Establishing Palliative Nursing Organization to Foster Palliative Care Literacy and Services in Indonesia: An Embedded Mixed Methods Study

ABSTRACT

Background and Objectives: The proactive activities of professional organizations have significantly contributed to improving nurses' knowledge related-specialty in order to improve health care services quality offered by nurses. Since the palliative care improvement and development in Indonesia remain still in their infancy, and the organization of palliative care for Indonesian nurses has not been established yet, it is imperative to investigate the Indonesian nurses' viewpoints concerning the importance of establishing a palliative nursing organization in fostering palliative care services in Indonesia. This study aimed to identify what kind of palliative care related activities are carried out by Indonesian nurses and what are the perspectives of nurses regarding the importance of establishing palliative nursing organizations in Indonesia.

Materials and Methods: A national study was conducted using an embedded mixed-methods design, for which the quantitative and qualitative data were collected and analyzed in the same time period from October – December 2020.. Results: There were a total of 552 (92%) respondents who participated through WhatsApp, and Telegram platforms, and completed our online survey. There were four themes and nine sub themes found in this study: namely, services improvement (quality improvement, and literacy improvement sub themes), human resource development (knowledge development, individual nurse development, and professional development sub-themes), boarding and information source (boarding, and information source sub themes), and policy and legality (policy, and legality sub themes).

Conclusion: While barriers exist, respondents confirmed the importance of establishing an Indonesian palliative nursing organization. Establishing a palliative nursing organization could be an important step in developing palliative care in Indonesia.

Paper Type: Research Article

Keywords: Clinical competence, Literacy, Nurses, Palliative Care, Policy.

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Introduction

Establishing and developing quality palliative care in Indonesia will involve a long journey that requiring significant implementation and development efforts. Nonetheless, the development of palliative care services remains still in its infancy. Initiating these palliative care services was started since 1992 by a group of multidisciplinary professions comprised of medical doctors pharmacists who began addressing pain management among cancer patients (1). In 2007, the government under the auspices of the Indonesian Ministry of Health declared The National Regulation of Palliative Care Services to be made available both in hospital and primary health care settings with number decree 812/ Menkes /SK/VII/2007 about Palliative Care Policy (2).

Indonesia is known as a multicultural country where there are more than 200 ethnic groups, with a population of more than 260 million people, including various religious groups, both majority and indigenous religions, heterogeneous societies cultures, as well as inter-island health facilities. Furthermore, Indonesia has a high prevalence of non-communicable diseases (NCDs) such as cardiovascular diseases (CVD), cancer, chronic obstructive pulmonary disease (COPD), chronic kidney disease (CKD) and others, so that palliative care services are considered essentially important (3). The lack of awareness of these important palliative services and stagnation in treating other acute and chronic conditions including comorbid communicable diseases such as tuberculosis (TB), human immunodeficiency virus (HIV), acquired immune deficiency syndrome (AIDS) and malaria, among others

have contributed to formidable obstacles in providing palliative care services (4).

The progress of palliative care in Indonesia has been slow and varied across the country (5). Currently, palliative care services are mostly only implemented in the big cities where cancer treatment centers are located. Additionally, palliative care services in many hospitals are unavailable due to resource barriers (3).

Nowadays, patients seek healthcare services when they are already in the advanced stages of their disease. For example, in most oncology wards, more than 65% of the patients with cancer visited the hospital when they were already in the advanced stage of cancer (4). Meanwhile, there are limited healthcare providers trained in palliative care (6). Therefore, it crucial to disseminate and educate more proactively about palliative care not only to the healthcare providers but also people in the community.

The limited knowledge about palliative care among healthcare professionals including nurses is recognized as one of the main barriers to the provision of palliative care in Indonesia (7). One recent study found that the majority of nurses had low scores on palliative care knowledge, with only 7.3 ② 3.3 out of a possible score of 20 (8). The study findings were similar to a Jordanian study that indicated poor knowledge may be correlated to palliative care status within the countries studied (9).

It is challenging for Indonesian nurses to make improvements in their competencies in the provision of palliative care services, while in some other countries, for example, in the United Kingdom (UK), there are palliative care

nurses, also known as Macmillan nurses. These palliative care providers recognized since 1970 when they performed their role as nurses who have responsibilities for caring directly for terminally ill patients and their families. Over time, the roles were changed to include clinical, educational, and consultative, research and supportive functions (10). Until now, in many places around the world, these palliative care nurses also act as a coordinator and liaison between the patient and their family, other health professions and between different healthcare services (11).

In order to rapidly expand and develop palliative care in Indonesia, it is important for Indonesian nurses to form organizations that can play a very important role in developing palliative care in Indonesia and technically in improving the competence of nurses in palliative care.

During the recent pandemic, many patients with severe COVID-19 had distressing symptoms such as breathlessness and agitation (12), and the palliative care services will provide and improve access to essential medicine, particularly opioids to alleviate breathlessness and pain-related symptoms (13). Accordingly, the palliative care nurses' role also expanded and extended to caring for the patients with COVID-19. Moreover, since the task force announced the redefinition of consensus-based palliative care, it is defined as an active holistic care for individuals across all ages with seriousrelated suffering due to severe illness (14). Through the simplified definition, the palliative care nurses' role was more expanded and shifted not only for patients with malignancy and organ failure but also

among the non-communicable and genetic diseases (14).

Therefore, it is crucial to improve the quality and quantity of palliative care services in Indonesia. There are some concerns which should be considered such as training for healthcare professionals, provision palliative education, and establishing care involving healthcare organizations in palliative care programs (4). The advancement of nurses' knowledge is one of the responsibilities of nursing organizations (15). The organization has a central role in supporting the various practices of nurses, and advocating for nurses' clinical role expansion (16). Furthermore, professional organizations also contribute to socialization and engagement, facilitate networking and mentoring, provide leadership in research and evidence translation, and are essential in delivering ongoing professional development opportunities (17).Through these organizations, the creation of a proactive organizational culture that strengthens and supports nurses is another important point to foster nursing care development (18). Besides that, the organization also has the chance to link activities with macro-level policy, funding and infrastructure (16).

The formation professional of organizations has demonstrated their contribution in improving nurses' knowledge related-specialty in order to improve health care services quality offered by nurses. Since palliative care improvement development in Indonesia are still in their infancy, and the organization of palliative care for Indonesian nurses has not been established yet, its crucial to investigate the Indonesian nurses' viewpoints concerning the importance of establishing a palliative nursing organization in fostering palliative care services in Indonesia.

In order to address the phenomenon above, we applied the research questions that what kind of palliative care-related activities are experienced by Indonesian nurses? And what are the perspectives of nurses regarding the importance of establishing a palliative nursing organization in Indonesia?

Materials and Methods

Type of the Study

A national study was conducted using an embedded mixed-methods design, in which the qualitative data were collected using open-ended questions included in a survey questionnaire.

Participants and Setting

Due to the outbreaks of COVID-19, we collected the data using online methods. There were two social-networking applications used to share the questionnaire with potential participants, namely WhatsApp, and Telegram. About 600 eligible participants from 34 provinces were invited to the study since they voluntarily joined our palliative forum initiation social media groups either WhatsApp on or Telegram (https://t.me/joinchat/TGWGrV2aMilVRxmD). The questionnaire was also distributed through private channels and group channels other social-networking apps. participants who filled in the questionnaire also answered the open-ended questions as research questions.

Inclusion and exclusion criteria

Consecutive sampling was used in this study with the following inclusion criteria: Being nurses who are living and staying in Indonesia, being 21 years old, being familiar with receiving information, and using communication technology devices (such as mobile phones, computers neither desktops nor laptops), and agreed to participate in the study by clicking the survey link and completed the questionnaire. Indonesian nurses who were living and staying overseas during the time the study was conducted were restricted from participating.

Measurement Instrument

In this study we used a brief questionnaire with basic questions consisting of two parts divided into the first section with 18 questions including socio-demographics, experiences in palliative care related activities, and organization needs and the last section of the questionnaire, which were two open-ended questions regarding the importance of establishing a palliative nursing organization.

Socio-demographics variables included age (in years), gender, and region of current residence, educational background, and employment status. The region of current residence was categorized into six groups, "Sumatera," "Jawa," "Bali and Nusa Tenggara," "Kalimantan," "Sulawesi," and "Maluku and Papua/Papua Barat." The education question indicated the highest level of schooling attained, and was classified "diploma," into three groups, "postgraduate." "undergraduate," and Employment status was assessed, by asking the role in the current workplace. The employment status was classified into four "lecturer," groups, "clinical nurse (practitioner in hospital setting)," "researcher," "community and nurse (practitioner in primary health care or community setting)." Each participant was allowed choosing more than one role. The experiences in palliative care-related activities were assessed by asking about participant's experiences in attending seminars, conferences, doing teaching, doing research and delivering services on palliative care.

The last section involved open-ended questions about palliative nursing organization needs: 1) "How important do you think palliative care is in caring for NCD/terminally ill patients?", and 2) "In your point of view, is the Indonesian palliative nurse association needed in recent times and what will be the benefits? Please explain your opinion clearly!"

Data Collection

Both quantitative and qualitative data were collected using G-form. The questionnaire was divided into two parts. The first part involved questions to collect quantitative data and at the end of the questionnaire, participants were asked to complete the open-ended questions in order to get deep information about nurses' perspectives on the importance of the organization of palliative care in supporting clinical practice particularly in caring for patients who suffer from incurable NCDs. The report of the current study was guided by the Good Reporting of a Mixed Methods Study (GRAMMS) checklist.

Data analysis

In this study, we performed data analysis separately between quantitative and qualitative data. The quantitative data were analyzed using descriptive statistical analysis such as frequency, percentage, mean, and standard deviation (SD). Distributions of

socio-demographic characteristics care-related experiences palliative in activities among participants were analyzed using the Chi-square test. Meanwhile, the qualitative data were analyzed using thematic analysis. For the purpose of publication, quotes were translated into English by an expert translator. Trustworthiness of the qualitative data performed analysis was using peer debriefing. The connecting analysis was performed between qualitative and quantitative results to integrate both aspects of quantitative and qualitative data.

Ethical consideration: This study was initiated by the Department of Medical-Surgical Nursing, Faculty of Medicine, Public Health and Nursing, Universitas Gadjah Mada, Yogyakarta, Indonesia in collaboration with Universitas Sembilanbelas November Kolaka, Sulawesi Tenggara. This study was approved by the "Health Research Ethics Committee of Ikatan Ahli Kesehatan Masyarakat Indonesia Provinsi Sulawesi Tenggara," with number decree (138/KEPK-IAKMI/XI/2020). The eligible participants received information about the purpose of the study and the entire information about the questionnaire, and they were asked to answer the yes-no question of their willingness to participate voluntarily in the study. Confirmation to agree to be a participant was followed by the fulfillment and completion of the self-reported questionnaire. All collected data were anonymous.

Results

Socio-demographics

This study invited 600 eligible respondents and a total 552 (92%) of respondents

participated through WhatsApp, and Telegram platforms, and completed our online survey between October and December 2020. The age range of the participants was 20-64 years-old, with the majority of participant (69.6%) in age group of 30-49 years old, 67.1% are women. 44.7% live in Java, 44.8% hold postgraduate degree, and 53.3% are clinical nurses (Table 1).

The participants who are age >50 years old were employed predominately as lecturer, while the Indonesian employment regulation sets 65 years old as retirement period for lecturer. There were nearly 9% (>50+) of these participants recruited who were mostly a lecturer.

The experiences of nurses in palliative care related activities

The majority of participants are really interested in learning about palliative care, and enthusiastic for participating in the events about palliative care (both seminars and conferences), which accounted for around 97.6%, and 96.5%, respectively. More than a half of participants have experience in participating in seminars and conferences about palliative care issues, with 75.1% and 52.5%, respectively. More than 70% of the participants have no experience in attending palliative care related education or courses. Interestingly, around 41.7% of participants were delivering teaching in palliative care. Also, 8.8% of them have written a palliative care book. Furthermore, 35.8% of participants have experience in conducting research in palliative care-related topics, and predominantly the study focus was on palliative care for adults (27.3%), and palliative care for patients with cancer (24.9%) (Table 2). Meanwhile, the issue that was the least explored was palliative care policy (6.1%). There were 79.4% of the participants experienced in delivering nursing care for patients who need palliative care services, and most of the patients were malignancy cases. Additionally, there were around 75% of nurses who have experience in taking care of patients in their dying stages of life.

Table 1. The socio-demographics characteristics of participants (n=552)

Characteristics	Participants				
Characteristics	n	%			
Age in years (Range 20-64),					
Mean \pm SD (36.87 \pm 8.47)					
20-29	119	21.9			
31-49	388	69.6			
>50+	45	8.5			
Gender					
Male	182	32.9			
Female	370	67.1			
Region of residence					
Sumatera (10 Provinces)	79	14.3			
Jawa (6 Provinces)	247	44.7			
Bali and Nusa Tenggara	35	6.3			
(3 Provinces)		0.5			
(2					
Sulawesi (6 Provinces)	129 23.3				
Maluku and Papua 40 7.4		7.4			
(4 Provinces)		7.4			
Educational background					
Diploma	123	22.4			
Undergraduate 15		28.8			
Postgraduate 270 48.					
The role in work place*					
Lecturer	284	51.5			
Clinical Nurse	295	53.3			
Researcher	239	43.3			
Community Nurse 83 15					

^{*}each respondent could answer more than one role.

Table 2. Nurses self-report about palliative care (PC) related activities (n=552)

Palliative Care Related	Partici	pants		
Activities	n	%		
Learn about palliative care				
Yes	540	97.8		
No	12	2.2		
Participating palliative care ever	nt			
Yes	534	96.7		
No	18	3.3		
Attending palliative care confer	ences			
Never	262	47.6		
1-5 times	272	49.2		
6 – 10 times	8	1.4		
> 10 times	10	1.8		
Attending palliative care semina	ir			
Never	137	25		
1 – 5 times	350	63.4		
6 – 10 times	43	7.7		
> 10 times	22	3.9		
Attending palliative care course				
Yes	156	28.2		
No	396	71.8		
Involvement in palliative educat	ion			
Teaching palliative care topic	231	41.8		
Writing book about palliative care 49 7.				
Writing module of palliative care	131	23.7		
Speaker in palliative care conference	41	7.4		
Speaker in palliative care seminar	90	16.3		
Doing research in palliative care				
Yes	197	35.7		
No	355	64.3		
Research area conducted* (n=1	.97)			
Pediatric PC	41	20.8		
Adult PC	151	76.6		
Addit FC				
		34.5		

138	70				
Family caregiver 89 45.2					
PC policy 34 17.2					
Caring for patients who need PC					
439	79.5				
113	20.5				
Caring for patients with* (n=439)					
Malignancy/ cancer 325 74					
Non malignancy/non cancer 155 26					
Having experience in caring patient in the end					
of life or in dying.					
Yes 415 75.					
No 137 25.0					
Considering the important of palliative nurse					
association in Indonesia					
Highly important 545 98.73					
Important 7 1.27					
	89 34 439 113 9) 325 155 cient in the state of the				

^{*}each respondent could answer more than one topic or patient for caring.

Socio-demographics and the experiences in palliative care related activities

This study analyzed the socio-demographics of respondents and their experiences in palliative care related activities such as willingness to engage in palliative care education and to learn about palliative care, conducting research on both an individual or group basis, attending seminars or workshops, and delivering health care services by actively being involved in caring for patients with palliative care needs (Table 3).

The statistical analyses by applying chisquare test show that educational background has strong positive correlations to participants' engagement to learn about palliative care (p-value = < 0.05). All characteristics such as age of participants, educational background, and the role in workplace (lecturer, clinical nurse, and nurse

researcher) were found to have significant correlation to participating and doing research on palliative care topics (p-value = 0.005, <0.001, <0.001, <0.001, <0.001, respectively). Meanwhile, there were no characteristics significantly correlated to participating in palliative care events and seminars. Further, educational level and the role in workplace such as lecturer, clinical nurse and researcher nurse have significant correlations to delivering care for patients in palliative care setting (p-value = 0.002, 0.001, 0.000, 0.002, respectively).

Nurses' perspectives on the importance of establishing a palliative nursing organization and its benefit

There were 98.73% of participants who thought that considering the current situation, the formation of a palliative nurse association in Indonesia is highly important, while the rest also deemed this as important (See Table 2). The qualitative data were analyzed using thematic analysis. There were four themes and nine sub-themes found in this study: namely, services improvement improvement, (quality and literacv improvement sub-themes), human resource development (knowledge development, individual nurse development, and professional development sub-themes), boarding and information source (boarding, and information source sub-themes), and policy and legality (policy, and legality subthemes) (Table 4). There were 672 quotations collected from 552 participants, and they were analyzed and classified according to data coding, sub-themes, and themes basis. Predominantly, the quotations were related to the boarding and information, and human resource development themes, which

accounted for 321 (47.8%) and 226 (33.6%) out all quotations, respectively.

In this study, researchers implemented a six-step thematic analysis from Braun and Clarke that familiarizing the data, generating initial codes, searching for themes, reviewing themes, defining and naming themes, and producing the report (19). This study identified four themes divided into nine subthemes describing the importance of establishing a palliative nursing association in fostering palliative care services in Indonesia.

The themes are health services human improvement, resources development, institutional board and information sources, and policy and legality (See Table 4). The institutional boards and information sources theme was the most likely suggested and needed, and accounted for as many as 321 quotations. It was followed bv the human resources development theme, which accounted for 226 quotations out of 672 participants' Then. health auotations. services improvement, and lastly, the policy and legality themes. The details of these quotations which represent the themes are as follows;

Theme 1. Services Improvement

"Every human being has the right to get maximum care even at the end of his life. In addition, the prevalence of chronic cases (cancerous or non-cancerous) is increasing. Therefore, palliative care service is urgently needed to maintain the patient's quality of life" (P11, M, 28yo, PG).

"In order to be more coordinated, both scientific updates, clinical practice of palliative care and to further improve the quality of services in palliative care" (P.535, M, 41yo, UG).

Theme 2. Human Resources Development

- "..In order to enhance of nursing knowledge in palliative care and developed the capability of nurses in caring for patients who need palliative care" (P.53, F, 37yo, PG)
- "..To accommodate activities related to palliative care such as seminars, training, research, and related activities to improve the quality of life of palliative patients" (P.333, F, 28yo, PG).
- "...So that nurses understand more about providing palliative care ..." (P.480, M, 53yo, Dipl).
- "..So that nurses play an active role in caring for the nation and be recognized as health professionals that can work together with other health workers" (P.308, M, 30yo, UG).

Theme 3. Institutional board and information sources

"Palliative nursing is still something new in Indonesia, so it needs an organization to protect it" (P.169, F, 35yo, PG).

- "..Because the number of palliative cases themselves from year to year has increased very significantly, so that a forum such as Forming an Association is needed to be able to develop or update the latest knowledge about palliative so that it can be useful for the community" (P.517, F, 37yo, PG).
- "..With this association, nurses who are practitioners/academics can share knowledge updates about the latest palliative care, because palliative patients are increasing day by day and an association or forum is needed for nurses who are interested

in this palliative care field to be able to further add their knowledge". (P.445, F, 30yo, UG)

Theme 4. Policy and legality

"Support the professional development of nurses who work or have an interest in palliative care; encourage the development of integrated palliative care implementation policies and strategies" (P.64, F, 39yo, PG).

"As a legal and national-scale palliative nursing forum so as to facilitate the development of palliative nursing science through research and other scientific studies" (P.326, M, 30yo, PG).

"..For legal umbrella and scientific development of palliative care" (P.208, F, 40yo, PG).

In this study, the results showed that both quantitatively and qualitatively, the participants seriously considered the importance of palliative nursing organizations in Indonesia. With this organization, there can be a forum for nurse clinicians, communities and academics to contribute to the development of palliative care in a more unified effort to meet the needs of palliative care for patients in need.

Discussion

We conducted further analysis based on the socio-demographics data, and we are eager to investigate and learn about the experience and perspectives of nurses who are precisely engaged in the implementation and teaching of palliative care. The results of this study show that participants' willingness to learn about palliative care is strongly positively correlated with their educational background. We believe that nurses who have completed more schooling are more eager to learn about new nursing specialties.

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Table 3. The experiences in palliative care related activities based on participant's characteristics (n=552)

	2							20110110101	1 222 :			
	9	learnt PC		Doing Research in PC	arch in PC		Involve in PC	in PC		Caring PTs PC	PTs PC	
Characteristics	i		p-value	9		p-value	event/seminar	minar	p-value	9	2	p-value
	Interest	Uninterested		Yes	No		Yes	No		Yes	No	
Age in years (Range 20-64)												
20-29	118 (21.9)	1 (0.2)	0.248	28 (5.1)	91 (16.6)	0.005*	116 (20.9)	3 (0.7)	0.337	90 (16.4)	29 (5.2)	0.473
30-49	377 (68.1)	11 (2)		154 (27.8) 234 (42.2)	234 (42.2)		373 (67.3)	15 (2.7)		312 (56.3) 76 (13.7)	76 (13.7)	
20+	45 (8.3)	0		15 (2.9)	30 (5.4)		45 (8.3)	0		37 (6.7)	8 (1.6)	
Educational background												
Diploma	115 (20.9)	8 (1.4)	0.001*	14 (2.5)	109 (19.9)	<0.001*	<0.001* 115 (20.8)	8 (1.6)	0.070	96 (17.5)	27 (4.9)	0.002*
Undergraduate	159 (28.7)	0		22 (4.0)	137 (24.7)		155 (28.0)	4 (0.7)		141 (25.5)	18 (3.2)	
Postgraduate	266 (48.2)	4 (0.7)		161 (29.2)	109 (19.7)		264 (47.8)	6 (1.1)		202 (36.5)	68 (12.5)	
The role in work place\$												
Lecturer (n=285)	280 (50.7)	4 (0.7)	0.164	158 (28.7)	126 (22.7)	<0.001*	158 (28.7) 126 (22.7) <0.001* 277 (50.2) 7 (1.3)	7 (1.3)	0.199		210 (37.9) 74 (13.5) 0.001*	0.001*
Clinical Nurse (n=296)	288 (52.2)	7 (1.3)	0.483	70 (12.6)	225 (40.8)		<0.001* 284 (51.3)	11 (2.2)	0.338	270 (48.9)	25 (4.5)	*000.0
Researcher (n=240)	235 (42.6)	4 (0.7)	0.346	143 (26.0)	96 (17.3)	<0.001*	<0.001* 233 (42.2)	6 (1.1)	0.269	176 (31.8)	63 (11.6)	0.002*
Community nurse (83)	82 (14.8)	1 (0.2)	0.440	24 (4.3)	59 (10.6)		0.100 81 (14.6)	2 (0.4)	0.475	66 (11.9)	17 (3.1)	0.550

^{*}significantly different with p-value < 0.05. $^{\$}$ each participant could have more than one role. PC= palliative care; pts= patients.

Table 4. The thematic analysis results

Themes	Sub Themes	Coding
	Quality	Participation in development of health services
Comicos	improvement	Improving quality of PC services
Services Improvement Education improvement	Improving education for family	
	Holistic care	
	Address public needs in health	
Sciences development	Calamana	Improving and developing science especially on PC
	To facilitate sciences	
	Improving the understanding of nurses and practitioners	
	Individual	Improving PC competencies
	nurses'	Improving nurses' capabilities
Human	development	Improving nurses' awareness
	Resources	Improving professionalism among nurses
Development	Sharing Knowledge for update	
	Professional	Profession Needs
	development	Equality of role
Institutional board and information sources Information sources Policy and		To specify the field in nursing
		Improving nurses' role
		Board for sharing, developing and coordinating
		Needs
	Organizational board	
	Supporting for National organization level	
	Collecting aspiration among nurses who have similar interest	
	Networking	
		To accommodate and facilitate for profession development
		Acceleration of development for PC
	lf	To Disseminate services to public
		Update for information and science
	sources	References for newest issues in PC
		Supporting and proposing policy
	Policies	Supporting for board
		Facilitate for PC services improvement
legality		Accommodate for profession development
	Logolitu.	Law for board
Leg	Legality	Formal Legality

Our findings also show that there is a substantial association between conducting research on palliative care concerns and the age of participants, their educational background, and their job in the workplace, such as lecturer, clinical nurse, and nurse researcher. The primary responsibility of most of the older nurses in that group, who hold higher positions, may have an impact on the findings. The Indonesian government recently published a legislation requiring upper-class nurses to perform research and publish their findings in a national publication. Furthermore, providing care for patients in a palliative care context is significantly correlated with educational attainment and job roles such as researcher nurse, clinical nurse, and lecturer. Palliative care nursing has been a required subject for bachelor's and master's degree programs in Indonesia since 2015, as results nurses more aware and skilled to provide palliative care services.

To the best of our knowledge, this is the first study in Indonesia investigating the Indonesian nurses' viewpoints concerning palliative nurses' association needs as a professional organization in order to foster palliative care services and continuing education in Indonesia.

The increasing prevalence of serious lifethreatening illness year by year has forced nurses, who work in that setting, to become better trained in order to improve nurses' palliative care skills. In the United States of America (USA), about 80% of patients with serious illness who die need palliative care services, however, only a 50% of the patients who are hospitalized receive the palliative care they need (20). This trend of neglect was

also found in Indonesia by a study which investigated the prevalence of patients in hospital settings who need palliative care. Remarkably, the study results reported that nearly 62% of patients with NCDs require palliative care (21). These important findings inform about the current status of palliative care in Indonesia and indicate the need to urgently initiate palliative care training to health care professionals including nurses. In comparing the USA and Indonesia related to health care systems and organizational support in palliative care, most of the palliative care services in America are already nationally offered and some professional organizations were well established including the establishment of the Hospice and Palliative Nurse Association (22), while in formal Indonesia the services and organization are still in their infancy and in a time of formative discussion. In the research conducted by Afolabi and colleagues, they point out that professional organizations could contribute to prepare well-motivated healthcare workforces in order to meet the continuous and changing demands of health care services including palliative care provision (23).

Canadian scholars conducted a qualitative study that focused on the effect of organizations nurses' continuing on professional education and development (24). The study results reported that organizations addressed the lingering issues of de-professionalization of the nursing profession and challenges related to transfer Besides knowledge. that. organizational factors were also identified as having formidable effects on the motivation and retention of healthcare employees such

as nurses. The healthcare organizations and professional organizations need to recognize the importance of continuing education and career development. Both of them are important motivating factors to healthcare professionals since they equip employees with the knowledge to perform their duties optimally (23).

From the perspective of internal factors, the motives seem likely to reflect the increased importance aspect which is influencing nurses' participation both for planning and carrying out continuing professional development (CPD) activities (25). However, exactly how the degree of importance is related to the specific CPD was influenced by the occurrence of personal and professional motives, which depended in part on the way CPD conditions were perceived.

Three domains including personal or individual, organizational and community are the elements of an interactive conceptual model for health workforce and health services represented as a cycle of concern and cycle of influence, while the relationship between these domains was tensioned in personal concerns and professional influences (26). As a professional, nurses have a duty to support their other colleagues in order to dignify the profession such as helping others, guiding new colleagues, all informed keeping them about conferences, seminars or training courses (27). Furthermore, a multipronged study was conducted which aimed at evaluating the impact of CPD activities on clinical behavior intentions among health professionals. The CPD activities may contribute to a behavioral sea change and improve the capacity of the health professionals including nurses to

predict their performance (28). As an international organization, the Pan American Health Organization (PAHO) has contributed to improve palliative care services on the American continent and surrounding neighbors through providing education and training for healthcare workers at all levels, to make collaborations to inter-institutional efforts at the national, regional, and global levels. Further, the PAHO also has access to high levels of the governments and is be able to assist in the modification of public policy (29).

In the Indonesian context, the Indonesia National Nurses Association (abbreviated in Bahasa as PPNI) issued the regulation about CPD activities including seminars, workshops, and training in which only a legal nurse professional organization both in general and specific concern can offer and deliver these activities. Since 2007, the Ministry of Health of Republic of Indonesia announced the decree about palliative care services in Indonesia (2). However, the improvement of palliative care services in both public/state and private hospitals, and primary health care was left behind. Interestingly, one state university already offered weekly seminars since the government issued regulation working from home due to COVID-19 outbreaks. In order to improve the professional capability among Indonesian nurses particularly who have the eagerness and willingness to upgrade and enhance their capability in the palliative care field, they still need other CPD activities beyond attending seminars such workshops, training and/or continuing education courses (30). As Schoo and colleagues point out, organizational and professional developments can be reached by

associative relations which allow the professionals to share common interests and work collaboratively (26). Besides that, in order to assess nurses' capability, they need to attend formal credentialing classes which only formal organizations can hold and facilitate. It is therefore likely that improvement in palliative care for health care professional's especially nurses will be achieved when a formal organization is established and runs these projects to achieve sustainable organizational goals in which in line with the Ministry of Health 812/Menkes/SK/VII/2007 Decree about Palliative Care Policy.

Study Limitations and Strengths: This study provides valuable information to help understand the important of establishing the professional organisation especially palliative care nursing in order to foster palliative care literacy among nurses and other healthcare professionals, and palliative care services both community and hospital setting. From the results of this study, it can be shown which nearly all participants consider that palliative care nurse association in Indonesia is highly important. This study evolved nurses from all over the provinces within the country. domains of health literacy require attention in order to increase the level of literacy so that patients can make the right decisions in their treatment. And also, this study links educational background that strong positive correlations participants' engagement to learn about palliative care, to participating and doing research on palliative care topics. However, there are some weaknesses to this study. This study conducted by using g-form and shared throughout social media apps, thus most participants recruited from urban and semiurban areas where the internet access more supported. While the nurses from remote and rural areas were less participated due to the lack of internet access.

Conclusions

According to our national study, in order to increase the demand for palliative care services and improve nurses' understanding palliative care in Indonesia, establishment palliative of nursing organization emerged as a prerequisite for becoming a formal board and legacy. Continuing nurse education and training in palliative care are direly needed; therefore, establishing a palliative nursing organization could be considered one of the important steps in developing palliative care in Indonesia.

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Ethical approval and consent to
participate: The study was conducted in
accordance with the Declaration of Helsinki.
This research has been approved by Health
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