A description and factors causing student anxiety during the COVID-19 pandemic in Indonesia

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Abstract-
This study aims to determine the level and factors that cause student anxiety during the Covid-19 pandemic. Respondents in this study were 1,013 students from five universities in three provinces in Indonesia, i.e., Lampung, Special Region of Yogyakarta, and South Sulawesi. The data were collected from 24th to 29th of April 2020. The data were obtained using a Covid-19 anxiety survey and a questionnaire about the factors causing student anxiety, which were distributed by utilizing google form. The results indicated that there were 222 students at a high and very high anxiety level with physical, cognitive, and emotional symptoms. Student anxiety was triggered by two main factors, i.e., social limitation and coursework. To reduce their anxiety, the majority of respondents chose a religious approach rather than a cultural approach. Recommendations are given to counselors to include religiosity values in helping student anxiety. The university is also expected to be able to support students by providing internet quota assistance, organizing online lectures on an asynchronous model and allowing longer deadline for submission of coursework.

Keywords: anxiety; students; covid-19; pandemic

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Introduction

The coronavirus was first reported at the end of December 2019 in Wuhan province. It then has radically changed human life. This virus has been named as Severe Acute Respiratory Syndrome Coronavirus 2 (SARS-CoV-2) and can transmit rapidly through direct human contact (Li et al., 2020; Rothe et al., 2020). People with Covid-19 infection are characterized by common symptoms such as fever, cough, weakness, seizures, and diarrhea (Fadli et al., 2020). Almost all aspects of life have been affected by the Covid-19 virus. One certain thing is humans are faced with a condition of uncertainty and change fastly. It has implications for the demand to adapt massively including in the education field.

In the context of Indonesia, the Covid-19 case appeared firstly in early March 2020 after President Joko Widodo announced remission on March 2th, 2020. Then, the Minister of Education and Culture of the Republic of Indonesia issued circular letter No. 4 of 2020 concerning the implementation of educational policies in the emergency period of the Covid-19 pandemic. The implication of this Minister of Education and Culture circular letter is that all tertiary institutions in Indonesia impose online lecture policies.

Learning online is certainly not an easy thing for students (Gillett-Swan, 2017). The problems faced by students are not only in the skills of using technology but also in the heavy workload considering the numerous courses they have to take. The results of research (du Plessis, 2019) had confirmed that students who do distance learning feel under pressure and stress. In the Indonesian context, the difficulty of networking as a vital infrastructure in the distance learning process adds to the problem that is strongly indicated as one of the factors that triggered student anxiety.

Meanwhile, Persakmi through an online survey that was conducted from 6th to 13th of June 2020 concluded that the majority of Indonesians experienced anxiety during the Covid-19 pandemic (Persakmi, 2020). The survey covered 34 provinces in Indonesia with a total of 8.031 respondents. The survey results revealed that more than 50% of respondents experienced anxiety in the anxious and very anxious category. These worries covered a variety of life settings including education, economy, work, religion, and, social society.

In more detail, it is known that 67% of respondents experienced anxiety in the aspect of social community relations, 55% of respondents in the field of religion, 63% of respondents in the aspect of work, and 58% in the economic aspect. The education sector occupied the highest position in the number of respondents who experienced anxiety, which is 74%. The results of this survey further emphasized that students as actors in the education field had a high potential to experience anxiety during the Covid-19 pandemic.

The official survey using the multivariate statistical test technique of the multinomial logistic regression also revealed four variables that significantly influence anxiety. The four variables were education level, occupation, age, and gender. Respondents with high school graduates had a higher level of anxiety than respondents who were college graduates. Meanwhile, respondents who did not have a job (unemployed) also had higher anxiety than respondents who had worked. Observing from the perspective of age and gender, it was recognized that respondents aged 30-39 years had the highest level of anxiety. Meanwhile, female respondents were very dominant in experiencing anxiety compared to men. The results of this survey further emphasized that an individual's ability to manage emotions, filter information, knowledge, and experience can affect anxiety.

Anxiety in perspective (Nevid & Dkk., 2005) is defined as an emotional state characterized by physiological arousal, uncomfortable feelings, and a comprehensive feeling that something bad will happen. Meanwhile, (Clark & Beck, 2013) argued that anxiety is actually a mental process from one’s experiences. Differences in experience and endurance in dealing with events will have implications for the level of anxiety of the individual. A person who experiences anxiety is characterized by several characteristics such as frequently having difficulty in sleeping for fear of being infected by Covid-19,
feeling lonely, feeling confused, often getting dizzy or migraine, having mood swing, the heart often suddenly pounding, decreasing concentration, and thinking negative and pessimistic.

There are four levels of anxiety that can be identified, namely mild anxiety, moderate anxiety, severe anxiety, and very severe anxiety (Stuart, G., 2005). Every individual has different anxiety. The level of individual anxiety depends on how the individual adjusts to the situation as the trigger. When individuals can adapt well, this anxiety can be overcome. Conversely, when the individual is unable to adjust to the demands of life, obstacles and problems will arise that can trigger anxiety.

Anxiety is often seen as a normal phenomenon. However, if anxiety is at a severe level, it can threaten one's mental and physical health (DordiNejad et al., 2011). It is essential to pay attention to the symptoms and factors that cause anxiety so that individuals can actualize and be responsible for what they should do. As an individual social being, a person should also endeavor to build healthy relationships with friends and family, do positive activities, and exercise. Positive activities are believed to increase the hormone of happiness, have implications for increasing the immune system, and minimize anxiety disorders.

Everyone can experience anxiety including students. Students from the perspective of developmental psychology are individuals who are in a period of conformity with a strong interest in gathering with peers (Santosa et al., 2019). At this time, the tendency to defend friends, trust, relationships, socialization, and communication is highly crucial. When students have limited movement in socialization but the coursework is also quite burdensome, then it has the potential to cause anxiety. The amount of information about the coronavirus can also have negative effects (Indriya, 2020). Information about Covid-19 is indeed mandatory as an effort to raise awareness. However, continuous exposure will have an impact on mental health and trigger stress, anxiety, panic, and even fear.

To avoid the panic that can trigger feelings of anxiety during the Covid-19 pandemic, (Ilpaj & Nurwati, 2020) recommended that the public can search for information from reliable sources, for example, information from WHO, government, and trusted regulatory agencies. Information that is unclear, confusing, and tends to spread fear without a clear source can be accounted for increasing anxiety (Ardiyanti, 2020). Meanwhile, (Jarnawi, 2020) implementing religious therapy, such as prayer and ablution, and increasing patience can avoid anxiety.

I. METHOD

Research model

This study used a mixed-method research design (Creswell, 2008). There are two types of data in this study, namely quantitative data and qualitative data. Quantitative data in the form of the percentage of student anxiety which is divided into five categories. While the qualitative data in the form of a description of the determinant factors that affect student anxiety.

Participants

Respondents in this study amounted to 1.013 students from five public and private universities in three provinces in Indonesia, i.e., Lampung, Special Region of Yogyakarta, and South Sulawesi. The three provinces represented the Lampungnese, Javanese, and Makassarese ethnic.

Data collection tools

There are two data collection tools in this study. First, quantitative data collection was carried out by distributing student anxiety questionnaires. This questionnaire consists of eleven statement items with four answer choices as respondents' behavioral tendencies. The validity test of the instrument used an expert judgment. Experts have justified that the questionnaire developed has an adequate level of validity. Meanwhile, the instrument reliability test used the Cronbach alpha formula with a
questionnaire reliability value of 0.702, indicating a high level of confidence (Azwar, 2006). Second, qualitative data were obtained through a semi-open questionnaire consisting of five questions about the factors that influence student anxiety.

Data collection process

Data collection was conducted from 24th to 29th April 2020. The data collection activities were performed by google form. There were two criteria in selecting the samples. First, the students live in the eastern, central or western parts of Indonesia. The goal is that there is representation from every part of the region and culture in Indonesia. However, there is still a limitation in the proportion of the number of respondents who are not balanced from each region and culture. The second criterion is based on students who are still actively attending lectures.

Data Analysis

To determine the level of student anxiety, the data were analyzed using descriptive quantitative analysis, namely the percentage of student anxiety tendencies into five levels. The five levels consisted of very high, high, moderate, low, and very low. Meanwhile, qualitative data related to the answers to the semi-open questionnaire of students were analyzed through four steps, i.e., data collection, data reduction, data presentation, and conclusion drawing (Miles & Huberman, 1994). Prior to use, the question items to obtain qualitative data were tested for validity through expert testing with the delphi method model (Linstone & Turoff, 2002). Suggestions from experts were used as the basis for revising the instrument until it was declared valid and usable.

II. RESULTS AND DISCUSSION

The very fast changes in life and uncertainty caused by the Covid-19 pandemic have terrified the world. Several research results from survey institutions had revealed that the Covid-19 pandemic had made collective anxiety continue to increase [6] [20]. This increased anxiety was triggered by new surprises and uncertainties. Self-capacity and capability are believed to be the key to transforming uncertainty into certainty (Satria, 2020) to reduce anxiety. Students as intellectuals should have sufficient capacity and capability to deal with uncertain situations due to the Covid-19 pandemic. However, social phenomena and some survey results showed that several students actually experienced anxiety, which led to mental disorders.

In the context of this research, the following figure presents a description of the factual condition of student anxiety from three provinces in Indonesia with a total of 1.013 respondents.

![Figure 1. Student anxiety level](image)

As shown in Figure 1, 35 respondents (3%) have a very high level of anxiety and 187 respondents (18%) are in the high category. This data is certainly not enough to be seen only as statistical figures. If we observe the comparisons statistically, of course, the total percentage of the low and very low categories is much greater than high and very high categories. If this statistical approach is used, it can trigger the assumptions without a problem, a condition that looks just fine. This data must be
viewed from a human perspective such as humans as unique individuals, individuals who are entitled to live according to their human nature, individuals who are born as good persons and have the right to live a decent and happy life (Nasution, 2002).

Anxiety in the high and very high categories indicates the individual needs professional help. High and very high anxiety is a signal that the individual has an anxiety disorder. This data can be interpreted as frequently having difficulty in sleeping for fear of being infected by Covid-19, feeling lonely, feeling confused, often getting dizzy or migraine, having mood swing, the heart often pounding for no reason, difficulty calming the mind, difficulty in eating or overeating, decreasing concentration, and thinking negative and pessimistic. This psychological condition certainly cannot be allowed to continue since it can lead to depression and mental disorders such as irritability and other asocial behaviors (Sarafino, E. P. & Smith, 2011).

Individuals with mental disorders due to anxiety and depression can be identified by their cognitive, behavioral, physical, and emotional symptoms (Hawley et al., 2017). Cognitive symptoms include self-deprecation, hopelessness, suicidal thoughts, difficulty in concentrating, and general negativity. Behavioral symptoms can be observed when a person withdraws from the association, does not have fun activities, and is difficult to move. Meanwhile, physical symptoms are characterized by insomnia, fatigue, and changes in weight. Meanwhile, emotional symptoms can be seen from feelings of irritability, guilt, and nervousness.

Individuals with mental disorders, of course, cannot live normally in society. They need professional help. Numerous theories are offered for reducing anxiety disorders. A study of (Abramowitz et al., 2005) proved the effectiveness of using cognitive-behavioral therapy to treat obsessive-compulsive disorder. Furthermore, (Greeven et al., 2007) conducted therapy on individuals with hypochondriasis disorders, namely individuals who felt they had the disease but the disease is not detected medically. Meanwhile, (Allen et al., 2006) also conducted a cognitive behavioral therapy for people with somatization disorder, the tendency for someone to experience difficulty in responding to psychosocial stress resulting from anxiety and depression. Meanwhile, (McClanahan & Antonuccio, 2002) performed cognitive behavioral therapy for patients who had suffered from panic for almost ten years. This patient had tried a variety of medical drugs but it did not show any significant progress. After therapy, the first four weeks had shown progress and after sixteen weeks, the patient did not experience any panic disorders. Apart from cognitive-behavioral therapy, an intervention model through music therapy has also been indicated to be effective in reducing anxiety (Horne-Thompson & Grocke, 2008). The religious approach has also been performed to be effective in reducing anxiety. The study of (Koszycki et al., 2010) revealed that spiritual healing has comparable power to cognitive behavioral therapy in overcoming anxiety.

Anxiety is a psychological symptom that arises due to an individual's inability to make adjustments to certain situations. This inability leads to feelings of failure, expectations that are difficult to achieve, giving up, hopelessness, excessive worry, and fear of situations that may occur (Hunsley, 1993). When individuals have the capacity and capability to manage a certain risky situation and condition, the potential for anxiety can be minimized. This condition further emphasizes that anxiety is not an independent symptom but there are certain factors or situations as the trigger. In the context of this research, several factors that trigger student anxiety are presented in the following figure.
Referring to the data presented in Figure 2, it seems obvious that the factors causing student anxiety are dominated by two factors, i.e., social limitations and coursework. The position of these two factors is above 50%. This further emphasized that humans as social creatures need space to actively socialize in the real world. Students in the developmental psychology perspective of Havigurst are in a period of conformity, namely the tendency to give up and follow the opinions, values, hobbies, or desires of others, especially peers (Hurlock, 2002). At this time, friendship and popularity among peers are the most essential issues.

It can be understood why the need for socialization is one of the factors that triggered anxiety during the Covid-19 pandemic. As we all know, since the Education and Culture Minister issued circular letter No. 4 of 2020 concerning the implementation of education policies in the emergency period of the spread of Covid-19 on March 24th, the learning process has been conducted online. In fact, several universities have adopted an online learning policy before the circular letter was issued. The Minister of Education and Culture's policy was also followed by the policy of the Minister of Health of the Republic of Indonesia No. 9 of 2020 concerning Large Scale Social Restrictions (Pembatasan Sosial Berskala Besar or PSBB). The PSBB policy, which was then used as a reference by several regional heads in Indonesia, further added to the narrower movement of social interactions among the community including students. The PSBB policy in an area has implications for prohibiting people living in the administrative area from performing activities outside their house except in an emergency or crucial situations such as the need for food and medicine. This condition of emergency further increased to the psychological burden since the condition seemed to be tense. Regardless of the conditions, students also should think about the coursework they have.

Why did coursework become a factor triggering student anxiety during the Covid-19 pandemic, even the figure reached 52.1%? After further analysis, other correlating factors influenced the workload of this course. There were 573 respondents who responded related to why coursework during the Covid-19 pandemic triggered their anxiety. Most of the students stated the following aspects including: (1) the material was difficult to understand while the task given was demanding a complete understanding; (2) there was trouble with the signal or internet connection whereas coursework must be sent at a certain deadline; (3) the number of tasks for which the submission deadline was too restrictive; (4) guidance by email and other online platforms had a slow response; (5) there was a limited budget for buying internet quota; (6) the coursework was stacked because all the lecturers gave the assignments. Students felt psychologically depressed. There was a gap between expectations and carrying capacity to meet student expectations. Students had a maximum target value and there were concerns about not passing certain courses while the infrastructure for supporting online learning is inadequate. Furthermore, when students stay at home, there was additional work given by their parents. It is unlike when students were in a boarding house who can focus more on the coursework they were assigned to.

The next factor that triggered student anxiety is information about Covid-19. Referring to the data that had been collected, several aspects can be identified that have contributed to triggering student anxiety including (1) the information of Covid-19 in the March-April period occurred massively; (2) it was difficult to distinguish true and false information; (3) information in circulation was frequently contradictory so it was confusing; (4) people had limited knowledge while people who were considered experts were having different views; (5) the government tended to be incompatible and incomplete in providing information about Covid-19.

In this digital literacy era, society is flooded with a variety of information. Thus, information filtering skills are highly needed. Digital literacy should be able to teach people to become fast learners because digital literacy is an opening door to science (Jenkins, 2018). Students, as scholars, should be able to put forward critical thinking as a basis for interpreting the various information they
acquired (Buckingham, 2007). However, not all students automatically have critical thinking skills in the use of digital literacy. Admittedly, it is not easy to build critical thinking in this disruption era. The massive production of information causes difficulty in distinguishing between true and false information. Fake news, if it is promoted massively and has been believed by many people, is sometimes considered as the truth.

Ministry of Communication and Informatics of the Republic of Indonesia (Menkominfo) noted that there was at least 554 fake news about Covid-19 circulating in the community (Leski Rizkinswara, 2020). Meanwhile, the government spokesman for the handling of Covid-19, Achmad Yurianto, said that during March-April, there were more than 1.125 false news about Covid-19 that had spread through various media on the internet (Leski Rizkinswara, 2020). This condition was confirmed by the findings of Ardiyanti's research that concluded that there is a negative assessment in media communication during the Covid-19 pandemic (Ardiyanti, 2020). The negative assessment was related to the government’s blunder statement and the public’s distrust of the communication conducted by the government in dealing with the Covid-19 pandemic in Indonesia. Several facts and research findings made it more convincing that information about Covid-19 during the pandemic also contributed to triggering student anxiety.

There are two other factors (18.5%) that were quite dominant in influencing student anxiety, namely the limitations of performing worship in mosques and the unavailability of part-time job vacancies to increase student income. Both of these factors, if analyzed further, are actually a need for social interaction. Although, they are related to spiritual factors. Spiritual activity is also believed to reduce anxiety as it is in line with the research of (Jarnawi, 2020), which presented SEFT, spiritual emotional freedom technique, as a model of therapy in reducing anxiety due to the Covid-19 pandemic. The religiosity approach is also believed to have a negative relationship with anxiety (Basri et al., 2015). When someone's spiritual needs are met, it can foster a positive attitude so that symptoms of anxiety can be minimized.

III. CONCLUSION

Although the respondents of this study consisted of three ethnicities in Indonesia, it cannot be seen in detail whether culture also affects student anxiety during the Covid-19 pandemic. This study focused on two aspects, i.e., the level of anxiety and the factors that influence student anxiety. Referring to the research findings, it is revealed that 35 respondents (3%) have very high anxiety levels and 18% or 187 respondents have high anxiety. The high level of student anxiety was triggered by two main factors, namely social limitations and the burden of coursework. Information about Covid-19 and the limitations of worship are also factors that triggered student anxiety. To reduce their anxiety, 72.5% of respondents chose a religious approach compared to a cultural approach which was only 26.5%. Recommendations are given to future researchers, counselors and universities. For further researchers, it is suggested to specifically and deeply examine the influence of cultural and religious factors on student anxiety. Counselors are suggested to include religious values in overcoming student anxiety. Meanwhile, universities are expected to issue policies that support students, including: providing internet data quota, organizing asynchronous lectures, and giving longer time limits for submitting assignments.

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