

CHAPTER I

INTRODUCTION

This chapter describes the background, problem statement, aim of the study, research questions, research hypotheses, and research benefits.

1.1 Background

End-of-life care (EOLC) refers to the palliative or supportive care provided to patients who are near death and whose treatment objectives have shifted from prolonging life to maximizing quality of life (McQuade, 2024). EOLC includes physical, emotional, social, and spiritual support for patients and their families, beginning when a patient receives a diagnosis of a terminal illness with a prognosis of fewer than six months to live (Mursid et al., 2024). According to Macaden et al. (2014), EOLC aims to ensure that the individual receiving care experiences a "good death". Therefore, nurses must be able to provide comprehensive EOLC so the patients can pass away with dignity. In the need to achieve the goals above, the government of Indonesia has created guidelines for the implementation of palliative care services, which include EOLC services (Ministry of Health, 2023). To carry out these roles, nurses must have EOLC competencies to apply the proper nursing care to patients at the end of their lives (Jeong & Eun, 2020).

EOLC competency refers to the nursing skills and capacities required to provide high-quality care for patients receiving EOLC (Jeong & Eun, 2020). These competencies encompass the knowledge, attitudes, and behaviours that nurses need to deliver EOLC effectively (Montagnini et al., 2021). Having EOLC skills enables nurses to address patients' physical, emotional, and spiritual needs and help them fully live the rest of their lives with respect and comfort. The level of competence of nurses plays a crucial role in delivering EOLC as it helps maintain the quality of life of patients and offers emotional support to families. Such support enables families to understand the care process better and prepares them for the grieving journey (Son & Jeon, 2024).

A study conducted by Jeong and Eun (2020) at a tertiary hospital in Korea, involving 150 nurses, found that the participants had an average score of 3.63 ± 0.53 out of 5 for their EOLC competency. Meanwhile, in Indonesia, the results of a literature review conducted by Ariyanto et al. (2022) found that nurses' knowledge of palliative and EOLC patient care was relatively low. Meanwhile, nurses' attitude toward providing palliative care and EOLC in Indonesia was good. To sum up, this result still showed inconsistency regarding nurses' level of EOLC competency.

In the provision of EOLC, nurses often face high emotional demands as they have to deal with the suffering of patients and families facing the end of life, as well as with grieving families (Cho & Cho, 2021). Prolonged exposure to heavy emotional situations can lead to professional burnout in a person, which is often associated with the term CF (Mishra et al., 2020). CF is an adverse condition that arises in the care profession when individuals are mentally, emotionally, and physically affected by the high-stress experiences of the people they help. This condition arises when nurses take on the pain and suffering of others while offering support (Mishra et al., 2020). Across 14 hospitals in South Korea, it was revealed that nurses working in palliative care and hospice units experienced a significantly high level of CF (Cho & Cho, 2021). Similarly, research conducted in Indonesia indicates that nurses in the Emergency Department are particularly vulnerable to CF due to the high levels of stress they face (Sulistyo et al., 2022). Also, based on research conducted by Prayogo and Ariana (2023) among hemodialysis nurses in Indonesia, the score of CF experience by nurses is within the burnout and secondary traumatic stress categories, ranging from 33.6 to 74.4, with an average of 50. This indicates a relatively high level of CF in Indonesia.

A study conducted in the USA found that critical care nurses were at risk for CF. This condition is characterised by a reduced ability to empathize and provide care, often resulting from extended exposure to stress and the demanding patient care situations commonly encountered in intensive care units (ICUs) (Storm & Chen, 2021). This can lead to the loss of opportunities for healing, making it

difficult for nurses to do their job better. Once CF sets in, the possibility of recovery diminishes, as all the nurse's compassionate energy is depleted (Zhang et al., 2018).

Previous research by Seo and Yeom (2022) identified a relationship between nurses' EOLC competency and physiological burnout in caring for terminal patients revealed a negative correlation between EOLC competency and psychological burnout, indicating that a lower level of EOLC competency was associated with a higher level of psychological burnout. This finding is significant because burnout in nurses can reduce care quality and diminish their empathy toward patients. Meanwhile, studies in both Indonesia and other countries consistently report high levels of CF among nurses, especially those providing care in high-stress settings. In Indonesia, although nurses' attitudes toward palliative and EOLC are generally positive, their knowledge remains relatively low, leading to inconsistencies in overall EOLC competency. Given this gap, researchers are interested to do research is there any relationship between EOLC competency and CF among nurses in Indonesia.

1.2 Problem Statement

EOLC refers to the palliative or supportive care given to patients who are approaching the end of life, where the focus of treatment shifts from extending life to enhancing the quality of life (McQuade, 2024). Nurses play a crucial role in delivering comprehensive EOLC, ensuring that patients can die with dignity. Thus, nurses must possess EOLC competencies to provide the appropriate care for patients nearing the end of life. However, research revealed that nurses had a low level of EOLC skills or competencies.

Moreover, in delivering EOLC, nurses frequently encounter significant emotional challenges which is often linked as CF. Studies have found that nurses are susceptible to CF due to the high level of stress they experience. If nurses experience CF at their workplace, it will negatively impact the sustainability of the care provided or the nurse's profession (Zhang et al., 2018). Finally, research on

this topic has not been conducted in Indonesia, making the researcher interested in studying the relationship between EOLC and CF among nurses in Indonesia.

1.3 Aim of The Study

- 1) Identify the demographic characteristics of respondents (age, gender, having attended an end-of-life seminar, level of education, work unit, and workplace region).
- 2) Identify the distribution of EOLC Competency among nurses in Indonesia.
- 3) Identify the distribution of CF: BO and STS among nurses in Indonesia.
- 4) Identify the relation between EOLC competency and CF among nurses in Indonesia.
- 5) Identify the relation between EOLC competencies with BO and STS among nurses in Indonesia.

1.4 Research Question

Is there a relationship between EOLC competency and CF among nurses in Indonesia?

1.5 Research Hypothesis

H₁= There is a relationship between EOLC competency and CF among nurses in Indonesia.

1.6 Research Benefits

1.6.1 Theoretical Benefits

This research is valuable for gaining insight into the relationship between (EOLC) competency and CF among nurses in Indonesia and can serve as a reference for understanding how these factors relate to nurses in the country.

1.6.2 Practical Benefits

1) For Nurses

This research encourages nurses to prioritize the development of EOLC competencies, particularly in shaping positive attitudes. By engaging in training, self reflection, seeking support, nurses can reduce CF and improve emotional resilience, confidence, and their ability to manage EOLC related stress effectively.

2) For Educational Institutions

This research aims to inform educational institutions about the importance of integrating emotional and psychological components into nursing curricula. Emphasizing case studies, reflective practices, and communication techniques will better prepare students and support practicing nurses through ongoing professional development opportunities.

3) For Hospitals

This research serves as a valuable reference for hospitals aiming to improve end-of-life care outcomes by supporting nurses through team-based approaches, psychological support services, and regular EOLC training. Establishing policies that promote positive attitudes toward EOLC can enhance care quality, reduce CF, and increase job satisfaction.

4) For Next Researcher

This research highlights the need for future studies to explore further investigation into cultural and geographical variations in EOLC practices, as well as the effects of EOLC training on nurses' well-being and care quality, will contribute to evidence based improvements in nursing practice.