Understanding the Effect of Mental Health: The Mediation of Patience and Anxiety

Fahrul Rozi

1University of Muhammadiyah Prof. Dr. HAMKA

Corresponding Author: fahrul.uhamka@gmail.com

Abstract. The aim of this study was to examine the effect of mental health mediation on the relationship between patience and anxiety. The number of participants in this study was 418 people (mean age: 25.12, SD = 7.07) with 61% female. The measuring instruments used are the Generalized Anxiety Disorder Scale[1], Patience Test, and Positive Mental Health[2]. The statistical analysis technique used is the Mediation Process Hayes (2013). Based on the significance of pathways a, b, c and the insignificance of paths c’, the mediating role of mental health in the relationship between patience and anxiety has perfect mediation.

Keywords: Patience, Mental Health, Anxiety.

1. INTRODUCTION

The cases of the Covid 19 pandemic, both in the world and in the country, are increasing day by day. This increase can encourage people to be more worried about the transmission and effects of the disease from the virus. Based on data reported by worldometers, it shows that the world’s population infected with the Covid 19 virus increased sharply in March and April 2020. More than 3 million people were infected with the virus, and the resulting deaths were 57,220,350 people[3]. It is predicted that this number will continue to increase and spread throughout the world, with a higher mortality rate as well. Information about the distribution and number of cases can certainly raise concerns in the community. They try to find relevant information and try to predict the causes behind the development of the corona virus pandemic.

The popularity of the word “Covid 19” has an increasing trend among the public. This is inseparable from news on social media, online and in print about the transmission of Covid 19. The increasing popularity of Covid 19 is due to public curiosity about the information about the virus. Individual curiosity about the impact of Covid 19 on health and death will increase the individual’s anxiety.

Freud considered anxiety as a fundamental phenomenon and the main problem of neurosis[4]. Many recent studies have linked anxiety to the Covid 19 pandemic. Anxiety that arose during this pandemic had an effect on functional disorders and psychological stress[5]. It needs treatment with a psychological approach[6].

Treatment for reducing anxiety using the virtues approach has not been widely used by researchers. In fact, virtues have an important role in playing individual emotions[7]. There are many universal virtues that need to be considered in the anxiety reduction process. However, the virtues proposed in recent studies have not touched the aspect of patience, which is part of the virtue[8].
Based on studies on resilience and patience, it shows that these variables are related. This can be seen from the concept proposed by El Hafiz, where patience is defined as an active initial response in holding back emotions, thoughts, words, and actions accompanied by a spirit of finding solutions, being optimistic, consistent, oriented towards good goals and not complaining. In another definition, patience is defined as the ability to refrain from complaining, preventing verbal abuse and preventing body members from taking self-destructive actions[9]. Patient individuals can control themselves to be resilient in facing problems, do not give up easily when facing difficult situations and are goal-oriented[10]. This goal-oriented can reduce individual anxiety[11].

Aspects of patience, namely the spirit of looking for solutions, consistent, goal-oriented and not complaining, can strengthen the mental health conditions of individuals. Mental health also contributes to decreased anxiety. Previous research has shown that mental health has a role as a mediator that connects variables with anxiety[12]. This shows that mental health has the potential to play a role as a mediator in the relationship between patience and anxiety.

Research related to health has made a significant contribution in the effort to answer the challenge of reducing anxiety. However, previous research has not touched on the aspects related to an outbreak that has hit the world in its current state. Variables related to pandemic epidemic conditions need to be studied more deeply, including mental health and patience. This study not only provides a pathway analysis model with regard to patience, mental health and anxiety, but this study also provides arguments about the role of mental health as a mediator in the relationship between patience and anxiety.

2. METHOD

Participants: who participated in this study amounted to 418 Asian people who have an age range of 15-60 years, the average age is 25.12 (SD = 7.07) with 61% female. The occupation of participants in this study consisted of students (45.4%), unemployed (3.1%), self-employed (6.4%), employees (45.1%). The last education of the participants was spread at the high school education level (47.8%), S1 (47.4) and S2 / S3 (4.8%).

Research Instruments: Patience scale. The patience variable is measured using a patience scale with a reliability value of 0.830 which is included in the high reliability category based on Guilford's rule. This scale consists of 20 items with 5 items as distractors that are not analyzed, 8 favorable items and 7 unfavorable items.

This scale uses a Likert scale with 4 response categories, namely Very Suitable (SS), Suitable (S), Not Suitable (TS), Very Unsuitable (STS). This scale consists of 6 aspects, namely optimism, never giving up, being consistent, not complaining, forgiving and seeking knowledge to find alternative solutions. Before responding to items, participants first read the cases. There were 4 cases with each case having 5 items, 1 case as a distractor which was not analyzed. An example of a case on this scale is “After failing more than once in an attempt to achieve a good goal, I had to repeat the process from scratch. My first reaction was... ”. While the example item in the case is "I discuss ways to achieve goals with people who have succeeded". In this study, the internal consistency (alpha-cronbach) magnitude scale was 0.712 (α = .712).

Mental Health Scale. Mental health variables were measured using the Positive Mental Health-PMH Scale[2] with a reliability value of 0.93 which is included in the high reliability category based on Guilford's rules. This scale consists of 9 items. This scale uses a rating scale ranging from 1 STS (Very Unsuitable) to 7 SS (Very Suitable). One example of an item at this time is "I enjoy my life". In this study, the internal consistency (alpha-cronbach) mental health scale was 0.913 (α = .913).

Anxiety Scale. Anxiety variable was measured using Generalized Anxiety Disorder-GAD7. This measuring instrument has good validity and reliability. A total of 7 items using a Likert scale with a range of options "Not at all", "In the last few days", "more than a few days", "almost all / every day"). One example of an item on this measuring instrument is "one example of an item on this measuring instrument, namely" I feel nervous, anxious and restless ". In this study, the internal consistency (alpha-cronbach) of Generalized Anxiety Disorder-GAD7 was 0.875 (α = .875).

Analysis: This study explores the relationship between patience, mental health and anxiety. For this reason, the data obtained is processed and analyzed using mediation analysis with model 4 in the PROCESS analysis created by Andrew F. Hayes. The calculation and processing of the research data obtained were carried out with the help of the SPSS for Windows 22.00 series with the addition of the PROCESS Hayes softwares.

3. RESULT AND DISCUSSION

Participants in this study were predominantly women (16%) and Muslim (93%). Famous education level at the level of Senior High School (SMA) or equivalent (47.8%) and Undergraduate Starta 1 (47.4%)
Figure 1 Sample Characteristics

| Variable     | Score                  |
|--------------|------------------------|
| Age (years)  | 25.12 (7.07), range 16-60 |
| Gender       | 61% Female             |

| Religious Group | Percentage |
|-----------------|------------|
| Islam           | 93.1%      |
| Protestant      | 5.0%       |
| Catholic        | 0.5%       |
| Buddha          | 0.7%       |
| Hindu           | 0.5%       |
| Nonbelievers    | 0.2%       |

| Education | Percentage |
|-----------|------------|
| High School Degree | 47.80% |
| Undergraduate     | 47.4      |
| Graduate          | 4.80%     |

| Predictor  | Path c | Path a | Path b | Path c' | Sobel Test |
|------------|--------|--------|--------|---------|------------|
| Patience   | -.96*  | .278** | -.162*** | -.052  | -2.6825** |

Mediation Analysis

Patience has a significant negative relationship with anxiety through mental health variables. The relationship between patience and anxiety has an indirect relationship and is mediated by mental health variables. A chart explaining the role of mental health mediators in the relationship of patience to anxiety is included as follows:

3.1. Discussion

Research provides an explanation of the relationship between patience and mental health-mediated anxiety. The role of mental health mediators is very important in the relationship between patience and anxiety. This is indicated by perfect mediation where patience will have a direct negative effect on anxiety, but not significant if
the relationship is indirect. The relationship between patience and mental health will be insignificant when considering mental health in the relationship.

The concept of patience which includes the values of virtue has a significant negative effect on anxiety. Where, one aspect of patience, namely optimism, is able to reduce individual anxiety. The ability of patience to reduce anxiety can also be seen from other aspects of the value of patience, such as never complaining, actively seeking solutions, consistent and goal-oriented.

The role of patience can directly reduce anxiety. However, if a positive mental health variable appears, patience has an indirect effect on anxiety. This shows that mental health has an important role in reducing the negative effects of anxiety, so that when coupled with patience, patience is insignificant in reducing the anxiety felt by individuals.

4. CONCLUSION

Mental health plays a role as an excellent medium on the relationship between patience and anxiety.

REFERENCES

[1] S. U. Johnson, P. G. Ulvenes, T. Øktedalen, and A. Hoffart, “Psychometric Properties of the General Anxiety Disorder 7-Item (GAD-7) Scale in a Heterogeneous Psychiatric Sample,” Front. Psychol., vol. 10, 2019, doi: 10.3389/fpsyg.2019.01713.

[2] J. Lukat, J. Margraf, R. Lutz, W. M. van der Veld, and E. S. Becker, “Psychometric properties of the Positive Mental Health Scale (PMH-scale),” BMC Psychol., vol. 4, no. 1, p. 8, Feb. 2016, doi: 10.1186/s40359-016-0111-x.

[3] “Worldometer - real time world statistics,” Worldometer. http://www.worldometers.info/ (accessed Nov. 20, 2020).

[4] C. D. Spielberger, “State-Trait Anxiety Inventory,” in The Corsini Encyclopedia of Psychology, I. B. Weiner and W. E. Craighead, Eds. Hoboken, NJ, USA: John Wiley & Sons, Inc., 2010, p. corpsy0943.

[5] S. A. Lee, M. C. Jobe, A. A. Mathis, and J. A. Gibbons, “Incremental validity of coronaphobia: Coronavirus anxiety explains depression, generalized anxiety, and death anxiety,” J. Anxiety Disord., vol. 74, p. 102268, Aug. 2020, doi: 10.1016/j.janxdis.2020.102268.

[6] B. Bandelow, S. Michaelis, and D. Wedekind, “Treatment of anxiety disorders,” Dialogues Clin. Neurosci., vol. 19, no. 2, pp. 93–107, Jun. 2017, doi: 10.31887/DCNS.2017.19.2/bbandelow.

[7] C. Kurth, The anxious mind: An investigation into the varieties and virtues of anxiety. Mit Press, 2018.

[8] J. Clanton et al., “Patience is a virtue: an argument for delayed surgical intervention in fulminant Clostridium difficile colitis,” Am. Surg., vol. 80, no. 6, pp. 614–619, 2014.

[9] I. A. Q. A. Jauziyah, Kemuliaan Sabar Dan Keagungan Syukur. Yogyakarta: Mitra Pustaka, 2009.

[10] M. W. Gallagher and S. J. Lopez, Eds., The Oxford Handbook of Hope, vol. 1. Oxford University Press, 2017.

[11] Y. Mohammadi, S. Kazeni, H. Tahan, and S. Lalozaee, “Relationship between Metacognitive Learning Strategies, Goal Orientation, and Test Anxiety among Students at Birjand University of Medical Sciences,” J. Med. Educ., vol. 16, no. 1, p. 7, 2017.

[12] G. Landi, K. I. Pakenham, G. Boccolini, S. Grandi, and E. Tossani, “Health Anxiety and Mental Health Outcome During COVID-19 Lockdown in Italy: The Mediating and Moderating Roles of Psychological Flexibility,” Front. Psychol., vol. 11, 2020, doi: 10.3389/fpsyg.2020.02195.

[13] S. Kepka et al., “The relationship between traits optimism and anxiety and health-related quality of life in patients hospitalized for chronic diseases: data from the SATISQOL study,” Health Qual. Life Outcomes, vol. 11, no. 1, p. 134, Aug. 2013, doi: 10.1186/1477-7525-11-134.