The Anxiety Dynamics amongst the Elderly during the Covid-19 Pandemic

Retno Sulistiyaningsih¹, Aldelia Shielda Rasyid², Dillia Nur Amalia², Fiska Fitria Harna², and Ali Syahidin Mubarok²

¹Universitas Negeri Malang
²IAIN Tulungagung

Abstract

The elderly are the last stages of human development. In this condition, the elderly often suffer physical decline that may have little effect on their psychological conditions, including anxiety. The study deals with the dynamics of anxiety experienced by the elderly during the Covid-19 pandemic. This study is qualitative with a case study approach. The excavated aspects are somatic, cognitive, emotional and behavioural. The study involved three participants in the age span of 55-65. Participant 1 was 60 years old, participant 2 was 62 years old, participant 3 was 63 years old. The data-mining techniques of this study use one-meeting interviews with each participant. Observation and documentation are also used for gaining in-depth data. Data analysis techniques use driven theory and data triangulation to check the credibility of data. The results of this study indicate that the three participants experienced anxiety because of a news release about Covid-19. The suggestion from this study is to provide more attention and information to the elderly during the Covid-19 pandemic.

Keywords: anxiety, elderly, covid-19

1. Introduction

Since December 2019, Corona virus has been diagnosed with an increase in the number of cases in Wuhan, Hubei province. The corona virus novel is a virus that's passed from man to man. This virus can attack anyone from children to adults. Because of its epidemic characteristics, they are officially named corona virus 2019 (covid-19) (Coronavirus, n.d.). The virus is rapidly spreading and has spread across the countries.

The increase in the number of COVID-19 cases is taking place quite rapidly and there has been the spread outside the Wuhan area and other countries. As of February 16, 2020, globally 51,857 confirmed cases were reported in 25 countries with 1,669 deaths (CFR 3.2%). The country details and the number of cases are as follows: China 51,174 confirmed cases with 1,666 deaths, Japan (53 cases, 1 death and 355 cases in a cruise
ship at the Port of Japan), Thailand (34 cases), South Korea (29 cases), Vietnam (16 cases), Singapore (72 cases), United States (15 cases), Cambodia (1 case), Nepal (1 case), France (12 cases), Australia (15 cases), Malaysia (22 cases), Philippines (3 cases, 1 death), Sri Lanka (1 case), Canada (7 cases), Germany (16 cases), France (12 cases), Italy (3 cases), Russia (2 cases), United Kingdom (9 cases), Belgium (1 case), Finland (1 case), Spain (2 cases), Sweden (1 case), UAE (8 cases), and Egypt (1 case) (Report of the WHO-China Joint Mission on Coronavirus Disease 2019 (COVID-19), 2020).

Indonesia is one of the countries infected with the Covid-19 outbreak. BNPB (Ariansyah, 2020) informed that as of October 12, 2020, there were 336,716 confirmed cases with details of 154,532 detected positive, 258,519 declared cured, and 11,935 died. The data comes from 34 provinces with details of 500 districts/cities. These conditions are worrying because the transmission of this virus is still continuously. The victims came from various backgrounds, especially doctors, nurses and other medical personnel.

Today’s situations of covid-19 have a wide range of effects as like economic impact (Nasution et al., 2020), social (Satya, 2020), as well as psychologically (Agung, 2020). During the early days of the pandemic, a limited knowledge relate the risk and prevention of covid-19 can cause anxiety and panic among communities, aggravated by rumours (Islam et al., 2020). Acting carefully and staying clear of fear can be one way to relieve panic.

The government activation in monitoring public opinion, introducing the knowledge of epidemic prevention and control, administering control and prevention to communities, and taking a quick response to public anxiety, social issues, and risk communication has been carried out through the covid19 website covid19.go.id on the hoax-buster tab (Satgas COVID-19, 2020). This page provides all scattered information about news hoaxes related to covid-19 from various aspects. Health education strategies should be timely at various stages of the epidemic based on socialized psychological change analysis and related key information and popular knowledge campaigns should also be executed on time (Liang et al., 2020).

Recognizing anxiety and fear in facing this unknown epidemic is important, because a few people can remain calm (Safrizal et al., 2020). Increasing the number of confirmed cases would lead to the assumption that new viruses are everywhere and cannot be prevented that causing anxiety and fear. This anxiety is felt by all humans, both from children to the elderly, people who have a job relate the masses, the medical staff and so on. Many covid-19 patients face anxiety and fear, therefore psychological counselling to patients are mostly needed (IASC, 2020).
Steven Schwartz (2000) describes anxiety as a negative emotional state that is characterized by ominous symptoms of tension, such as a pounding heart, sweating, and often breathing with difficulty. Anxiety is similar to fear, but it is less specific. Fear is usually a response to an immediate threat, whereas anxiety is characterized by fear by future unanticipated dangers. According to Jeffrey S. Nevid, et. al (2005), anxiety is an emotional state that has physiological overdrive, an unpleasant tension, and an apprehensive feeling that something bad is about to happen. Gail W. Stuart (Stuart, 2006) describing anxiety is vague and widespread concern, related to feelings of uncertainty and helplessness.

The experience in life such as coping with demands, competition, and disasters can have repercussions on physical and psychological health. One example of the psychological effect is of anxiety (Yusuf et al., 2015). The elderly is a pervasive group that face the economic, health, psychological, and social problems in which current conditions cause anxiety in elderly people. Anxiety experienced by the elderly is likewise enhanced by the declining physical condition of the elderly which has impact on the quality of life.

Increasing life expectancy makes the elderly amount are risen. Indonesia’s elderly citizens in 2010 are 18 million, in 2019 risen to 25.9 million and predicted to be 48.2 million by 2035 (Kementerian Kesehatan, 2019). The elderly people should be happy in their last stage of life. According to Scherer & Frisina (1998), happiness can be achieved when someone has self-esteem, personality, optimism, understanding of meaning and purpose in life, low neuroticism, the influence of society and culture, and cognitive processes.

The aim of this study was to know the anxiety dynamics of elderly during facing covid-19 period. Anxiety disorders was a common thing occurred on elderly. Covid-19 pandemic accidentally increased of anxiety. It came worse when covid-19 caused a death. It was an important thing to know the anxiety dynamics and looking for a solution to help elderly facing the rest optimizely.

2. Literature Review

Kusuma and Ardani (2018) have a research relate the level of anxiety for the elderly in the nursing home in Bali shows that the moderate and severe anxiety experienced by the elderly has an opportunity in dependence on others in their daily activities, when compared with the elderly with no anxiety. Other studies indicate that the role of prudence in elderly leads to anxiety (Dinakaramani & Indati, 2018).
Anxiety is an unpleasant emotion, where the individual is uncomfortable, tense, restless and confused. Anxiety has an aspect of subconsciousness and is vague, such as fear without knowing the cause and cannot escape unpleasant feelings (Daradjat, 1990). The onset of anxiety in the elderly in the middle of covid-19 is the result of threatening situations. Anxiety is a vague fear of objects and a unclear reason (Sarwono, 2012).

According to Daradjat (1990), aspects of anxiety divide into two forms: physiological and psychological. The physiological response as like irregular digestion, excessive coldness, headache, loss of appetite; while the psychological forms into two terms: cognitive and affective aspects. The cognitive aspect is where the individual is unable to focus, while the affective aspect is a feeling of fear, feeling of himself being in danger.

According to Rosenhan and Seligman (1989) aspects of anxiety include: a) somatic, the body’s reaction to danger; b) cognitive, the response to anxiety in the human mind; c) emotions, human feelings that cause the individual to be constantly anxious, to fear danger; d) behaviour, which is a reaction in human behaviour to threats by avoiding or attacking.

3. Method

The study involves a qualitative approach. A qualitative approach is used to examine the natural object condition, in which researchers are as key instruments (Hanurawan, 2016). The type of research used in this study is the type of study for instrumental case studies. Study of instrumental case studies is research done to see or understand a theory through a case (Hanurawan, 2016). The respondent of research is an elderly at 55-65 years of age. The respondent is three persons in elderly age. For confidentiality purposes, respondents were given the initials c1, c2, and c3. The subject was chosen based on the results of researchers’ observations consistent with predetermined criteria. Data mining techniques in this study use structured interviews. Rosenhan and Seligman’s anxiety guidelines (1989) consist of 4 dimensions; somatic, cognitive, emotional and behavioural. These four aspects of the interview are designed to explain the theory. Additionally, researchers have followed up by observing and documenting concerning covid-19 and the elderly. The data analysis technique used in the study is thematic analysis. Braun and Clarke (2006) explain that thematic analysis is a method for identifying, analysing, and reporting theme patterns in data. The use of theory was also carried out with the purpose that the theme may be identified on both the theory and earlier research results (Boyatzis, 1998). The practical steps of this theory begin
with theoretical discussions, then search out and form indicators and tangible cases that may be able to support the theory.

4. Result and Discussion

According to Nestle Health Science (2020), there are 5 common problems experienced by older people: nutritional deficiencies, diarrheal diseases, diminished thinking ability, psychiatric problems, and seemingly independent. Primastika (2018), according to a study conducted by the England National Health Service, explained that mental health conditions for the elderly will face the disorders. The disorders can be dementia, depression, and anxiety disorders. Refers to Rosenhan and Seligman's (1989), aspects of the anxiety consists of a) somatic, the body's reaction to danger; B) cognitive response to anxiety in the mind; C) emotions, those are feelings that cause the individual to be constantly anxious, to fear imminent danger; And d) behaviour, which is a behavioural response to threats by avoiding or attacking. These elements could be described in accordance with the results of interviews with all three respondents.

Subject c1 feel anxious about the condition of the covid-19 pandemic. The subject is dizzy and has frequent relapses in his stomach because the subject has more concerns and listens to the increasing news of covid-19 and its spreading rapidly. Although, some of patients are recovered. Despite his concerns on pandemic, subject worships more diligently for its own relaxing. Subject is also reduced the outdoor activity. When the subject need to leave home, the subject is always kept clean and health by wearing a mask from the home and always washing his hands after having outdoors activity. The subject constrains himself to others. When people were walking around the subject's house waving a greeting through hand movements without shaking and inviting guests only in front of the house.

Subject c2 experienced extreme anxiety and over protective while listening the news of covid-19 pandemic show the increasing cases. At the beginning of the pandemic, all of his grandchildren were not allowed out of the house. All the family should leave home with masks, wash their hands while entering home. When he heard news of the positive covid-19 increase, he called all his children at home, refusing to let them go to the market. He was afraid and concerned that covid-19 would rub off on his family if his family left home. Despite, he was still working as a domestic help but was not staying at his employer's house. She only allowed the nearest brother who had visited to her home. When the covid-19 pandemic, he was preparing a self-distancing by buying a mask, preparing a place to wash the hand in front of the house, and doing the daily
grocery shopping near her home. Although keeping all her family to stay home, as a domestic help, she should come to her boss home and buy some groceries in the market.

Subject c3 was worried by the news of the covid-19 pandemic that making her felt dizzy when listening it. This is because the subject often listens to his neighbours the number of positive patients covid-19 are increased. Because of this negative effect, the subject decided to constrain the meeting with neighbour. After feeling better in distancing, the subject may do normal activities. The subject still stays in contact with the neighbours, but when the neighbours began to discuss a pandemic, he will leave the neighbours. First time listening to the pandemic, subject thought it was the end of life, so he decided to increase his prayers. By doing payers, he feels calmer and relax. Moreover, subject always keeping health, keeping in physical distancing while in outdoors, and washing the hands while arriving home.

All three subjects have the same concerns relate the covid-19 pandemic. The results of these study show that the subjects face the anxiety because of the covid-19 news they heard. Both subject 1 and subject 3 experience dizziness and nausea when listening to the covid-19 news that the number of patients is increased. Subject 2 feels nothing while listening to the news of covid-19, but she is simply being over protective while listening the number of patients is increased. All three subjects have some equation in experiencing anxiety in the situation covid-19 pandemic. In dealing with their anxiety, each subject has their own ways. Subjects 1 and 3 increased their prayers for getting peace, while subject 2 was more concerned with protecting themselves by buying a mask and setting up a hand wash in front of his house, and just buying the daily needs near the home.

Based on the results of the research, the dynamics of anxiety in elderly in facing the situation during the Covid-19 pandemic is a sense of anxiety about the Covid-19 pandemic which has the increasing number of infected patients. Symptoms of anxiety that can be found in the elderly include feeling restless, worrying excessively, feeling afraid, having a level of awareness and often feeling dizzy. Even though the elderly has symptoms of anxiety, they can do daily activities at home and still keeping socialize with her neighbours. The results of this study are similar to the research conducted by Kusuma and Ardani (2018) with the title Relationship of Anxiety Levels to Daily Activities of the Elderly at the Waana Seraya Nursing Home, which resulting that respondents have mild to severe anxiety, but 87.5% are able to carry out daily activities independently.

This study also has similarities with the research conducted by Hartanti (2012) entitled The Relationship between Anxiety Levels and Daily Life Activities in the Elderly at UPT
Pelayanan Sosial Lanjut Usia Jember, with the results showing that there is a relationship between anxiety levels and daily activities on the elderly UPT Pelayanan Sosial Lanjut Usia Jember, the results of this study show that the elderly have mild anxiety and can still carry out daily activities independently. In addition, the research from Dinakaramani and Indati (2018) with the title The Role of Wisdom (Wisdom) Against Anxiety in Facing Death in the Elderly, the results show that the most anxiety levels are in the medium and low categories. Moreover, this research show that the elderly people who have high wisdom, they will have a wise in understanding and accepting the change of life and are sufficiently able to see the events from various points of view. The difference of this research with the research conducted by Dinakarmani and Indati (2018) is the anxiety of the elderly when they facing with the death while this research discuss the anxiety of the elderly in facing the COVID-19 pandemic situation.

The high alertness and a good understanding in facing disaster could decrease the society anxiety. The less understanding news of covid-19 pandemic caused the elderly had various thinking that affect to the anxiety. The spread of news that contained some hoax made the elderly had a negative thinking related the pandemic. This thinking caused them had an overthinking and overacting in facing the pandemic, as like prohibiting their family to have an outdoor activity. In the other hand, the elderly understanding about Covid-19 pandemic made them had a good preparation in protecting and keeping their health.

The elderly ways in facing the covid-19 pandemic by enhancing prayers made them feel relaxing and calm. Also, the elderly also felt the peace although the heard many rumours relate the covid-19 pandemic. According to Stuart (2006), the culture and spiritual values affect the level of anxiety. A person with high religious affiliation would make a person have a positive outlook in problems they faced. Moreover, there were corelation between the religiosity and anxiety in facing the disasters (Anggunsari, 2015).

5. Conclusion

The dynamic of anxiety in the elderly that appear at the time of covid-19 pandemic is worry, fear, dizziness, and sadness. The different forms of anxiety experienced by elderly. As concerns over the covid-19 news and message that growing and spreading rapidly may prompt a reaction to fear and overzealous thinking and dizziness. Another form of concern is overprotective behaviour that results in a high degree of awareness of taking precautions to protect oneself from covid-19.
The elderly anxiety dynamics of these pandemic times is including the low category, for despite anxiety symptoms, they can still do daily activities as usual. As for the way to deal with anxiety, each elderly has different ways. As for the forms in overcoming anxiety, that is to increase worship dan prayers, maintain good health, eat healthy food, keep clean by preparing for self-protection. By applying these ways, the elderly is more enjoy the task of their daily activities.

**Acknowledge, Funding & Ethics Policies**

Thank you for all people who helped us to finished this article during pandemic.

**References**

[1] Agung, I. M. (2020). Memahami Pandemi Covid-19 Dalam Perspektif Psikologi Sosial. *Psikobuletin: Buletin Ilmiah Psikologi*, 1(2), 68–84. https://doi.org/10.24014/pib.v1i2.9616

[2] Anggunsari, Y. (2015). *Hubungan Religiusitas dengan Tingkat Kecemasan dalam Menghadapi Bencana Gempa Bumi di Dusun Panjang Panjangrejo Pundong Bantul* [Skripsi]. Stikes ‘Aisyah Yogyakarta.

[3] Ariansyah, A. (2020). *Pasien Sembuh Harian Bertambah Lebih Banyak Dari Pasien Terkonfirmasi Positif*. BNPB. https://bnpb.go.id/berita/pasien-sembuh-harian-bertambah-lebih-banyak-dari-pasien-terkonfirmasi-positif

[4] Boyatzis, R. E. (1998). *Transforming Qualitative Information: Thematic Analysis and Code Development*. Sage Publication.

[5] Braun, V., & Clarke, V. (2006). Using thematic analysis in psychology. *Qualitative Research in Psychology*, 3(2), 77–101. https://doi.org/10.1191/1478088706qp063oa

[6] Coronavirus. (n.d.). Retrieved 18 November 2020, from https://www.who.int/westernpacific/health-topics/coronavirus

[7] Daradjat, Z. (1990). *Kesehatan Mental*. Gunung Agung.

[8] Dinakaramani, S., & Indati, A. (2018). Peran Kearifan (Wisdom) terhadap Kecemasan menghadapi Kematian pada Lansia. *Jurnal Psikologi*, 45(3), 181-188–188. https://doi.org/10.22146/jpsi.32091

[9] Hanurawan, F. (2016). *Metode Penelitian Kualitatif Psikologi*. PT Raja Grafindo Persada.
[10] Hartanti, A. S. (2012). Hubungan Tingkat Kecemasan Dengan Aktivitas Kehidupan Sehari-Hari Pada Lansia Di Upt Pelayanan Sosial Lanjut Usia Jember [Skripsi]. Universitas Negeri Jember.

[11] IASC. (2020). Catatan Tentang Aspek Kesehatan Jiwa dan Psikososial Wabah Covid-19. WHO.

[12] Islam, M. S., Sarkar, T., Khan, S. H., Kamal, A.-H. M., Hasan, S. M. M., Kabir, A., Yeasmin, D., Islam, M. A., Chowdhury, K. I. A., Anwar, K. S., Chughtai, A. A., & Seale, H. (2020). COVID-19—Related Infodemic and Its Impact on Public Health: A Global Social Media Analysis. The American Journal of Tropical Medicine and Hygiene, 103(4), 1621–1629. https://doi.org/10.4269/ajtmh.20-0812

[13] Kementerian Kesehatan. (2019). Kementerian Kesehatan Republik Indonesia. https://www.kemkes.go.id/article/view/19070500004/indonesia-masuki-periode-aging-population.html

[14] Kusuma, I. B. G. H., & Ardani, I. I. (2018). Hubungan tingkat kecemasan terhadap aktivitas sehari-hari pada lansia di Panti Werdha Wana Seraya, Denpasar—Bali. E-Jurnal Medika Udayana, 7(1), 37–42.

[15] Liang, X., Zijian, F., & Li, L. (2020). Guidance for Corona Virus Disease 2019: Prevention, Control, Diagnosis and Management. Chinese Preventive Medicine Association.

[16] Nasution, D. A. D., Erlina, E., & Muda, I. (2020). Dampak Pandemi COVID-19 terhadap Perekonomian Indonesia. Jurnal Benefita: Ekonomi Pembangunan, Manajemen Bisnis & Akuntansi, 5(2), 212–224. https://doi.org/10.22216/jbe.v5i2.5313

[17] Nestle Health Science. (2020). Lansia dan Permasalahannya | NHS. https://www.nestlehealthscience.co.id/artikel/lansia-dan-permasalahannya

[18] Nevid, J. S., Rathus, S. A., & Greene, B. (2005). Psikologi Abnormal (2nd ed.). W. W. Norton & Company Inc.

[19] Primastika, W. (2018). Masalah Kejiwaan yang Mendera Para Lansia. tirto.id. https://tirto.id/masalah-kejiwaan-yang-mendera-para-lansia-cRcR

[20] Report of the WHO-China Joint Mission on Coronavirus Disease 2019 (COVID-19). (2020). https://www.who.int/docs/default-source/coronaviruse/who-china-joint-mission-on-covid-19---final-report-1100hr-28feb2020-11mar-update.pdf?sfvrsn=1a13fda0_2&download=true

[21] Rosenhan, D. L., & Seligman, M. E. P. (1989). Abnormal Psychology (2nd ed.). W.W. Norton & Company Inc.

[22] Safrizal, Z., Putra, D., Sofyan, S., & Bimo, B. (2020). Pedoman umum menghadapi pandemi Covid-19 bagi pemerintah daerah: Pencegahan, pengendalian, diagnosis dan manajemen.
[23] Sarwono, S. W. (2012). *Pengantar Psikologi Umum*. Rajawali Press.

[24] Satgas COVID-19. (2020). *Hoax Buster | Satgas Penanganan COVID-19*. Covid19.Go.Id. https://covid19.go.id/p/hoax-buster

[25] Satya, P. A. N. I. P. (2020). COVID-19 dan Potensi Konflik Sosial. *Jurnal Ilmiah Hubungan Internasional*, 0(0), 39–45. https://doi.org/10.26593/jihi.v1i1.3867.39-45

[26] Scherer, M. J., & Frisina, D. R. (1998). Characteristics associated with marginal hearing loss and subjective well-being among a sample of older adults. *Journal of Rehabilitation Research and Development*, 35(4), 420–426.

[27] Schwartz, S. (2000). *Abnormal Psychology: A Discovery Approach*. Mayfield Publishing Company.

[28] Stuart, G. W. (2006). *Buku Saku Keperawatan Jiwa. Alih Bahasa: Ramona P. Kapoh & Egi Komara Yudha*. EGC.

[29] Yusuf, A., Pk, R. F., & Nihayati, H. E. (2015). *KEPERAWATAN KESEHATAN JIWA*. 366.