



Research Article

Volunteers' Experience as a First Responder to Traffic Accidents

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Abstract

One of the primary services at the physiotherapy clinic of UMM Hospital is post-stroke rehabilitation. The hospital is fully equipped with the infrastructure that supports these services, including the availability of static cycles, IR, and diathermy. Post-stroke rehabilitation services have been conducted since June 2013, however, since the establishment of the clinic, levels of patient satisfaction have not been evaluated. Assessment of client satisfaction is important because, in the future, the clinic will be a place of reference for physiotherapy students about post-stroke rehabilitation and providing excellent service to clients. This study used the SERVQUAL (Service Quality) method which involves the assessment of the aspects of tangibility, reliability, responsiveness, assurance, and empathy, to assess the level of patient satisfaction with different services. The study was conducted on all patients who come to the clinic between March and May 2015. The sample size was 20 patients. We identified the patient's expectations and perception of clinic physiotherapy at the clinic and compared it to the results of the SERVQUAL performance assessment. Based on the results of the study, it was found that the majority of respondents were unsatisfied with the services at the physiotherapy clinic, due to the limitations of the physiotherapists' abilities, long waiting times for services, and lack of on-call physiotherapists. In addition, there are patient complaints about the lack of equipment at the clinic. However, patients were very satisfied with the safety and comfort of the therapy services, this is influenced by the abilities of qualified physiotherapists who are able to resolve complaints We suggest that the clinic needs to increase the number of physiotherapists in this clinic, and it is necessary to make updates to the existing physiotherapy equipment.

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1. INTRODUCTION

The increasing morbidity and mortality due to emergencies in KLL cases is the basis for optimizing emergency services both prehospital and in the hospital. (1) stated that the number of accident mortality can be reduced to 50% if the daily emergency management system can function properly, especially emergency management in prehospital. Providing proper and rapid prehospital care can reduce the rate of disability and death due to trauma.

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In this regard, a Regulation of the Minister of Health of the Republic of Indonesia No. 19 of 2016 was made which explained that the efforts that can be made are through the establishment of an integrated and integrated handling system involving various parties from various multidisciplinary professions by utilizing call center services 119. This system is referred to as the Integrated Emergency Management System (SPGDT) (2)

To realize the implementation of SPGDT, a National Command Center has been established which is domiciled at the Ministry of Health in Jakarta, and a Public Safety Center (PSC) domiciled in regencies/cities. In its implementation, the NCC serves as a provider of information and guidance on the handling of emergency cases. Meanwhile, PSC has the function of providing fast services to emergency victims through the triage process, first aid guides, victim evacuations, and organizing with health service facilities (2)

The development of PSC in Indonesia has started in 2016. In its operational activities, PSC involves various sectors: the health service, police, firefighting, regional disaster management agency (BPBD), national search and rescue agency (BASARNAS), and the community. The power regulated in Permenkes No. 19 of 2016 in the implementation of PSC consists of coordinators, health workers, call center operators, and other personnel. Other personnel in this case are those who support the implementation of the PSC. The limited number of PSC personnel in Malang City is not comparable to the prevalence of KLL that occurs in Malang City. Therefore, the Malang City PSC involves the role of ordinary people, namely through cooperation with volunteers. (3)

In the Malang area, 8-10 volunteer communities have been formed with 20-50 members each and the majority have non-health educational backgrounds. Based on the results of a preliminary study conducted through interviews with members of the volunteer community in Malang, it is said that the volunteer community often encounters KLL cases with a prevalence of 3-5 cases per day. Based on the above exposure to the problem, researchers want to find out more about the experience of volunteers as first responders in traffic accidents.

2. MATERIALS AND METHODS

This study uses a qualitative design of an interpretative phenomenology approach. This research uses a phenomenological approach, namely, qualitative research methods that emphasize understanding the phenomenon from the point of view of the individual who sees the phenomenon and proves the truth about how the individual sees it. This

research was conducted in Malang City, namely in the RJT (Ready Just Target) volunteer community. This location was chosen because based on the sources of information obtained by this community, it often helps KLL victims. The research time starts from the preparation of the proposal for publication, namely, between September 2020 and September 2021.

The population in this study is all members of the RJT volunteers Samples in qualitative research are called participants with purposive sampling. In this study, the number of participants was around 5-6 people. Participants in this study were RJT volunteers. The inclusion criteria of the partisanship are as follows: (1) RJT volunteers (2) have experience helping KLL victims (3) are willing to become participants by signing informed consent.

There are several data collection methods in qualitative research. In general, the way data is collected can be done in four ways, including observation, interviews/ interviews, tracing or analyzing documents, and audio-visual materials. In this study, data collection will be carried out by interviewing and seeing the expressions of participants. The right interview is used to dig deep into one's life experience

Data analysis in qualitative research is a series of activities to organize, sort, group, code/mark, and categorize them so that a finding is obtained based on the focus or problem you want to answer. Researchers will use the Colaizzi method, namely, researchers completing their analysis by clarifying back to the participants.

The data analysis process is carried out by assessing the picture of the experience in the participant's experience by listening to the interview results and reading repeatedly the results of the conversations that have been typed. Furthermore, the researcher analyzes specific statements and gives meaning according to the objectives of the study; makes a list of specific and meaningful statements that lead to the phenomenon; groups such specific statements into units of meaning or themes.

3. RESULTS

The number of participants in this study consisted of 5 volunteers who had experience in prehospital services. The selection of participants based on inclusion criteria is those who have at least 1 year of work experience, have helped emergency victims in prehospital at least 3x, and are willing to become participants by signing informed consent. Participant demographic data can be seen in table 1.

The table illustrates the participant's demographic data including age, education, and length of work. Participants in the age range of 31-40 years were 2 people, as well as in the age range of 41-50 years as many as 2 people. There was 1 participant in the age

No.	Demographic Data		P1	P2	Р3	P4	P5	Total
1.	Age	21-30 years				$\sqrt{}$		1
		31-40 years		$\sqrt{}$				2
		41-50 years			$\sqrt{}$			2
2.	Education Level	SMP			\checkmark			1
		SMA/ SMK		$\sqrt{}$				3
		DIII						1
3.	Length of Work	<1 year						0
		>1 year	$\sqrt{}$					5

TABLE 1: Participant Demographic Data.

range of 21-30 years. Participants had an average education of SMK (Vocational High School) as many as 3 people, junior high school (Junior High School) as 1 person, and DIII Midwifery as many as 1 person. All participants had a working period of >1 year. (4)

The results of this study are the result of in-depth interviews conducted with participants as well as field notes used during the interview. Data analysis is carried out inductively. Based on the results of data analysis, the following themes were obtained, namely: (1) Using empathy when working, (2) Sincerity in doing tasks to hope for rewards, (3) Loving the work of helping others.

The theme of sincerity in doing tasks to hope for reward is the experience of participants when carrying out emergency services. Sincerity according to the KBBI has the meaning of a clean heart; sincere heart. This theme has three sub-themes, namely appreciating the humanitarian side of the victim, trusting God's reply to what has been done in the PSC, and sincere work. The first sub-theme, namely appreciating the humanitarian side of the victim, means that participants consider that the smooth running of the work carried out depends on the charity of the kindness of the victim being helped. This is expressed by the following statement: (5)

"... I think that if a good person must be God gives you a fast and smooth way but if indeed the person is (not) good, there must be obstacles..."(P1)

"... when I was at the scene of the crime it was already messed up I'm sure this wasn't (not) true this was the patient or his body and the scent in the ambulance kept the aura very different. Once the person is very good it doesn't (not) know either where the clear atmosphere is from the journey until the crime scene gets to the hospital or the morgue or the morgue or until the house is smooth I think. E those are the charities that God shows us and this is real this real I'm talking real why I've experienced such a thing so many times and almost didn't (not) believe..."(P1).

The theme of loving the work of helping others in carrying out emergency services. Loving the work of helping others according to the KBBI has the meaning of using love to help ease the burdens of others. This theme arises from one sub-theme among which works is a call of the heart. Participants were assumed to have had a social spirit since childhood. The desire to help others begins with a call from within and increasingly likes things related to social interests.

Participants provide the following statement:

- "... I like activities that are social..." (P1)
- "... I want to (want to) channel the potential e my social soul I am steady in this PSC..."(P1)
- "... this is the social work that I started to be born probably already formed in a very, very social environment including the late Father also instilling socially in other human beings..." (P3).

4. DISCUSSION

Empathy at work is a participant's experience when carrying out emergency services. This theme contextually means that participants have a mental state that makes a person feel or identify themselves in the same state of feelings or thoughts as other people or groups. The concept of empathy is also included in one of the theories. The caring process that participants showed in this study was by trying to bring their hearts to every service carried out. Watson revealed that each individual has their own uniqueness and gives different responses regarding the conditions they experience, so nurses as nursing care providers need to understand this (6)

Research by Williams et al., (2017) revealed that empathy is a complex and multidimensional thing consisting of affective (emotional) and cognitive aspects. The affective aspect by experiencing feelings is the same as others and the cognitive aspect by having the same thoughts as others (7). These two studies have some of the same aspects related to empathy that emphasize affective and cognitive aspects. In this study, it was shown that worrying about the condition of the victim, feeling sorry for the victim's condition, and worrying about the condition of ordinary people who helped evacuate the victim without PPE is a form of empathy from the affective aspect. Meanwhile, empathy from the cognitive aspect was shown by participants by placing themselves as the victim's family.(8)

The sincere attitude of doing tasks to hope for reward is the experience of participants when carrying out their duties as volunteers. This theme contextually means that



participants during their work feel sincere to expect a reward from God. (9) In this study, sincerity in doing the task to hope for the reward in question is to respect the humanitarian side of the victim, trust God's reply for what has been done in the PSC, and be sincere in working. The participant in this study was a Muslim who had the belief that if he helped people in need, he would get a reward for kindness if not in the world, god would repay him in the hereafter. Islam regulates the relationship between man and his God in terms of worship (hablum minAllah) and regulates the relationship between man and other beings (hablum minannas) in the form of social action. These two things must be balanced to obtain happiness in the world and the hereafter (10). So that participants always maintain a good relationship between themselves and God and themselves with others.

Loving the work of helping others is the motivation of participants in carrying out emergency services. This factor can be interpreted as the satisfaction obtained by giving and expanding the dimensions of the self. In addition, this factor has the meaning of prioritizing the interests of others over one's interests (6). Loving is an attitude consisting of feelings, cognitions, and behaviors that focus on a sense of care, care, tenderness, wanting to help, and understanding others (5) oneself (6)

5. CONCLUSION

The results of the study can be concluded that the experience of volunteers as the first responder to traffic accidents obtained 3 themes, namely empathy when on duty, sincerity, and love for work.

References

- [1] Pusponegoro AD, Sujudi A. Kegawatdaruratan Dan Bencana. Jakarta. Timur: Pt.Rayyana Komunikasindo; 2016.
- [2] Kementerian Kesehatan Republik Indonesia. Rencana Strategis Kementerian. Kesehatan Tahun 2015-2019. Jakarta: Kemenkes RI; 2015.
- [3] Marsaid HM. Ahsan. Identifikasi kecelakaan lalu lintas pada pengendara sepeda motor di wilayah polres kabupaten malang. J Ilmu Keperawatan. 2013;1(2):98–112.
- [4] Yin RK. Qualitative-Research-From-Start-To-Finish. New York: The Guilford Press; 2011.
- [5] Sprecher S, Fehr B. Compassionate love for close others and humanity. J Soc Pers Relat. 2005;22(5):629–51.



- [6] Alligood. Pakar Teori Keperawatan Dan Karya Mereka. Singapore: Elsevier; 2017.
- [7] Anderson D, Sweeney D, William T. Statistics for Business & Economics. Boston, USA: Cengage Learning; 2017.
- [8] Denzin NK. An Introduction To Qualitative. 4th ed. SAGE Publ.; 2009.
- [9] Wang JY, Goodman SG, Saltzman I, Wong GC, Huynh T, Dery JP, et al.; Global Registry of Acute Coronary Events (GRACE/GRACE-2); Canadian Registry of Acute Coronary Events (CANRACE) Investigators. Cardiovascular Risk Factors and Inhospital Mortality in Acute Coronary Syndromes: Insights From the Canadian Global Registry of Acute Coronary Events. Can J Cardiol. 2015 Dec;31(12):1455–61.
- [10] Ade Ichwan Ali T. al-Asqalani, Ibnu Hajar, Bulughul Maram Jilid III, Penerjemah. Pustaka Ibnu Umar; 2016.

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