

A study of anxiety during COVID-19 outbreak among adults in Indonesia

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ABSTRACT

Coronavirus or well known as COVID 19 emerged in Wuhan (China) in the end of 2019. WHO's situation report on January 30th 2020 reported 7818 total confirmed cases worldwide, with the majority occurred in China and 82 cases reported in 18 countries outside China. The World Health Organization (WHO) has declared the Covid-19 outbreak a global pandemic as the novel coronavirus continues to rapidly spread worldwide. The rapid increase of COVID-19 new cases makes everyone feel anxious. Anxiety causes a person to respond negatively, therefore people cannot perform good self-management. This study aimed to describe anxiety among people during COVID 19 outbreak in Indonesia. A descriptive study was used to meet the aim of this study. 93 adults and teenagers were recruited and asked to complete a google form questionnaire by self-administrated method. HARS questionnaire was applied as an instrument to measure anxiety. An accidental sampling method was conducted to collect the sample. Data analysis was conducted using descriptive statistic to examine age, living status, educational level, working type, and anxiety level. This study showed that 91.4% respondents were in adult age, 94.6 were living with family member, 66.7% were bachelor and higher, and 36.3% were working as government employees. Anxiety level in this study was divided into three categories. Majority of respondent were having low level of anxiety (88%), 10% were moderate, and the rest (2%) were high anxiety. Highly number of low categories in COVID-19 anxiety means a lot of possibilities. People have an adaptation ability to face every situation in their life. Moreover, this bad situation affect to whole life aspects. Healthcare provider should be prepared as the database of anxiety categories was in low level. Further research should aware wheter this low categories means good or bad for society.

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1. INTRODUCTION

Coronavirus disease (COVID-19) is a new type of disease discovered in 2019 and has never been identified in humans. Coronavirus is a group of viruses found in animals and humans. This virus is zoonotic, meaning that it is transmitted between animals and humans. Detailed investigations found that SARS-CoV was transmitted from civet cats to humans and MERS-CoV from dromedary camels to humans. The World Health Organization released that COVID-19 is categorized as the easiest disease to be transmitted through close contact with a person infected with COVID-19.

According to data from the National Task Force for Covid-19, dr. Achmad Yurianto the number of positive patients with Covid-19 continues to grow. Updating the case data as of March 27, the total number of patients reached 1046 cases throughout Indonesia with 46 patients recovered and 86 patients died. The more people do not care about ways to prevent the spread, the sharper the increase in cases will be. As the number of cases was continues to increase,

it certainly makes people feel worried about whether they have contracted this virus or not. Some individuals show an exaggerated reaction known as a panic attack. This panic begins with anxiety, according to Stuart (2006) anxiety is an unclear and pervasive worry related to feelings of uncertainty and helplessness. [1] The community felt uncertain and helpless in rejecting the arrival of this epidemic whether it would infect him or not. Individual anxiety reactions vary, individuals who cannot control their anxiety can cause heavier problems including decreased immunity, bad logic, sleep disorders, heart and blood vessel disorders and so on.

Some of the covid-19 anxiety phenomena are panic buying. People are worried about something so they will take action that is unreasonable, they buy up all possible things to create security for themselves. For example, buying disinfectants, buying masks and so on. So this is certainly detrimental to the government in dealing with this epidemic problem. This study aims to identified demographic data and anxiety among Indonesian people during COVID-19 outbreak. [2]

2. RESEARCH METHOD

This study used a cross-sectional design and was conducted among adult in some Indonesia's provinces during the months of April to September 2020. Dependents variables, including age, living status, educational level, working type, and anxiety level. The sample size of the study enumerated was 93 person invited by whatsapp and selected by accidental sampling method. The main participant criteria was willingly to join in this study and being able to speak, read, write in Indonesian language. In this study, the dependent variable 'anxiety' was divided into three categories based on Hamilton Anxiety Rating Scale (HARS). [3] Score of 0-17 represent low anxiety, 18 – 24 represent moderate anxiety, and over 24 represented high anxiety. Age was divided into two categories including adult age (26-45 years old) and teenager (12-25 years old). Living status was divided into two categories including living alone and living together with family member or others. Working type was divided into government employee, private employee, and entrepreneur. While educational level was divided into Senior high school, diploma, and bachelor or higher. [4]

All the data were collected by the researcher using google form and spread massively by social media. Before completing the self-administered questionnaires, participants were asked to read the information sheet and mark an agreement consent form. Participants were given some minutes to complete whole parts of the questionnaire. Besides demographic data, the resulting self-administered questionnaire included questions addressing anxiety. [5] All of the participants results were recorded in google sheet automatically. The data were coded, validated and analyzed using SPSS (Version 21). Descriptive statistics were used to measure the contribution of demographic data (numbers, mean, percentage and standard deviation) including age, living status, working type, educational level, and anxiety. The study received the approval of the Ethical Review Board for Research Involving Human Research Subjects, Fakultas Ilmu Kesehatan Universitas Pekalongan.

3. RESULTS AND DISCUSSIONS

The results of this study was described demographic data including age, living status, working type, educational level, and anxiety. Table 1 was describes the performance of each variables.

Table 1. The performance of variables (n = 93)

Variables	Frequency	Percentage
Age		
Adult (26-45 yo)	85	91.4%
Teen (12-25 yo)	8	8.6%
Living status		
Living alone	5	5.4%
Living with family member	88	94.6%
Working status		
Government employee	34	36.3%
Entrepreneur	3	3.23%
Private employee	26	27.94%
Health care provider	3	3.23%
Others	27	29.3%
Educational level		
Senior high school	22	23.6%
Diploma	9	9.6%
Bachelor and higher	62	66.8%
Anxiety		
Low	82	88.0%
Moderate	9	10.0%

High	2	2.0%
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Participants' ages in this study comes from two categories of age including teenager and adult. Most of the participants were adult (91.4%) followed by teenager (8.6%). This condition related with the recruitment method by whatsapp group which most of respondents in whatsapp group were in the same age with author. Result revealed that living status of participants mostly were living with family (94.6%). This condition related with Indonesian culture which have an extended family style. Result showed that majority of respondents were working as government employee (36.3%), followed by others (29.3%), private employee (27.94%), entrepreneur (3.23%), and healthcare provider (3.23%). Majority of respondents were graduated from bachelor and higher (66.3%) followed by senior high school (23.6%), and diploma (9.6%). Majority respondents were having low categories in anxiety (88%) followed by moderate (10%) and high (2%). Highest number of low categories might relate with the possibility that most of the respondents area were in yellow to green area based on Covid-19 zone. On April 2020, Ministry of Health Republik Indonesia through the National Task Force of COVID-19 (Gugus Tugas Nasional COVID-19) conveyed that the number of positif case confirmed was still in low number. [6]

Centre Information of COVID 19 in Indonesia showed that on March 2020, the distribution of Covid cases is still on a sloping curve, therefore people still do not feel as fear as when this case is on a sharp curve. In her study entitled "Type of Anxiety in Cilacap during COVID-19 Outbreak" showed that most of respondents were occurred by general anxiety (18%). It's normal to feel anxious from time to time, especially when life is in a stressful condition. [7] However, excessive, ongoing anxiety and worry that are difficult to control and interfere with day-to-day activities may be a sign of generalized anxiety disorder. It's possible to develop generalized anxiety disorder as a child or an adult. Generalized anxiety disorder has symptoms that are similar to panic disorder, obsessive-compulsive disorder and other types of anxiety, but they're all different conditions. [8] Living with generalized anxiety disorder can be a long-term challenge. In many cases, it occurs along with other anxiety or mood disorders. In most cases, generalized anxiety disorder improves with psychotherapy or medications. Making lifestyle changes, learning coping skills and using relaxation techniques also can help. [9]

Reported that anxiety is an emotional condition signed by physiological stimulation, unpleasant tense feelings, and a comprehensive feeling that something bad is about to happen.[10] A person's anxiety is very different, there are several factors related to a person's anxiety about disease transmission including: level of knowledge, age, gender, education level, and economic status. In this study some respondents had mild anxiety, this is possible because in addition to the pandemic condition in the early stages, most of the respondents were adults and most of them had higher education status (S1 / S2 / S3). [11] Examined the factors related to the anxiety of pulmonary TB patients, said that the more age a person is, the less anxiety will be, the higher a person's education level will also reduce the level of someone's anxiety because education is closely related to knowledge, the more comprehensive of knowledge a person has, the clearer the information will be. [12]

4. CONCLUSION

Highly number of low categories in Covid-19 anxiety means a lot of possibilities. People have an adaptation ability to face every situation in their life. Moreover, this bad situation affect to whole life aspects. Healthcare provider should be prepared as the database of anxiety categories was in low level. Further research should aware wheter this low categories means good or bad for society.

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