



DESCRIPTION OF ANXIETY LEVEL IN THE ELDERLY TIMES COVID-19 PANDEMIC

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ABSTRACT

A Covid-19 pandemic is a new form of the case in the world of health that has various impacts, both biological, psychological, social, and spiritual. Conditions like this must be watched out for, especially at the vulnerable age and risk, one of which is the elderly. The high mortality rate of the elderly during the Covid-19 pandemic has an impact on the psychological conditions of the elderly such as anxiety, this condition can reduce the endurance of the elderly, especially the elderly who have comorbid diseases. Anxiety is a feeling where a person feels insecure and threatened over a thing or situation. The purpose of this study was to describe the level of anxiety in the elderly during the covid 19 pandemics. The design of this study was descriptive with the sampling technique of purposive random sampling, the number of samples in this study was 54 people, the sample in this study was elderly. After conducting the research, it was found that most of the respondents (50%) experienced severe anxiety, while a small proportion (19%) of respondents experienced severe anxiety or panic.

Keywords: Anxiety, Elderly

INTRODUCTION

The Covid-19 pandemic has drastically impacted the global population and various aspects of life. Many countries face the threat of this disease, and it occurs in all age groups, especially in the elderly or elderly age group. The elderly face a significant risk of contracting this Corona Virus disease, especially if they experience health problems along with the decline in physiological conditions.

Data from WHO shows that the highest mortality rate occurs in Covid-19 sufferers aged 80 years and over with a percentage reaching more than 22% (Malta Ilpaj, Salma. Nurwati, 2020). The United States public health agency (CDC) also explained that the largest death due to Covid-19 was the age group 65 years and over and more than 60% as of May 20, 2020, while for Indonesia, based on data from the Covid-19 task force, the age group The highest death rate was in the age group >60 years (elderly) as many as 44%, while for the 46-59 year age group as

much as 40%, and at the age of 31-45 years as many as 11.6%. Elderly or elderly is someone who is 60 years old or more (Jauhary, 2020).

Old age is an event that will be experienced by everyone and cannot be avoided by anyone for humans who are blessed with long life. Old age is the closing period in a person's life span where a person has gone through an earlier period or a more pleasant youth. (Murwani A and Priyantari nd, 2011).

In 2025 the elderly population in the world is estimated at 1.2 billion and as many as 840 million are in developing countries. One indicator of the success of the development is the increasing life expectancy of the population which will also affect the life expectancy of the elderly from year to year.

The elderly are one of the high-risk factors for being infected with Covid-19 and the highest case of death is compared to other age groups, plus the elderly have comorbid diseases. In pandemic conditions



like this, various psychological problems arise in the elderly, one of which is anxiety which will have an impact on decreasing physical activity and functional status, and even risking death. perceptions about healthpoor decreased satisfaction and quality of life (Ministry of Women's Empowerment and Child Protection, 2020).

Psychosocial problems are any changes in an individual's life either psychologically or socially that have a reciprocal influence and are considered to be of considerable potential as a factor causing a real mental disorder (health disorder) such as depression, or vice versa mental health problems that have an impact on the social environment.

Anxiety or anxiety is one of the most common mental health problems, especially if the elderly have a history of co-morbidities such as hypertension, diabetes, heart, or degenerative diseases. According to Efendi (2017) aging is not a disease, but is an advanced stage of a life process marked by a decrease in the body's ability to adapt to environmental stress.

Aging is a condition characterized by a person's failure to maintain a balance against physiological stress conditions. This failure is related to a decrease in the ability to live and an increase in individual sensitivity. Anxiety (anxiety) is a mood disorder (affective) which is characterized by feelings of fear or worry that are deep and ongoing, do not experience disturbances in assessing reality (Reality Testing Ability / RTA, still good), personality is still intact (no cracks), personality/splitting of personality), behavior can be disturbed but still within normal limits (Hawari, 2013).

Anxiety (anxiety) is a feeling where a person feels insecure and threatened over a thing or situation (Nevid. Jeffrey & et al, 2005). Anxiety is a vague feeling of discomfort or worry accompanied by an autonomic response (the source is often unspecified or unknown to the individual), a feeling of fear caused

by anticipation of danger, (Nanda, 2016).

Anxiety is divided into four levels, namely mild anxiety, moderate anxiety, severe anxiety, and very severe anxiety. The level of anxiety felt by each individual is different, influenced by how the individual adapts and overcomes situations that trigger anxiety (Anissa, Suryani, Mirwanti, 2018).

Anxiety describes a state of worry, erratic anxiety, fear, restlessness, sometimes accompanied by various physical complaints (Suliswati, 2012). Especially in the elderly, this anxiety will have a major effect on the body's resistance to disease, that it needs to be addressed as soon as possible so that it does not have a worse impact (Santrock, 2012).

The factor that causes someone to feel anxious about this pandemic is the inaccurate information someone gets about the disease. Research conducted by Yenan Wang, et al, (2020) entitled "Study on the Public Psychological States and Its Related Factors During the Outbreak of COVID-19 in Some Regions of China" shows that (93.67%) of Chinese respondents experienced high anxiety, (5.67%) mild anxiety and (0.67%) moderate anxiety. Judging from gender, female subjects experienced higher anxiety than men.

Research conducted by Putri Aliska (2021) showed that the elderly experienced the most moderate anxiety (75%). This is in line with Dani's research (2020) that currently most of the elderly (73%) say they are anxious about the COVID-19 pandemic.

The results of the initial survey that the researchers conducted in July, where it was found that almost 70% were anxious about the condition of the COVID-19 pandemic and added to the illness suffered by the elderly, thus worsening the health condition and psychological condition of the elderly. From the initial survey, there are several psychosocial problems in the elderly, especially anxiety. The novelty of



this study is related to the psychosocial impact of Covid 19 on the elderly as a vulnerable group, especially anxiety which can reduce physical immunity and worsen the condition of the elderly.

Based on the background above, researchers need to look at the description of the level of anxiety in the elderly during the COVID-19 pandemic

MATERIALS AND METHODS

The design of this research is descriptive, which only describes the level of anxiety in the elderly during the covid

19 pandemics. The elderly sample and the sampling technique is purposive random sampling, with a total sample of 54 people, where the place of this research is at the Nan Balimo Health Center, Solok City. Elderly anxiety was measured using an instrument known as the Hamilton Rating Scale For Anxiety (HRS-A) which consisted of 14 symptom groups. Score 1 mild symptoms, score 2 moderate symptoms, score 3 severe symptoms, score 4 very severe symptoms (panic).

RESULTS

The results of this study can be seen in the diagram below

Table 1. An overview of the elderly's

Adolescent Anxiety Level	f	%
No Anxiety	2	4
Light	15	28
Medium	0	0
Weight	27	50
Weight Once	10	19
Total	54	100

From the table above, it can be seen that most (50%) of the respondents experienced severe anxiety levels, while

DISCUSSION

a. Teen Anxiety

From the results of the study, it was found that most of the respondents experienced severe anxiety (50%).

Anxiety in the elderly arises from a sense of worry that is not clear and diffuse associated with feelings of uncertainty, helplessness, and objects that are not specific. Anxiety is manifested directly through physiological changes such as (shaking, sweating, increased heart rate, abdominal pain, shortness of breath) and behavioral changes such as (restlessness, rapid speech, startling reactions) and indirectly through the emergence of symptoms to fight anxiety.

only a small proportion (19%) of respondents experienced severe anxiety (panic).

(Febrina& Lesmana, 2015). Meanwhile, according to Stuart (2010)

Anxiety is a feeling where a person feels insecure and threatened over a thing or situation.

From various research results, the anxiety of the elderly during the COVID-19 pandemic is due to illness, knowledge, and age of the elderly. Some of the elderly experience severe anxiety, apart from the disease experienced by the elderly, there is also a lack of support or attention from family members towards the elderly in dealing with the COVID-19 pandemic, so that the elderly experience a severe level of anxiety (panic).



CONCLUSION

Most teenagers experience severe anxiety

REFERENCES

- [1] Widiyani, R. (2020). Latar Belakang Virus Corona, Perkembangan hingga Isu Terkini. Retrieved from detikNews. Beaudreau, S. A., & O'Hara, R. (2009). The association of anxiety and depressive symptoms with cognitive performance in community-dwelling older adults. *Psychology and aging*, 24(2), 507.
- [2] Firmana, A. R. (2016). *Gambaran Perilaku Hidup Bersih Dan Sehat (Phbs) Pada Lansia Di Desa Kemukus Kecamatan Gombang Kabupaten Kebumen* (Doctoral Dissertation, Stikes Muhammadiyah Gombang).
- [3] Okazaki, S. (1997). Sources of ethnic differences between Asian American and White American collegestudents on measures of depression and social anxiety. *Journal of Abnormal Psychology*, 106(1), 52.
- [4] Suprabowo, G. Y. A. (2020). Memaknai Hospitalitas di Era New Normal: Sebuah Tinjauan Teologis Lukas10: 25-37. *HARVESTER: Jurnal Teologi dan Kepemimpinan Kristen*, 5(1), 43-58.
- [5] Dani, J. A., & Mediantara, Y. (2020). Covid-19 dan Perubahan Komunikasi Sosial. *Persepsi: Communication Journal*, 3(1), 94-102.
- [6] Fitria, L. (2020). Cognitive Behavior Therapy Counseling Untuk Mengatasi Anxiety Dalam Masa Pandemi Covid-19. *AL-IRSYAD*, 10(1).
- [7] Fries, B. E., Morris, J. N., Skarupski, K. A., Blaum, C. S., Galecki, A., Bookstein, F., & Ribbe, M. (2000). Accelerated dysfunction among the very oldest-old in nursing homes. *The Journals Of Gerontology. Series A, Biological Sciences And Medical Sciences*, 55(6), M336-M341.
- [8] Kustantya, N., & Anwar, M. S. (2015). Hubungan Tingkat Pengetahuan Dengan Perilaku Hidup Bersih Dan Sehat (Phbs) Pada Lansia. *Jurnal Keperawatan*, 4(1).
- [9] Lin, W., & Lee, Y.-W. (2005). Nutrition knowledge, attitudes and dietary restriction behaviour of Taiwanese elderly. *Asia Pacific Journal Of Clinical Nutrition*, 14(3), 221-229.
- [10] Mitchell, D., Haan, M. N., Steinberg, F. M., & Visser, M. (2003). Body composition in the elderly: the influence of nutritional factors and physical activity. *The Journal Of Nutrition, Health & Aging*, 7(3), 130-139.
- [11] Pradana, A. A., & Casman, C. (2020). Pengaruh Kebijakan Social Distancing pada Wabah COVID-19 terhadap Kelompok Rentan di Indonesia. *Jurnal Kebijakan Kesehatan Indonesia: JKKI*, 9(2), 61-67.
- [12] ZA, A. F. S., Roza, S. H., & Ayuningtias, U. A. (2020). UPAYA PENCEGAHAN COVID-19 PADA LANSIA DI KELURAHAN ANDALAS KOTA PADANG. *BULETIN ILMIAH NAGARI MEMBANGUN*, 3(3).
- [13] Hadidi, K. (2016). *Pengaruh psikoedukasi terhadap pengetahuan, koping, kepatuhan dan tekanan darah pada lansia dengan hipertensi menggunakan pendekatan teori Adaptasi Roy* (Doctoral dissertation, Universitas Airlangga).
- [14] Rahayuni, N., Putu, N., Sani Utami, P. A., & Swedarma, K. E. (2015). Pengaruh terapi reminiscence terhadap stres lansia di banjar luhur baturiti tabanan bali. *Jurnal Keperawatan Sriwijaya*, 2(2), 130-138.
- [15] Yanti, B., Priyanto, H., & Zulfikar, T. (2020). SOSIALISASI WASPADA INFEKSI CORONA VIRUS PADA LANSIA DI PANTI JOMPO RUMOH SEUJAHTRA GEUNASEH SAYANG, DINAS SOSIAL ACEH. *Martabe: Jurnal Pengabdian Kepada Masyarakat*, 3(1), 67-72.



- [16] Herniwanti, H., Dewi, O., Yunita, J., & Rahayu, E. P. (2020). Penyuluhan Perilaku Hidup Sehat Dan Bersih (PHBS) dan Gerakan Masyarakat Hidup Sehat (GERMAS) kepada Lanjut Usia (LANSIA) Menghadapi Masa Pandemi Covid 19 dan New Normal dengan Metode 3M. *Jurnal Abdidas*, 1(5), 363-372.
- [17] Herniwanti, H., Dewi, O., Yunita, J., & Rahayu, E. P. (2020). Penyuluhan Perilaku Hidup Sehat Dan Bersih (PHBS) dan Gerakan Masyarakat Hidup Sehat (GERMAS) kepada Lanjut Usia (LANSIA) Menghadapi Masa Pandemi Covid 19 dan New Normal dengan Metode 3M. *Jurnal Abdidas*, 1(5), 363-372.
- [18] Ningsih, R. (2014). Faktor-faktor yang Mempengaruhi Minat Lansia mengunjungi Posyandu Lansia. *Jurnal Online Mahasiswa Program Studi Ilmu Keperawatan Universitas Riau*, 1(2), 1–10. <https://media.neliti.com/media/publications/183825-ID-faktor-faktor-yang-mempengaruhi-minat-la.pdf>
- [19] Pradana, A. A., & Casman, C. (2020). Pengaruh Kebijakan Social Distancing pada Wabah COVID-19 terhadap Kelompok Rentan di Indonesia. *Jurnal Kebijakan Kesehatan Indonesia: JKKI*, 9(2), 61-67
- [20] Kementerian Pemberdayaan Perempuan dan Perlindungan Anak. (2020). Panduan Perlindungan Lanjut Usia Berperspektif Gender Pada Masa Covid-19. Jakarta. Retrieved from https://infeksiemerging.kemkes.go.id/download/Panduan_Perlindungan_Lanjut_Usia_Berperspektif_Gender_Pada_Masa_COVID-19.pdf
- [21] Stuart, G. W., & Sundeen, S. . (2010). *Buku Saku Keperawatan Jiwa Ed 5*. Jakarta: Penerbit Buku Kedokteran EGC.
- [22] Suliswati. (2012). *Konsep Dasar Keperawatan Jiwa*. Jakarta: Buku Kedokteran EGC. Jakarta: Penerbit Buku Kedokteran EGC
- [23] Kementerian Kesehatan RI (2016:1-2). Undang-Undang Nomor 13 tahun 1998 tentang Kesejahteraan Lanjut Usia
- [24] Muhith, A., dan Siyoto, S. 2016. Pendidikan Keperawatan Gerontik. Andi. Yogyakarta.
- [25] Guslinda, G., Fridalni, N., & Minropa, A. (2020). Faktor yang Berhubungan dengan Tingkat Kecemasan Lansia pada Masa Pandemi Covid 19. *Jurnal Keperawatan*, 12(4), 1079-1088
- [26] Kusumawardani, P. A., Cholifah, S., & Setiawan, H. (2021). Peningkatan Peran Kader Lansia dalam Meningkatkan Kesehatan Lansia di masa pandemi covid-19 Desa Penatarsewu Kecamatan Tanggulangin Sidoarjo. *Proceeding of The URECOL*, 24-27.
- [27] Hawari, Dadang. 2011. *Manajemen Stres Cemas dan Depresi*. Jakarta: Balai Penerbit FKUI Herlambang, Susatyo. (2012). *Cara Mudah Memahami Manajemen Kesehatan dan Rumah Sakit*. Yogyakarta: Gosyen Publishing.
- [28] Huang, C. Wang, Y. Li, X. , Renc, L. Zhao, J. Zan, G.Li., Fan, G., Etc. 2020. Clinical Features Of Patient Infected With 2019 Novel Coronavirus In Wuhan, China. *The Lancet*
- [29] Notoatmodjo, Soekidjo. (2010). *Ilmu Perilaku Kesehatan*. Jakarta: Rineka Cipta.
- [30] _____ (2010). *Metodologi Penelitian Kesehatan*. Jakarta: Rineka Cipta
- [31] Ratnawati, Emmelia. (2017). *Asuhan Keperawatan Gerontik*. Yogyakarta : Penerbit Pustaka Baru Press.
- [32] Rahman, M. S., Azad, M. A. K., Hasanuzzaman, M., Salam, R., Islam, A. R. M. T., Rahman, M. M., & Hoque, M. M. M. (2021). How air quality and COVID-19 transmission change under different lockdown scenarios? A case from Dhaka city, Bangladesh. *Science of The Total Environment*, 762, 143161.
- [33] Sirait, H. S., Dani, A. H., & Maryani, D. R. (2020). Hubungan Pengetahuan



Tentang Covid-19 Terhadap Tingkat
Kecemasan Pada Lansia Yang
Mengalami Hipertensi. *Jurnal
Kesehatan, 11(2), 165-169.*