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The workload of Indonesian nurses working in Saudi Arabia after COVID-19 pandemic: A phenomenological study

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Abstract

Studies showed the significant impact on nurses' clinical experience and how they face work challenges during COVID-19. This study explores Indonesian nurses' working experiences in Saudi Arabia during the post-COVID-19 pandemic. A qualitative design with a phenomenological approach was used in this study. The inclusion criteria were 10 Indonesian nurses working in the COVID-19 ward, registered nurses at the Saudi Commission for Health Specialties (SCFHS), and able to participate in this research, while the exclusion criteria were out of those criteria. A semi-structured interview was used in a suitable setting, and the data transcription followed seven steps of Colaizzi's analysis. Three themes were identified: burnout, support system, and job satisfaction. These themes reflect the workload of Indonesian nurses who work in the government hospital in Saudi Arabia. All participants were exhausted in the post-COVID-19 pandemic. The researcher recommended the need for comprehensive support by the government and suggested established policies that reduce the psychological problem of non-Saudi nurses in post-pandemic COVID-19.

Keywords: COVID-19; Indonesian nurse; working experiences; phenomenological study; Saudi Arabia

Introduction

Since the delta variant spread throughout the world from early April until May 2021, many health services have been disrupted, and challenging to access nursing services in several hospitals (Islam et al., 2022). The impact of the massive spread of the virus made healthcare workers, especially nurses, experienced work stress, excessive workloads, and even work fatigue, resulting in death (AlJhani et al., 2021). Healthcare providers admit patients beyond the existing capacity while the number of nursing staff is smaller than that of them (Kadri et al., 2021). After the delta variant stopped spreading, an omicron variant was identified on 24 November 2021, originating from African countries, and transmission is faster than the previous variant (Al-Tawfiq et al., 2022). World Health Organization decided on omicron as a variant of concern (Poudel et al., 2022). Country leaders have taken various policies by closing flight access from African countries, implementing strict health protocols, and adding isolation rooms to treat COVID-19 patients. Three months after being announced, there was an increase in the number of patients with the omicron variant (Thakur & Ratho, 2021).

Workload impact during the COVID-19 pandemic brought great sadness to nurses in carrying out their duties and responsibilities to care for, educate, and serve patients. Those challenges have put nurses under a psychological burden (Almalki et al., 2021). As frontline professionals, nurses are required to provide quality and complete services. Still, on the other hand, they work beyond the existing capacity, such as additional work duty, learning rules, and responsibilities of COVID-19 guidelines (Aboshaiqah & Alghamdi, 2020). Indonesian nurses working in government health services in Saudi Arabia have been facing this condition similar to other health care from other countries—no research or study about workload related to Indonesian nurses in Saudi Arabia. The data from Indonesian National Nurses Association (INNA) in Saudi Arabia shows that the number of Indonesian nurses in Saudi Arabia is 206 registered nurses. The data showed that more than 15 nurses chose not to extend their work every year and return to

Indonesia during the pandemic. Changes in working hours, increased workload, and work fatigue factors make nurses in Saudi Arabia feel the impact of uncomfortable work (Alsolami, 2021).

A study conducted by Fatmah Alsolami explains eight indicators that can be identified for health workers during the COVID-19 pandemic in Saudi Arabia. These indicators are physical fatigue, fear of infection, uncertainty in care, uncomfortable use of PPE, and reduced overall maintenance. Other additions include the length of treatment, the absence of particular guidelines for treatment, and the lack of managerial support (Alsolami, 2021). Previous studies in Qatar showed that nurses face challenges compromising their physical, emotional, and psychological well-being (Villar et al., 2021). Critical care area was the very high level of stress that affected nurses during the COVID-19 pandemic in the United Arab Emirates (Joshua et al., 2021). Currently, there is no study related to work experience, especially during COVID-19, for Indonesian nurses in Saudi Arabia. This study explores Indonesian nurses' working experience in government hospitals in Saudi Arabia. The methodology used a qualitative study with a phenomenological approach. The implication of this research is to know more deeply about the working experiences faced by nurses in the post-COVID-19 pandemic.

Method

This study used a qualitative design with a phenomenological approach. Phenomenological research describes things and experiences them through their sense (Neubauer, Witkop, & Varpio, 2019). This study aimed to explore the clinical experiences that affected Indonesian Nurses' workload working in Saudi Arabia's government hospitals. A semi-structured interview was used in this study to collect the data. Sample selection used purposive sampling of 10 respondents. Interviews were conducted by telephone for 30-40 minutes for each respondent. The researcher asked permission from the respondent by informing concerns before taking the interview and the role of the interview. The audio recording was used to ensure data accuracy in the interview transcript, and all participants agreed.

Method triangulation was done by collecting all informant data and comparing it with interviews conducted through data observation by Indonesian National Nurses Association (INNA) in Saudi Arabia. This study was conducted in a government hospital where 10 Indonesian nurses work. Those hospitals have more than 100-bed capacity for COVID-19 services. Three categories selected the inclusion criteria: a). Working in COVID-19 ward, b). Have a license as a registered nurse at Saudi Commission for Health Specialists, c). Able to participate in this research. The exclusion criteria were out of those criteria. Interviews were conducted one in one interview by telephone, and the audio transcript was conducted during interviews above 40-50 minutes for each respondent. Coding is used to make different for each respondent, e.g., N1, N2, N3, N4, etc.

The data were carefully analyzed after transcription following seven steps of Colaizzi's (1978), including 1). They read and re-read all transcripts and found the goals from the participant's expressions. 2). Identifying significant statements about workload in post-pandemic COVID-19. 3). Formulating meaning from the significant statement. 4). Identified meaning in themes. 5) Developing a detailed description. 6). Producing the fundamental structure. 7). Seeking verification of the fundamental structure (Morrow et al., 2015). This study used HyperResearch software to analyze both data for the transcript used.

According to Lincoln and Guba (1985), there are four criteria for assessing and improving the results of a qualitative study which refer to the principle of credibility, transferability, dependability, and confirmability. First, credibility is the research results about the phenomenon or an expression of the reality of working experience in post-pandemic COVID-19. Second, transferability, the phenomenon, and the context in the research cannot be separated; both must be described in great detail to be understood. Third, dependability results from the study show a relationship between time and context. Fourth, confirmability is the neutrality of the researcher in carrying out research without any involvement that can affect respondents. The Medical and Health Research Ethics Committee of the Faculty of Medicine, Public Health and Nursing Universitas Gadjah Mada, with number KE-FK-0522-EC-2022, approved this study.

Results

The participants in this study were ten registered nurses. The nurse selected the setting interview during the day off in a comfortable place. The mean age was 36-45 years old, and the years of experience were more than five years (Table 1). All participants were women (n=10), most were married (n=9), working in the COVID-19 ward (n=10), and most of the respondents were bachelors of nursing (n=6). All participants live in various places in Saudi Arabia, such

as Riyadh (n=4), Madinah (n=3), Makkah (n=2), and Hail (n=1). Following the seven steps of Colaizzi (1978), three themes were identified: burnout, support system, and job satisfaction. These themes reflect the workload of Indonesian nurses who work in the government hospital in Saudi Arabia.

Table 1. Demographic distribution of respondents (n=10)

Identity	Gender	Age	Family Status	Experience (yr.)	Working area	Education
N1	Female	39	Married	14	Male Ward /Riyadh	Bachelor
N2	Female	42	Married	12	ICU/ Madinah	Bachelor
N3	Female	42	Married	13	ICU/ Riyadh	Bachelor
N4	Female	36	Married	10	ICU/ Makkah	Bachelor
N5	Female	37	Married	12	Emergency ward / Hail	Diploma
N6	Female	40	Single	15	OPD/ Makkah	Bachelor
N7	Female	36	Married	15	ICU/ Madinah	Diploma
N8	Female	40	Married	12	Female Ward/ Riyadh	Diploma
N9	Female	45	Married	20	ICU/ Madinah	Diploma
N10	Female	42	Married	14	ICU/ Madinah	Bachelor

Burnout

Job Stress

Informants said that they felt job stress during the COVID-19 pandemic. Standard operating procedures for handling COVID-19 were provided without training. In another way, some nurses changed their duty from the medical ward to Intensive Care Unit (ICU) without preparing to care for COVID-19 patients. In addition, another factor that affects job stress is changing the schedule of other nurses who are exposed to COVID-19, and they cannot assign it to their wards. The problem that causes job stress is imbalances between nurses and patients. Some nurses must take care of 2 or 3 patients in one room with PPE equipment used during work. One of the nurses said:

"Previously, I worked in a nursing male ward, but during the pandemic, I was transferred to an ICU ward without any knowledge about ICU." (N1)

Another nurse should replace others who have positive COVID-19 results. This is an unexpected schedule that nurses face on duty. It changed the police and focused on patients:

"I need to cover the duty schedule when another nurse was positive for COVID-19, sometimes there is 1 or 2 nurses duty during COVID-19 and cover many patients" (N10)

Physical Exhaustion

All informants felt physical exhaustion while working in COVID-19 services. The shortage of nurses due to exposure to COVID-19, additional working hours, and one nurse's treatment of 3 patients caused physical fatigue. This situation occurs in several wards, such as the Emergency Room (ER) or Intensive Care Unit (ICU), with increased work activities. One of the nurses said:

"Working in the emergency room during COVID-19 tired me. Shortage of staff and additional working hours was a terrible thing that I have facing". (N4).

In other conditions, nurses must work according to their schedule, even without staff. Changing the program every time made physical exhaustion, as there mentioned:

"I felt tired because sometimes they change me to another room, especially in the COVID-19 ward. Shift changing, covering PPE, handling 2 or 3 patients in ICU room. I was not ready to work" (N8).

Support System

Lack of management

Some informants said they faced problems with the support system at work, especially with hospital management.

The provision of intensive training to nurses, injustice in the distribution of overtime pay, and working hours without being accompanied by the provision of a day off by the expectation of nurses. The problem Indonesian nurses face when exposed to COVID-19 is that they must go on duty even though the quarantine period has not been completed in 10 days according to the applicable rules. One of the nurses said:

"There is an additional salary, but our management still does not fully pay for nurse technicians, and we have to go on duty even though we were positive for COVID-19" (N3).

One of the informants said that during the pandemic, they also had to work extra in preparing for accreditation at the hospital. That accreditation preparation increased their working hours without giving them a day off. A nurse mentioned:

"We must work overtime while preparing for hospital accreditation without additional days off" (N7).

Job Satisfaction

Additional Salary

Some informants said there were many shortcomings during the COVID-19 pandemic, significantly increasing working hours but not accompanied by additional overtime. Some informants received overtime pay, but some did not for unknown reasons. This causes the regulation and working hours to be not appropriately implemented. In its regulation, the Ministry of Labor of the Kingdom of Saudi Arabia mentions provisions for providing incentives for each additional working hour in all sectors. One of the nurses said:

"We have worked totally during COVID-19, but some of us did not receive additional payment" (N8).

Some nurses were facing different problems regarding additional salaries during COVID-19. She mentioned:

"I have been working in this hospital, but during COVID-19, there was no additional salary" (N10).

Vacation hold

Some informants said that during the COVID-19 pandemic, the provision for annual holidays was abolished, but guarantees were still provided while in Saudi Arabia. Since the COVID-19 pandemic hit in the last two years, most nurses have experienced delays in granting annual holidays. Some nurses feel sad because they cannot see their parents, husbands, and children. One of the nurses said:

"I cannot go on vacation for almost two years since the outbreak because there is not allowed to take a vacation" (N7).

After the pandemic subsided, some nurses were given annual holidays to their respective countries to reduce their days off. One of the nurses said:

"We Have 50 days' vacation yearly, but it was deducted 20 days and have 30 until 40 days' vacation, it was not enough" (N8).

Discussion

This study attempts to observe the work experience of Indonesian nurses in Saudi Arabia who worked in government hospitals during post COVID-19 pandemic. The challenges Indonesian nurses face in Saudi Arabia are very diverse, as the result of the research show that there are 3 main themes as the impact of the pandemic: burnout, support system, and job satisfaction. Burnout is a challenge Indonesian nurses face during the COVID-19 pandemic. Many nurses experience a heavy workload, uncertain work psychology, and a shortage of nursing staff due to exposure to COVID-19 (Alqutub et al., 2021). Burnout can be associated with work stress and physical fatigue that are not optimally regulated, causing physical and mental disorders that can interfere with work (Jamir et al., 2022). Burnout during the COVID-19 pandemic occurred significantly among health workers, especially those new to COVID-19 service, and had additional long working hours (Aljhani et al., 2021). The reality Indonesian nurses face while working is the lack of training related to the standard operating procedure for handling COVID-19 and changing the object of work from the medical ward to the COVID-19 medical ward. In addition, increasing the number of patients is not in line with the number of existing nurses, causing a shortage of nurses and impacting the workload of nurses (Aruta et al., 2022).

Nurses face workload based on work experience during the COVID-19 pandemic, which illustrates the importance of social support in the workplace (Zhou et al., 2022). To prevent burnout and improve the mental health of nurses, work related to COVID-19 must be appropriately managed to reduce the significant physical and psychological effects (Villar et al., 2021). This study is consistent with several studies that during the COVID-19 pandemic, health workers, especially nurses, experienced an increased workload (Balay-odao et al., 2021). While carrying out work, nurses are expected to be able to provide excellent and optimal services and be able to implement patient safety. Still, on the other hand, they are also hindered by work dynamics, such as a shortage of nurses, which impacts nurses physically and psychologically (Bergman, 2021). The work experience faced by Indonesian nurses in Saudi Arabia during the COVID-19 pandemic was injustice in the provision of COVID-19 incentives. Some nurses complained about the lack of transparency in the provision of incentives. This has a psychological impact because the workload increases, but the rewards that should be given are not implemented (Arnetz et al., 2020). Hospital management as an organization and support system should be able to recognize that nurses are very vulnerable to exposure, so hospital management should implement a psychological frontline support system (Owens, 2020).

The addition of working hours by management is not accompanied by maximum overtime. The work experience faced by Indonesian nurses in Saudi Arabia has shortcomings, especially in several hospitals where nurses work. Regulations from the Ministry of Health of Saudi Arabia have changed the working hours of nurses during the pandemic from 8 working hours to 12 working hours, with working conditions from 4 working days a week to 7 working days (Alsolami, 2021). The organization's role primarily determines the need for collaboration in hospital management and good communication in providing support to nurses (Alanezi et al., 2021). Another significant theme in this study is job satisfaction for Indonesian nurses working in government hospitals. There are two challenges faced while working in COVID-19 services, namely not being given an annual holiday which is the right of workers, and increasing salaries from work done. Nursing managers and leaders must understand the problems nurses face so that they will remain comfortable working and not change workplace places (Falatah, 2021). Job satisfaction is related to workload because both impact work continuity and support from nursing managers and leaders who should provide support for workers' rights, both psychological support and in the form of additional costs. In contrast, workers' right to meet with their families is a psychological aspect that needs attention.

Conclusion

Indonesian nurses face serious challenges, especially burnout, support system, and job satisfaction in the post-COVID-19 pandemic. Some nurses have faced work challenges that have physical and psychological problems. Government and healthcare leaders should provide comprehensive support for non-Saudi workers. However, the results of this study can be used as an illustration for future research and established policies that anticipated psychological health by nurses after the COVID-19 pandemic. The study has limitations, including the number of participants and the scope of the area where nurses work. During the COVID-19 pandemic, all interviews were conducted online. Thus, the result may be limited.

Author's declaration

The authors made substantial contributions to the conception and design of the study and took responsibility for data analysis, interpretation, and discussion of results. For manuscript preparation, all the authors read and approved the final version of the paper.

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Availability of data and materials

All data are available from the authors.

Competing interests

The authors declare no competing interest.

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References

- Aboshaiqah, A., & Alghamdi, M. G. (2020). Nurses, COVID-19 pandemic, and Saudi Arabia. December. <https://doi.org/10.20944/preprints202012.0607.v1>
- Al-Tawfiq, J. A., Hoang, V. T., Le Bui, N., Chu, D. T., & Memish, Z. A. (2022). The Emergence of the Omicron (B.1.1.529) SARS-CoV-2 Variant: What is the Impact on the Continued Pandemic? *Journal of Epidemiology and Global Health*, December 2021, 2–5. <https://doi.org/10.1007/s44197-022-00032-w>
- Alanezi, F., Aljahdali, A., Alyousef, S. M., Alshaikh, W., & Mushcab, H. (2021). Informatics in Medicine Unlocked Investigating healthcare practitioners' attitudes towards the COVID-19 outbreak in Saudi Arabia : A general qualitative framework for managing the pandemic. *Informatics in Medicine Unlocked*, 22, 100491. <https://doi.org/10.1016/j.imu.2020.100491>
- Aljhani, S., AlHarbi, H., AlJameli, S., Hameed, L., AlAql, K., & Alsulaimi, M. (2021). Burnout and coping among healthcare providers working in Saudi Arabia during the COVID-19 pandemic. *Middle East Current Psychiatry*, 28(1). <https://doi.org/10.1186/s43045-021-00108-6>
- Almalki, A. H., Alzahrani, M. S., Alshehri, F. S., & Alharbi, A. (2021). The Psychological Impact of COVID-19 on Healthcare Workers in Saudi Arabia: A Year Later Into the Pandemic. 12(December), 1–9. <https://doi.org/10.3389/fpsy.2021.797545>
- Alqutub, S., Mahmoud, M., & Baksh, T. (2021). Psychological Impact of COVID-19 on Frontline Healthcare Workers in Saudi Arabia. *Cureus*, 13(5). <https://doi.org/10.7759/cureus.15300>
- Alsolami, F. (2021). Working experiences of nurses during the novel coronavirus outbreak : A qualitative study explaining challenges of clinical nursing practice. January, 1–10. <https://doi.org/10.1002/nop2.977>
- Arnetz, J. E., Goetz, C. M., Arnetz, B. B., & Arble, E. (2020). Nurse reports of stressful situations during the COVID-19 pandemic: Qualitative analysis of survey responses. In *International Journal of Environmental Research and Public Health* (Vol. 17, Issue 21, pp. 1–12). <https://doi.org/10.3390/ijerph17218126>
- Aruta, J. J. B. R., Almazan, J. U., Alamri, M. S., Adolfo, C. S., & Gonzales, F. (2022). Measuring mental well-being among frontline nurses during the COVID-19 crisis: Evidence from Saudi Arabia. *Current Psychology* (New Brunswick, N.J.), 1–11. <https://doi.org/10.1007/s12144-022-02828-2>
- Balay-odao, E. M., Alquwez, N., & Inocian, E. P. (2021). Hospital Preparedness , Resilience , and Psychological Burden Among Clinical Nurses in Addressing the COVID-19 Crisis in Riyadh , Saudi Arabia. 8(December 2019), 1–11. <https://doi.org/10.3389/fpubh.2020.573932>
- Bergman, L., Falk, A. C., Wolf, A., & Larsson, I. M. (2021). Registered nurses' experiences of working in the intensive care unit during the COVID-19 pandemic. *Nursing in critical care*, 26(6), 467–475. <https://doi.org/10.1111/nicc.12649>
- Falatah, R. (2021). The Impact of the Coronavirus Disease (COVID-19) Pandemic on Nurses' Turnover Intention: An Integrative Review. *Nursing Reports*, 11(4), 787–810. <https://doi.org/10.3390/nursrep11040075>
- Islam, S., Islam, T., & Islam, M. R. (2022). New Coronavirus Variants are Creating More Challenges to Global Healthcare System: A Brief Report on the Current Knowledge. *Clinical Pathology*, 15. <https://doi.org/10.1177/2632010X221075584>
- Jamir, J., Aruta, B. R., Almazan, J. U., Sulaiman, M., Cris, A., & Gonzales, F. (2022). Measuring mental well - being among frontline nurses during the COVID - 19 crisis : Evidence from Saudi Arabia. *Current Psychology*, 0123456789. <https://doi.org/10.1007/s12144-022-02828-2>
- Joshua, R., Chehab, F., David, R., & Salim, N. A. (2021). Impact of Work Stress during COVID-19 Epidemic on Job Satisfaction and Job Performance among Nurses in Critical Care Units, United Arab Emirates 2020. *International Journal of Clinical and Experimental Medicine Research*, 5(2), 225–231. <https://doi.org/10.26855/ijcemr.2021.04.018>
- Kadri, S. S., Sun, J., Lawandi, A., Strich, J. R., Busch, L. M., Keller, M., Babiker, A., Yek, C., Malik, S., Krack, J., Dekker, J. P., Spaulding, A. B., Ricotta, E., Powers, J. H., Rhee, C., Klompas, M., Athale, J., Boehmer, T. K., Gundlapalli, A. V., ... Warner, S. (2021). Association between caseload surge and COVID-19 survival in 558 u.s. hospitals, march to august 2020. *Annals of Internal Medicine*, 174(9), 1240–1251. <https://doi.org/10.7326/M21-1213>
- Morrow, R., Rodriguez, A., King, & Nigel. (2015). Colaizzi's descriptive phenomenological method Original Citation. *The Psychologist*, 28(8), 643–644. <http://eprints.hud.ac.uk/id/eprint/26984/>
- Neubauer, B. E., Witkop, C. T., & Varpio, L. (2019). How phenomenology can help us learn from the experiences of others. *Perspectives on medical education*, 8(2), 90–97. <https://doi.org/10.1007/s40037-019-0509-2>
- Owens, I. T. (2020). Supporting nurses' mental health during the pandemic. *Nursing*, 50(10), 54–57. <https://doi.org/10.1097/01.NURSE.0000697156.46992.b2>

- Poudel, S., Ishak, A., Perez-Fernandez, J., Garcia, E., León-Figueroa, D. A., Romaní, L., Bonilla-Aldana, D. K., & Rodriguez-Morales, A. J. (2022). Highly mutated SARS-CoV-2 Omicron variant sparks significant concern among global experts - What is known so far? In *Travel medicine and infectious disease* (Vol. 45, p. 102234). <https://doi.org/10.1016/j.tmaid.2021.102234>
- Thakur, V., & Ratho, R. K. (2021). OMICRON (B.1.1.529): A new SARS-CoV-2 variant of concern mounting worldwide fear. *Journal of Medical Virology*, December 2021, 1821–1824. <https://doi.org/10.1002/jmv.27541>
- Villar, R. C., Nashwan, A. J., Mathew, R. G., Mohamed, A. S., Munirathinam, S., Abujaber, A. A., Al-, M. M., & Shraim, J. M. (2021). The lived experiences of frontline nurses during the coronavirus disease 2019 (COVID- - 19) pandemic in Qatar: A qualitative study. *Nursing Open Journal*, 8(March), 3516–3526. <https://doi.org/10.1002/nop2.901>
- Zhou, T., Xu, C., Wang, C., Sha, S., Wang, Z., Zhou, Y., Zhang, X., & Hu, D. (2022). Burnout and well - being of healthcare workers in the post - pandemic period of COVID - 19 : a perspective from the job demands - resources model. *BMC Health Services Research*, 1–15. <https://doi.org/10.1186/s12913-022-07608-z>