantitative research method with quota random sampling. The instruments of data collection were the Subjective Well Being Scale and the Social Stigma Perception Scale. The data analysis used was the Spearman Brown correlation test. The result of the data test is that the social stigma perception variable does not have a correlation with the subjective well being variable, with a significance value of 0.133. This means that social stigma perceptions cannot predict the subjective well being felt by nurses during the Covid-19 pandemic.

Keywords: subjective well being; perception of social stigma.

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INTRODUCTION

As the spearhead of patient safety, nurses are required to have skills and responsibilities as professionals. Good physical and mental condition is also a requirement for a professional nurse. The complexity of a nurse's job affects the happiness and life satisfaction felt by the nurse. The quality of life of an individual is also known as subjective well being, which is a construct that evaluates happiness, pleasant or unpleasant experiences, as well as good and bad evaluations of life's elements subjectively (Ryan & Deci, on Giyati & Wardani, 2016).

According to Diener (on Giyati & Wardani, 2016), *subjective well being* is the optimal psychological condition of an individual which contains several dimensions, namely the dimensions of life satisfaction, satisfaction with an important part of life, high positive affect, and low negative affect. Further elaborated by Diener (on Giyati & Wardani, 2016), positive affect is described by feelings of pleasure, love, affection, and pride. Meanwhile, negative affects are described as fear, anxiety, sadness, anger, hatred, shame, disgust, and guilt.

According to the results of research conducted by Ratanasiripong & Wang (on Dirk, Holtzhausen, Coetzee, & Ellis, 2020), *subjective well being* can reduce the level of depression felt by nurses. Other than that, *subjective well being* the nurses also correlated with a decrease in anxiety (Zhang, Zhao, Mao, Li, & Yuan on Dirk et al., 2020). *Subjective well being* good care also affects the performance of the nurses, such as decreased burnout (Lee on Dirk et al., 2020), and increase the level of satisfaction at work (Gurkova, Cap, Ziakova, & Duriskova on Dirk et al., 2020).

Another research conducted by Desi, Tanti, & Ranimpi (2019) on nurses at Prof. Dr. Soerojo Mental Hospital Magelang, it is known the results of *Scale of Positif and Negative Experience (SPANE)* is 54% of respondents experience positive feelings as a feature of the optimal *subjective well being*

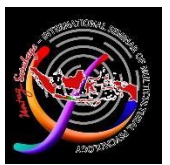
perceived. Results of *Scale of Positif and Negative Experience* (SPANES) is 74.1% of respondents were satisfied with their lives and 25.9% were dissatisfied because they had a salary below Rp. 2,500,000. The results of other studies conducted by Yulianti (2006) on the nurse at RSUD Blambangan Banyuwangi, show that *subjective well being* owned by these nurses is quite good. This shows that nurses can feel satisfaction and happiness in life in the midst of the demands and complexity of their daily work.

An interesting phenomenon that occurs today is the number of nurses who complain about feelings of anxiety, fear, and dissatisfaction with the life they are living. The nurses' dissatisfaction and unhappiness is a reflection of the current low level of *subjective well being* by nurses. Individuals with *subjective well being* the lowly will perceive life events as unpleasant and generate negative emotions, such as anxiety, anger, and depression (Myers & Diener, dalam Giyati & Wardani, 2016). Decrease of *subjective well being* the nurses allegedly appeared since the determination of the case of the corona virus infection to be the Covid-19 pandemic.

A new study of 1257 health care workers including nurses in 34 hospitals and clinics in China, 44% of whom showed symptoms of anxiety and 34% of participants showed symptoms of insomnia (<https://kabar24.bisnis.com/read/20200324/19/1217311/studi-petugas-kesehatan-virus-corona-alami-tekanan-psikologis>, accessed September 10, 2020). This shows that the psychological well-being of the nurses is less than optimal.

The high number of covid-19 cases in Indonesia has made the government take steps to overcome the increasing number of victims, both positive and dead. Health protocols and the implementation of social distancing have also begun to be applied in almost all regions in Indonesia. In addition, additional Covid-19 referral hospitals have also begun to be made. Health workers devote their energy and time to helping victims of Covid-19. Fatigue often affects health workers, especially nurses who are the first point of contact when a patient infected with Covid-19 comes to the hospital. Concerns and fears in carrying out their duties also often arise, given the large number of nurses who have been infected to have died due to contracting the Covid-19 virus. The number of nurses infected with this virus until July 12, 2020, amounted to approximately 277 people. This report only comes from the number of nurses infected with the Covid-19 virus in East Java (<https://nationalgeographic.grid.id/read/132255604/dampak-pandemi-covid-19-hantam-sistem-layanan-kesehatan-dalam-4-gelombang?page=all>, accessed 26 August 2020). This means that, the number of infected nurses across Indonesia exceeds this figure. The number of infected nurses and even died due to being infected with the covid-19 virus is also a scourge for the nurses. Harif Fadhilah, Chairperson of the Indonesian National Nurses Association (PPNI) said that the number of nurses who died as a result of being infected with this virus reached 77 people. (<https://prfmnews.pikiran-rakyat.com/nasional/pr-13718125/banyak-dokter-dan-perawat-meninggal-akibat-covid-19-ppni-kami-prihatin-dan-khawatir>, accessed September 4, 2020).

Leaving the family at home feeling worried seems to be a new ritual for medical personnel, especially for nurses who are in direct contact with patients for almost 24 hours. The increase in the number of nurses who were infected or died due to Covid-19 is a particular concern for nurses as the frontline in handling Covid-19 victims. In addition, the behavior of some people in Indonesia that ignores the implementation of health protocols causes the sacrifices of these nurses to seem useless (<https://kependudukan.lipi.go.id/id/berita/53-mencatatcovid19/902-perawat-indonesia-di-tengah-pandemi-covid-19>, accessed August 28, 2020). This also has an impact on the emergence of feelings of unhappiness and dissatisfaction with the situations experienced by the nurses in carrying out their duties in the hospital, doing activities at home with their families and doing activities in the social environment. Expressed by Hamdi (on <https://www.liputan6.com/news/read/4250187/ahli-ingatkan-pentingnya-kesejahteraan-psikologi-untuk-tangani-corona>, accessed August 28, 2020), the issue



regarding Covid-19 is no longer a question of health or medical issues, but also social, economic, cultural and psychological aspects.

During the Covid-19 pandemic, nurses are vulnerable to experiencing a decrease in their subjective well being. This is due to the increased responsibility that the nurses have to carry out. Nurses' obligations are not only about restoring physical health, but nurses are also obliged to provide mental support to each patient so that they have an optimistic attitude in achieving recovery, especially for Covid-19 patients. (Puspa, on <https://mediaindonesia.com/read/detail/305398-menjadi-perawat-di-masa-pandemi-covid-19>, accessed August 29, 2020). Nurses' subjective well being which has decreased during the Covid-19 pandemic is at risk of reducing the optimal service provided by nurses to patients (<https://rsupsoeradji.id/kelompok-dukungan-bagi-tenaga-kesehatan-di-masa-pandemi-covid-19/>, accessed August 29, 2020). Expressed by Dhestiana (on <https://rsupsoeradji.id/kelompok-dukungan-bagi-tenaga-kesehatan-di-masa-pandemi-covid-19/>, accessed August 29, 2020), decreased subjective well being felt by nurses due to several reasons, including threats to health, both personal health and family members of nurses, loss of colleagues while helping positive patients with Covid-19, threats from their leadership and professional identity, inner conflicts between values, aspirations, and accomplishments during work, as well as the fatigue caused by the large number of covid-19 patients to be treated.

Survey conducted by Lukman (2020) To 393 respondents who were nurses and doctors, 42.2% of respondents said they needed mental health services. These respondents expressed concerns about contracting the covid-19 virus, felt unfair because they were transferred to the emergency room, feared infection because they worked in a risky unit, were anxious when they heard information about covid-19, had difficulty sleeping because of anxiety, inadequate PPE, feel uncomfortable about changes in the behavior of superiors, as well as the stigma from society because of experiencing flu symptoms.

Researchers conducted a brief interview about the feelings felt by the nurses while on duty during the Covid-19 pandemic. The interview was conducted on June 14, 2020, to 5 nurses at one of the referral hospitals in Surabaya. The first interview was conducted with K, who claimed to be uncomfortable with the covid-19 pandemic. K revealed that, while carrying out his duties helping Covid-19 patients, he was often overwhelmed by a feeling of fear of contracting and being infected with the Covid-19 virus that came from the patient. The existence of PPE given to the nurses did not reduce the feeling of fear felt by K. The next interview was conducted with ER who expressed his anger at the patient's family who took the covid-19 virus lightly. According to ER, many patient families do not believe in the covid-19 virus and carry out forced repatriation of family members who test positive for Covid-19 based on the results of doctor and laboratory examinations.

The third interview was conducted with F, who felt the same way as K. F revealed that the absence of a vaccine for the covid-19 virus raised concerns about being infected and infected by the covid-19 virus. F added that, if a vaccine for the Covid-19 virus had been found, maybe the concern felt by F would be a little less. AN revealed that, if a mental condition is influenced by negative thoughts, it will affect the physical health condition. AN stated that, the covid-19 pandemic was part of his responsibility as a nurse that had to be undertaken. Although AN was not worried about his condition, AN also explained that the worry arose when he returned home. AN is worried that he will carry the covid-19 virus and transmit it to family members at home. Finally, researchers conducted an interview with D who also claimed to be afraid and worried that he would be infected by the covid-19 virus, because D is often assigned to help covid-19 patients. Besides that, D also experienced stress because he was asked to move by the boarding house mother. D told about the difficulty of finding a boarding house that would accept nurses on duty at the covid-19 referral hospital.

Based on the results of a survey conducted by Lukman (2020) and interviews conducted by researchers, it is known that the perception of social stigma affects the emergence of subjective well being that is felt by nurses. Social stigma cannot be separated from the side of human life as a social

being. Expressed on the inside <https://theconversation.com/riset-covid-19-sikap-menyalahkan-orang-lain-dominan-di-percakapan-twitter-di-indonesia-danmalaysia-137385> (on Dai, 2020), the concept of social stigma during the Covid-19 pandemic has five factors, namely: a. There is a bad label for the current condition; b. Negative associations that refer to Covid-19 patients, the patient's family, citizens of Chinese descent, even medical personnel; c. Separation, namely an attempt to cut off contact with Covid-19 patients, the patient's family, citizens of Chinese descent, and medical personnel; d. Loss of social status due to being infected with Covid-19; e. The ability to control the situation to avoid conflict due to the covid-19 virus.

Social stigma is a sign or lack of characteristics of an individual that is socially acceptable (Blaine, on Utami, 2018). According to (IFRC, UNICEF, 2020), Social stigma in the context of health is a negative association between individuals and related individuals who have health problems. The existence of a social stigma that develops in society can hurt and even have a more negative impact on the mental health of nurses than the covid-19 virus itself (Herdiana, 2020).

The nurses' perceptions of these various stigmas have the potential to damage their identity and affect the psychological condition of the individual (Mayor dan O'Brien, on Utami, 2018). These nurses will position themselves as individuals who are not valued and lead to deep sadness. Thus, the subjective well being felt by nurses during the Covid-19 pandemic will not be realized optimally.

Based on the explanation above, this study aims to determine the relationship between perceptions of social stigma and subjective well being on nurses in the Covid-19 pandemic era, especially in Surabaya.

METHOD

Research Design

This study used a quantitative approach with the research subjects being nurses at the Covid-19 referral hospital. The sampling method used *quota random sampling*.

Participant

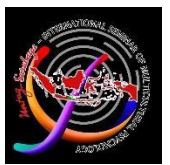
The research subjects (samples) were 46 nurses at one of the Covid-19 referral hospitals in Surabaya. The demographic data of the research subjects are as follows:

Table I. Subject Demographic Data

	Explanation	Quantity
Gender	Man	12
	Woman	38
Education	D3 Keperawatan	14
	S1 Keperawatan	0
	S1 Keperawatan Ners	34
	S2 Keperawatan	0
	S2 Keperawatan Ners	2
	Others	0
Workspace	IGD	23
	Covid	28
	Poli	9

Instrument

There are two research instruments, namely the Subjective Well Being Scale and the Social Stigma Perception Scale. All research instruments used in this study have gone through a field trial



process on 40 nurses who help Covid-19 patients in Surabaya. The following are details of each instrument used in this study:

First, the Subjective Well Being Scale which has 16 items and uses a Likert scale which has two forms of statements, namely statements that support the variables to be disclosed (favorite) and statements that do not support the variables to be disclosed (unfavorable). Likert scale contains 4 levels of answer scores, namely a score of 1 (strongly disagree) to a score of 4 (strongly agree) for the favorite statement. As for the unfavorable statement the score moved from 1 (strongly agree) to score 4 (strongly disagree). This scale has a Cronbach Alpha reliability coefficient of 0.867 with the item discrimination power moving between 0.330-0.707.

Second, the Social Stigma Perception Scale which has 29 items and uses a Likert scale which has two forms of statements, namely statements that support the variables to be disclosed (favorite) and statements that do not support the variables to be disclosed (unfavorable). The Likert scale contains 4 levels of answer scores, namely a score of 1 (strongly disagree) to a score of 4 (strongly agree) for the favorite statement. Whereas for the unfavorable statement the score moved from 1 (strongly agree) to score 4 (strongly disagree). This scale has a Cronbach Alpha reliability coefficient of 0.960 with the item discrimination power moving between 0.356-0.888.

Research Procedure

This research procedure begins with testing measuring instruments, followed by determining the research sample, then distributing research questionnaires using google form to research subjects. The data collection process was carried out for approximately one week. The final step in this research procedure is data analysis and reporting.

Data Analysis Techniques

The data analysis used was the Spearman Brown correlation test to determine whether the social stigma perception variable had a significant relationship with the subjective well being variable.

RESULT

The results of the correlation test between the subjective well being variable and the social stigma perception variable used nonparametric statistics with the Spearman Brown analysis technique. shows the correlation coefficient (r) = -0.215 with a significance value (p) = 0.133. The results of the correlation between the subjective well being variable and the social stigma perception variable can be seen in the table below:

Table 2. Spearman Brown Correlation Value

		SWB	Persepsi_Stigma _Sosial
Spearman's rho	SWB	Correlation Coefficient	1,000
		Sig. (2-tailed)	,215
		N	50
Persepsi_Stigma _Sosial	Persepsi_Stigma _Sosial	Correlation Coefficient	-,215
		Sig. (2-tailed)	,133
		N	50

The significance level value obtained is -0.215 (> 0.05). This shows that the subjective well being variable with the social stigma perception variable does not have a significant negative relationship, meaning that the better the community's perception of stigma, the lower the subjective well being of nurses during the Covid-19 pandemic. On the other hand, the newer the perception of social stigma, the higher the subjective well being of nurses during the Covid-19 pandemic.

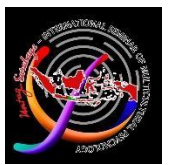
DISCUSSION

The results of the Spearman Brown correlation analysis state that the hypothesis proposed in this study is rejected. This means that the perception of social stigma has no significant relationship with the subjective well being of nurses during the Covid-19 pandemic. The rejection of the research hypothesis can be caused by several factors, including research data that has not been spread optimally. Based on table 1. Subject Demographic Data, it is known that the number of men and women is not balanced. Thus, the data collected has not been able to fully describe the research subject. The results of research conducted by Campbell, Converse, dan Rodgers (on Eddington & Shuman, 2005) It is known that gender, demographics, age, income, race, education, and marital status contributed less than 20% of the variance in subjective well being.

Subjective well being is a phenomenon with broad categories, including emotional responses, satisfaction levels, and global assessments of life satisfaction. The specification of each construction needs to be understood separately, although the components of these constructs are often substantially correlated (Diener, Suh, Luca and Smith in Choudhury & Barman, 2014). Subjective well being includes mood, emotions, and evaluation of life satisfaction. This indicates that subjective well being is strongly influenced by the internal aspects possessed by each individual. The aspects of subjective well being referred to are cognitive, positive, and negative aspects (Heintzelman & Diener, 2019). Cognitive aspects can be seen from individual life satisfaction, which is a cognitive assessment of an individual based on a comparison of conditions experienced in the past, present, and future with the desired standard. Positive affection is associated with high emotions and pleasant mood, including enthusiasm, interest in something, determination, excited, inspired, alert, active, strong, proud, full of attention. Meanwhile, negative affect is in the form of low emotions that are not liked as a response to life or bad events, such as fear, worry, disappointment, depression, anxiety, nervousness, feeling ashamed, feeling guilty, irritability, hostility. Individuals who are able to optimize these three aspects will not be affected by the various bad stigmas that develop in society, including the social stigma of nurses who help Covid-19 patients.

Personality factors also contribute a significant portion to an individual's subjective well being. According to Diener (on Eddington & Shuman, 2005), personality has a significant portion in influencing one's subjective well being. Diener also supports the ideas put forward by Costa and McCrae (on Larsen & Eid, 2008), that personality factors, especially extraversion and neuroticism are the most important contributors in determining an individual's subjective well being. Extraversion is associated with more positive emotions and has a lower threshold for activating positive effects. Meanwhile, neuroticism is strongly associated with more negative emotions and a lower threshold for activating negative effects (Larsen & Eid, 2008). Also stated by Eddington & Shuman (2005), Personality is one of the strongest and most consistent predictors of subjective well being. Personality affects individual reactions in the face of various events that occur in life.

According to the viewpoint of the top-down theory, personality traits in general influence the way a person perceives an event. Therefore, individuals may have a tendency to consistently view life in a positive or negative way, depending on their stable personality traits. Another finding states that personality affects subjective well being in the long term. Personality provides a basis for a person to provide an emotional response to something (https://en.wikipedia.org/wiki/Subjective_well-being#Theories, accessed December 3, 2020). External events, such as nurses' perceptions of social stigma during the Covid-19 pandemic, might make nurses move away from the baseline. However, these movements tended to be of limited duration, eventually the nurses returned to their respective baselines. In addition, the stigma that the community gives to nurses is stigma that is not related to embarrassing things such as immoral behavior, or stigma related to physical disabilities or infectious



diseases. The social stigma given to nurses during the Covid-19 pandemic emerged because nurses helped Covid-19 patients, who were feared they would infect those around them. Thus, the tendency of nurses to move away from the baseline subjective well being due to this social stigma becomes small or even does not occur. This may also be due to the tendency of nurses to adapt quickly to external events, including giving stigma by the community to their profession during the Covid-19 pandemic. As a result, nurses' perceptions of social stigma did not affect the emergence of changes in subjective well being felt by nurses during the Covid-19 pandemic.

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Ethic Policies

The written source used in this research is listed in the bibliography and there is no conflict of research interest with any party.

REFERENCE

- Dai, N. F. (2020). Stigma Masyarakat Terhadap Pandemi Covid-19. *Stigma Masyarakat Terhadap Pandemi Covid-19*, 66–73.
- Desi, D., Tanti, T., & Ranimpi, Y. Y. (2019). Subjective Well-Being Perawat Yang Bekerja Di RS Jiwa Prof. Dr. Soerojo Magelang. *Insight : Jurnal Pemikiran Dan Penelitian Psikologi*, 15(2), 163. <https://doi.org/10.32528/ins.v15i2.1667>
- Dirk, J., Holtzhausen, V., Coetzee, S. K., & Ellis, S. M. (2020). Influence of the practice environment on community service nurses; subjective well-being, compassion practice and psychological capital. *International Journal of Africa Nursing Sciences*, 1, 100243. <https://doi.org/10.1016/j.ijans.2020.100243>
- Eddington, N., & Shuman, R. (2005). Subjective well-being (happiness). *Continuing Psychology Education*, 1(858), 1–18.
- Giyati, G., & Wardani, I. R. K. (2016). Ciri-Ciri Kepribadian Dan Kepatutan Sosial Sebagai Prediktor Subjective Well-Being (Kesejahteraan Subyektif) Pada Remaja Akhir. *Insight: Jurnal Ilmiah Psikologi*, 8(1), 10–24. <https://doi.org/10.26486/psikologi.v17i2.693>
- Herdiana, I. (2020). Stigma Saat Pandemi COVID-19 dan Tindakan Melawannya. In *Psychology*.
- IFRC, UNICEF, W. (2020). *Social Stigma associated with COVID-19 A guide to preventing and addressing*.
- Larsen, R. J., & Eid, M. (2008). Ed Diener and the science of subjective well-being. *The Science of Subjective Well-Being*, 1–16. <https://doi.org/10.1093/acprof>

Lukman, P. R. (2020). Dampak Covid terhadap Kesehatan Mental Nakes : Hasil Pendampingan Tim Konseling RSCM.

Utami, W. (2018). *Pengaruh Persepsi Stigma Sosial dan Dukungan Sosial Terhadap Kesejahteraan Psikologis Pada Narapidana di Lapas Kelas IIA Kediri*. Universitas Muhammadiyah Malang.

Yulianti, F. (2006). *Hubungan Behan Kerja dan Subjective Well-Being pada perawat RSUD Blambangan Banyuwangi*. 122(1995), 25–27.

https://en.wikipedia.org/wiki/Subjective_well-being#Theories, accessed December 3, 2020

<https://kabar24.bisnis.com/read/20200324/19/1217311/studi-petugas-kesehatan-virus-corona-alami-tekanan-psikologis>, accessed September 10, 2020

<https://kependudukan.lipi.go.id/id/berita/53-mencatatcovid19/902-perawat-indonesia-di-tengah-pandemi-covid-19>, accessed August 28, 2020

<https://mediaindonesia.com/read/detail/305398-menjadi-perawat-di-masa-pandemi-covid-19>, accessed August 29, 2020

<https://nationalgeographic.grid.id/read/132255604/dampak-pandemi-covid-19-hantam-sistem-layanan-kesehatan-dalam-4-gelombang?page=all>, accessed August 26, 2020

<https://prfmnews.pikiran-rakyat.com/nasional/pr-13718125/banyak-dokter-dan-perawat-meninggal-akibat-covid-19-ppni-kami-prihatin-dan-khawatir>, accessed September 4, 2020

<https://rsupsoeradji.id/kelompok-dukungan-bagi-tenaga-kesehatan-di-masa-pandemi-covid-19/>, accessed August 29, 2020

<https://www.liputan6.com/news/read/4250187/ahli-ingatkan-pentingnya-kesejahteraan-psikologi-untuk-tangani-corona>, accessed August 28, 2020