Relationship of coping strategies with resilience, self-efficiency, and anxiety in the new normal period of the covid-19 pandemic on Teenagers In Kupang City

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ABSTRACT

Latar Belakang: Pandemi COVID-19 membuat semua orang merasa cemas. Pemerintah telah melakukan beberapa strategi preventif untuk menghambat penyebaran virus melalui social distancing, physical distancing, dan perintah stay at home yang berujung pada berkurangnya akses ke keluarga, teman, dan sistem dukungan sosial lainnya serta menyebabkan kesepeian dan meningkatnya masalah psikologis, seperti kecemasan dan depresi. Dengan demikian, setiap orang terutama remaja diharapkan diharapkan mampu beradaptasi dengan kebiasaan baru (the new normal) dalam menjalankan perilaku hidup bersih dan sehat. Mereka yang rentan terhadap COVID-19 secara bertahap mengembangkan keterampilan dan kompetensi adaptif dan fungsional, dan membangun identitas diri yang dapat mempersiapkan diri untuk menjalankan peran mereka dan menanggapi harapan masyarakat saat mereka dewasa, yang juga dapat dianggap sebagai periode badai dan stres.

Tujuan: Mengetahui hubungan strategi koping dengan resiliensi dan kecemasan pada masa transisi new normal pada masa pandemi COVID-19 pada remaja di Kota Kupang.

Metode: Desain penelitian yang digunakan dalam penelitian ini adalah cross sectional. Sampel dalam penelitian ini adalah 147 yang diukur dengan menggunakan kriteria inklusi dan eksklusi yang telah ditetapkan. Sedangkan kriteria inklusi dalam penelitian ini adalah sebagai berikut: berdomisili di Kota Kupang, pernah tinggal di Kupang lebih dari 3 tahun, berusia di atas 15-19 tahun, dan kelas VII SMP. Alat ukur yang digunakan dalam penelitian ini adalah kuesioner Ways of Coping dari Folkman untuk mengukur strategi koping, kuesioner self-rating anxiety scale (SRAS) dari Zung untuk mengukur kecemasan, dan Gartland Questionnaire untuk mengukur resiliensi. Analisis data dilakukan dengan menggunakan uji Chi Square.

Hasil: Hasil penelitian menunjukkan p-value < 0,05 terdapat hubungan strategi coping dengan efikasi diri dan kecemasan pada remaja SMP di Kota Kupang.

Kesimpulan: Strategi koping memiliki hubungan yang sangat signifikan dengan efikasi diri dan kecemasan pada remaja. Remaja yang memiliki strategi koping yang baik memiliki efikasi diri yang baik pada masa new normal. Hal ini juga sama dengan kecemasan, remaja yang memiliki strategi koping yang baik memiliki kecemasan yang rendah.

KATA KUNCI: efikasi diri; kecemasan; ketahanan dan strategi

ABSTRACT

Background: The COVID-19 pandemic has caused everyone to feel anxious. The government has made several preventive strategies to inhibit the spread of the virus through social distancing, physical distancing, and the stay at home order which lead to the decreasing access to family, friends, and other social support systems and causing loneliness and increasing psychological problems such as anxiety and depression. Thus, everyone, especially teenagers,
are expected to be able to adapt to the new habits (the new normal) in carrying out healthy and clean-living behaviour. Those who are prone to COVID-19 gradually develop adaptive and functional skills and competencies, and build a self-identity that can prepare themselves to carry out their roles and respond to societal expectations as they mature, which can also be regarded as a period of storms and stress.

Objectives: Is to identify the relationship of coping strategies with resilience and anxiety in the transition to the new normal during the COVID-19 pandemic on teenagers in Kupang City.

Methods: The research design used in this study was cross-sectional. The sample in this study was 147 measured using the inclusion and exclusion criteria that had been set. Meanwhile, the inclusion criteria in this study were as follows: domiciled in Kupang City, have stayed in Kupang for more than 3 years, aged over 15-19, and class VII of junior high school. The measuring instrument used in this study is the Ways of Coping questionnaire from Folkman to measure coping strategies, the self-rating anxiety scale (SRAS) questionnaire from Zung to measure anxiety, and the Gartland Questionnaire to measure resilience. The data analysis was conducted by using Chi Square test.

Results: The results showed p-value < 0.05 was a relationship of coping strategies with self-efficacy and anxiety on junior high school teenagers in Kupang City.

Conclusions: Coping strategies have a very significant relationship with self-efficacy and anxiety in adolescents. Adolescents who have good coping strategies have good self-efficacy during the new normal era. This is also similar to anxiety, adolescents who have good coping strategies have low anxiety.

KEYWORD: self-efficacy; anxiety; resilience and coping strategies

INTRODUCTION

The World Health Organization (WHO) declared COVID-19 as a public health emergency of international concern or a public health emergency that was troubling the world on January 30, 2020. Meanwhile, Indonesia announced a confirmed patient case on March 2, 2021 and there has been no discovery of drugs and vaccines up to the present. Several strategies to prevent the spread of COVID-19 such as social distancing, physical distancing, and the stay at home order causes issues like reducing access to family members, friends, and other social support systems which lead to loneliness that increase psychological problems such as anxiety and depression (1). Therefore, all people, especially teenagers, are expected to be able to adapt to the new habit (the new normal) in healthy and clean-living behaviour.
adaptation is needed so that coping strategies are essential for teenagers (4).

Individuals of all ages can experience stress and will use various ways to relieve the stress they are experiencing. The physical and emotional tension that accompanies stress can cause discomforts. These discomforts lead the individuals to do something to reduce or eliminate the stress. This effort is called as coping (5).

Anxiety is an individual response to an unpleasant situation and is experienced by all living things. It is a condition characterized by worry accompanied by somatic symptoms that indicate an excessive activity (6).

Resilience is a complex interactive process involving various characteristics of individuals, families, and the wider community environment. Resilience describes an individual's ability to respond to adversity or trauma that faced in healthy and productive ways (7).

Drugs and vaccines that have not been found and the growing number of cases of COVID-19 in Indonesia are two important concerns. Teenagers as the forefront and the nation’s saviour are regarded as the golden generation and agents of change who need to maintain productivity in the midst of a pandemic with new orders, behaviours, and habits. For this purpose, there needs to be a change and adaptation process. Thus, researchers intend to analyze whether there is a relationship of coping strategies with resilience and anxiety levels.

This study aims to see the relationship of coping strategies with resilience, self-efficacy and anxiety in the transition to the new normal during the COVID-19 pandemic on teenagers in Kupang City.

MATERIALS AND METHODS

This research is a quantitative type of research employing a cross sectional approach. The target population of this study were teenagers in Kupang City, while the accessible population were seventh grade junior high school students in the entire Kupang City. 147 students were used as samples. The research was conducted from April 2- July 31, 2021.

The sample criteria were divided into two types, namely inclusion and exclusion criteria. The inclusion criteria in this study were described as follows: domiciled in Kupang City, aged 13-15, class VII students. Meanwhile, the exclusion criteria were described as follows: not willing to be a respondent, have physical illness. The sampling technique used was the Cluster technique. The measuring tools utilized in this study include: the youth coping strategies measured by using the ways of coping questionnaire developed by Lazarus and Folkman (8).

This questionnaire consists of 66 question items, some of which reflect the Problem Focused Coping (PFC) and the others reflect the Emotion Focused Coping (EFC). The instrument used to measure the respondents’ anxiety level was the Self-rating Anxiety Scale (SAS) developed by William WK Zung. It consists of 20 items based on the anxiety symptoms in DSM-II with closed-ended questions (using a 4-point scale “none of the time” (scored 1), “some of the time” (scored 2), “good part of the time” (scored 3), “most of the time” (scored 4) (9).

The revised adolescent resilience questionnaire consists of 93 items and was further developed by Gartland Deidre, 2011, with 12 measurement scales consisting of individual domain (confidence or trust, emotional insight, negative cognitive, social skills, empathy), family domain (connectedness, availability), peers’ domain, and school domain (supportive environment, availability). All scales have acceptable alpha coefficients. The revised scale reflects the conceptually developed scale (10,11).

The instrument used was a questionnaire related to self-efficacy associated to internal
abilities consisting of 10 questions. The Likert scale was employed as follows: 4 = very sure, 3 = sure, 2 = not sure and 1 = very unsure. All of them were favourable questions. The highest value was 40 and the lowest was 10. The higher the value, the better the respondent's self-efficacy and vice versa. The validity test was carried out using the Pearson product-moment test and also the reliability test with the Cronbach Alpha test. The results of the validity test were the p-value for each question <0.05.

The statistical test used in this study is the chi-square test to see the relationship between these variables. Researchers used the help of the SPSS 21.0 For Windows counter program.

The ethical issues used in this study were: respondents filled out informed consent, the researcher did not provide the respondent's identity on the measuring instrument but gave a code. The researcher guarantees never to provide information about other respondents. This research has also passed the ethical feasibility before conducting the research with the ethical approval number No: LB.02.03/1/0115/2021 from the Health Research Ethics Commission of the Health Polytechnic of the Ministry of Health of Kupang.

RESULTS AND DISCUSSION

RESULT

Table 1. Frequency distribution of respondent

| Socio demographic criteria | Frequency | Percentage |
|---------------------------|-----------|------------|
| Age                       |           |            |
| 12 years                  | 36        | 24.5       |
| 13 years                  | 56        | 38.1       |
| 14 years                  | 35        | 23.8       |
| 15 years                  | 20        | 13.3       |
| Gender                    |           |            |
| Male                      | 69        | 46.9       |
| Female                    | 78        | 53.1       |

Table 1 shows that most respondents (38.1%) or as many as 56 respondents were those aged 13, and considerable proportion of respondents (20%) were those aged 15. Indicates that most respondents (53.1%) or as many as 78 respondents were female.

Table 2. Frequency distribution of coping strategy, resilience, self-efficacy, anxiety

| Variable                  | Frequency | Percentage |
|---------------------------|-----------|------------|
| Coping Strategy           |           |            |
| Good                      | 91        | 61.9       |
| Adequate                  | 56        | 38.1       |
| Resilience                |           |            |
| High                      | 116       | 78.9       |
| Very High                 | 31        | 21.1       |
| Self-Efficacy             |           |            |
| Adequate                  | 38        | 25.9       |
| Good                      | 109       | 74.1       |
| Anxiety                   |           |            |
| Normal                    | 57        | 38.8       |
| Mild                      | 28        | 19.0       |

Table 2 reveals that most respondents (61.9%) or as many as 91 respondents have good coping strategies and a small number of respondents (38.1%) or as many as 56 respondents have adequate coping strategies. That most respondents (78.9%) or as many as 116 respondents have high resilience and a small proportion of respondents (21.1%) or as many as 31 respondents have very high resilience. That most respondents (74.1%) or as many as 109 respondents have good efficacy and a small proportion of respondents (25.9%) or as many as 38 respondents have adequate efficacy. That most of respondents (42.2%) or as many as 62

Table 3. Relationship between coping strategy and resilience, self-efficacy, anxiety

| Coping Strategy | Adequate | Good | P-value |
|-----------------|----------|------|---------|
| Resilience      |          |      |         |
| High            | 67       | 49   | 0.045   |
| Very High       | 24       | 7    |         |
| Self-efficacy   |          |      |         |
| Adequate        | 29       | 9    | 0.034   |
| Good            | 62       | 47   |         |
| Anxiety         |          |      |         |
| Normal          | 34       | 28   | 0.025   |
| Mild            | 14       | 14   |         |
| Moderate        | 43       | 14   |         |
respondents experienced moderate anxiety and a small proportion of respondents (19.0%) or as many as 28 respondents experienced mild anxiety.

Table 3 reveals adequate coping strategies with high resilience (67). The result of Pearson's chi-square test revealed a significant value of 0.045 (< alpha 0.05), so that the alternative hypothesis is accepted. It means that there is an effect of coping strategies on respondents' resilience. Adequate coping strategies for good efficacy (62). The result of Pearson's chi-square statistical test revealed a significant value of 0.035 (< alpha 0.05), indicating that there is an effect of coping strategies on respondents' self-efficacy. Adequate coping strategies for moderate anxiety (43). The results of Pearson's chi-square statistical test revealed a significant value of 0.025 (< alpha 0.05), meaning that there is an effect of coping strategies on respondents' anxiety.

DISCUSSION

Stressors related to the COVID-19 pandemic have various impacts on the wider community. Stress in adolescents occurs as a result of the lockdown at the beginning of the outbreak, social isolation, and changes in activity (1).

Everyone tries to manage a traumatic event which refers to the coping process that arise in this situation. For teenagers, coping is essential during this difficult pandemic situation which no one is uncertain when it will end. Such situations are oriented towards adolescent developmental tasks, such as identity construction, autonomy acquisition, life goals, and all components of psychological well-being (12).

This coping mechanism is a coping behavior towards problem solving by reducing stress and the danger perceived. In this case, respondents are still able to control their emotions, have the habit of telling stories/sharing with others, have high alertness/vigilance, pay more attention to problems, have broad perceptions, get support from other people and are able to solve problems (12).

This is inconsistent with the results of a previous research which stated that lockdowns and social isolation that occurred during previous outbreaks (e.g., Ebola, SARS, MERS) were associated with distress including anger, hopelessness, anxiety, and depression as well as declines in mental health (3,12).

According to the researchers, respondents employed the coping strategies because this pandemic have lasted for approximately 2 years, so that teenagers were already able to adapt to this situation. Therefore, they could anticipate and the coping strategies used by teenagers were mostly by communicating with friends, best friends, and other families through social media. The study also stated that teenagers divert themselves into other activities to forget their problem (5,13).

Young age is considered as a critical period because many things happen in life, so many adaptations are needed at this age. In addition to adapting to a new environment, at this age it is also necessary to adapt to new situations and things. Resilience in general can be interpreted as a function of healthy adaptation when individuals experience difficult conditions or threatening situations (11).

The self-efficacy consists of personal belief in being able to face new situations, difficulties, and challenges (14). It is an important self-regulatory mechanism that plays a central role in the self-management process as it influences actions directly and through their impact on cognitive, motivational, affective and decision-making determinants (15). Adolescents can increase their right to choose, making their self-efficacy beliefs to be their central of choice and management of situation and empowering them to cope with the demands of everyday life. Self-efficacy can be a significant individual resource which can improve adolescents’ function and well-being (16).
Anxiety is a form of worry, restlessness and other unpleasant feelings. Anxiety often arises in individuals when they are faced with unpleasant situations (17).

During this transition period, adolescents are very vulnerable to experience a health problem in the form of anxiety. Coupled with conditions where learning must be done online, other anxieties may occur such as anxiety due to changes in the learning environment, difficult learning tasks, unpreparedness for new learning styles, and decreased interest and concentration in learning (1).

Stress arising in adolescents mostly focuses on the consequences of quarantine in the early weeks of the outbreak, including social isolation, changes in routine, and the lack of activity (18).

Those anxieties occur in teenagers because it’s the age when they are still unstable to deal with unexpected conditions. Their emotional condition will be easily shaken, such as excessive anxiety, fear of contracting this virus and so on (19).

CONCLUSION AND RECOMENDATION

This research provides benefits, especially related to resilience, self-efficacy and also anxiety in adolescents in Kupang City during this new normal period. The community can develop strategies to deal with resilience and anxiety during this new normal. Health services, especially for adolescents, also need to be improved, especially health education. Some teenagers who still have low resilience and high anxiety should be given health information in the form of counseling about the new normal era.

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