

Resilience Influenced with Anxiety Level among Family with Elderly in Facing the Covid-19 Pandemic: A Correlational Study

Hidayatus Sya'diyah¹, Dini Mei Widayanti², Mustika Myra², Mahmudah^{1*}, Ferry Efendi¹

¹Universitas Airlangga, Jawa Timur 60115, Indonesia

²Sekolah Tinggi Ilmu Kesehatan Hang Tuah Surabaya, Jawa Timur 60244, Indonesia

*Corresponding Author's Email: mahmudah@fkm.unair.ac.id

ABSTRACT

Background: The COVID-19 pandemic has a psychological effect on people who are anxious. In terms of individual psychological suffering, a major factor that is important in psychological resilience. The purpose of this study is to determine the relationship between the level of anxiety and the level of resilience of families who have the elderly in the COVID-19 pandemic at Ketajen Village, Gedangan District. **Methods:** The design of this study used a cross-sectional design with a sample of 171 respondents. Sample technique is selected by using simple random sampling. Reference levels are measured using a Connor-Davidson Resilience Scale (CD-RISC) and anxiety levels are measured using a Hamilton Rating Scale for Anxiety (HRS-A) with a spearman rho analysis test ($p < 0.05$). **Results:** The results showed that most families had moderate levels of resilience, as many as 121 respondents (70.8%) and most families experienced mild anxiety levels as many as 121 respondents (70.8%). Spearman Rho test shows that the value of $r = -0.313$ with a value of $\rho = 0.000$ ($\rho\%$). The results show that there is a relationship between the level of resilience and the level of anxiety of families who have the elderly in the COVID-19 pandemic at the Ketajen Village, Gedangan District. **Conclusion:** The implications of this study suggest that high levels of resilience allow for lower levels of anxiety. So, with the ability of a person's resilience, they will be able to take the meaning of failure and try better than they ever did, thereby reducing the risk of anxiety.

Keywords: Resilience; Anxiety; Family

INTRODUCTION

At the beginning of 2020, the world was shocked by the news of the outbreak of the COVID-19 pandemic, also known as the corona virus. The entire world population never thought that this pandemic was so extraordinary that it changed all community activities. Economic activities, education, etc. are affected so much (Ridlo, 2020). Various conditions that occurred during the COVID-19 pandemic had a psychological effect on the community. This has a drastic impact on the world's population and on various aspects of life. The threat of this disease is faced by many countries and occurs in all age groups, especially in the elderly or elderly age group (Minannisa, 2021). This condition makes people not ready to face this period, thus triggering constant and excessive anxiety in everyone because they are afraid that they will catch the virus. Anxiety begins with a

threatening situation as a dangerous stimulus. So, at a certain level, anxiety can make a person more alert to a threat, namely this pandemic (Vibriyanti, 2020). Regarding the psychological suffering of individuals, the main psycho-social factor that is important is psychological resilience, or so-called resilience. This determines the response of individuals under stress and can help them deal with stress more effectively (Zhang *et al.*, 2020). In other words, being resilient means being able to deal with problems, stress, trauma, and even some big threats by adapting well and encouraging positive change.

Study results by Meng *et al.*, (2020) in the elderly showed that 37% of them suffered from depression and anxiety during the COVID-19 pandemic. The results of the preliminary study obtained in Ketajen Village, Gedangan District, found 28 families who stated that 27

Received September 22, 2022; Received in revised form September 28, 2022; Accepted October 3, 2022

families felt anxious about their elderly, and 1 family stated that they did not feel anxious about their elderly. The factors that influence their anxiety also vary, including: (1) the family has elderly with comorbidities; (2) the neighbourhood where there has been a positive case of COVID-19; (3) there are many hoaxes about COVID-19; (4) the family is anxious because they have to routinely check in at the hospital. Anxiety is a common response that often occurs during times of crisis. Anxiety can arise suddenly or gradually over several minutes, hours, or days and can last from a few seconds to several years. The level of resilience or resilience can protect against the adverse effects of stress exposure. Resilience has been found to withstand stress during previous viral outbreaks. This study found that patients who lived through the SARS epidemic and were more resilient were less worried about getting SARS.

According to Nicomedes & Avila (2020), anxiety is characterized by a variety of symptoms, which include physical, behavioral, and cognitive symptoms. Physical symptoms include shaking, tightness in the abdomen or chest, heavy sweating, sweaty palms, headache or feeling faint, dry mouth or throat, shortness of breath, racing heart, cold fingers or limbs, and nausea. Behavioral symptoms include avoidance behavior, dependent behavior, and restless behavior. Cognitive symptoms include worrying, feeling fearful or anxious about the future, overthinking or being overly aware of the sensations that arise in the body, fear of losing control, constantly thinking distracting thoughts, and difficulty concentrating or focusing (Oktavia & Muhopilah, 2021). Resilience is the ability of individuals to defend themselves through events that occur, including defence against COVID during this pandemic. Humans need resilience in order to be able to rise from adversity and adversity. If difficulties can usually lead to depression or anxiety, resilience allows a person to interpret failure and strive to do better than they have ever done, lowering the risk of depression or anxiety. Family resilience is the ability of the family to be able to maintain the family so that it rises from adversity and is a process that is lived throughout family life (Gayatri & Irawaty, 2020). Family resilience is currently a very relevant thing, especially in conditions when facing the COVID-19 outbreak. Family resilience is something that all family members need to strive for optimally. The better the resilience possessed by a person, the level of anxiety will decrease, and vice

versa, if the resilience is getting worse, the level of anxiety will increase towards the level of panic.

Nurses who provide nursing care in the health sector can educate families about health management, such as how to recognise health problems, make decisions, provide family health services, maintain home environmental conditions that support health, and maintain beneficial relationships with families and health facilities (Abidin & Julianto, 2020). A supportive process is needed in families to be able to overcome challenges and rise from adversity to become resilient. An elderly person is a vulnerable person at a vulnerable age that should be of more concern. An elderly person must also see his health-related abilities so that he can remain independent at his age (Efendi *et al.*, 2018). So, in this pandemic condition, all activities and activities of the elderly must really be considered, both biological, psychological, social, and spiritual aspects. By seeing what family members need, listening to family members' complaints, giving comfort, and helping family members to calm down. Based on this phenomenon, the researcher wants to examine the relationship between the level of anxiety and the level of resilience of families who have the elderly facing the COVID-19 pandemic in the Ketajen Village Area, Gedangan District.

METHODOLOGY

The research design used an analytical observational design with a Cross Sectional approach. The population were all families who had the elderly living together, as many as 300 families. The number of samples who met the criteria was 171 respondents. This study used Simple Random Sampling. This data is collected by questionnaires to determine the level of resilience and level of anxiety towards families who have the elderly.

The research instrument used was the Connor-Davidson Resilience Scale (CD-RISC) and HRS-A (Hamilton Rating Scale for Anxiety). Validity testing was conducted on 30 respondents with a significant level of 5% (0.361). The Analysis test used Spearman's rho statistical test.

Ethical Clearance

The present got ethical clearance from the Health Research Ethics Committee of Stikes Hang Tuah Surabaya, Indonesia with the no. PE/20/VI/2021/KEPK/SHT dated 16th June 2021.

RESULTS

Table 1: Characteristics of Respondents

No	Characteristics	Criteria	Frequency (f)	Percentage (%)
1	Age	<=20 years	3	1.8
		21-30 years old	76	44.4
		31-40 years old	46	26.9
		41-50 years old	46	26.9
		Total	171	100.0
2	Gender	Man	67	39.2
		Woman	104	60.8
		Total	171	100.0
3	Respondent Status	Not married yet	41	24.0
		Married	106	62.0
		Widow widower	24	14.0
		Total	171	100.0
4	Education	No school	11	6.4
		SD	8	4.7
		Junior High School	12	7.0
		Senior High School	63	36.8
		College	77	45.0
		Total	171	100.0
5	Elderly living in the same house	1 person	99	57.9
		2 persons	72	42.1
		Total	171	100.0

Table 1 shows that the results from 171 respondents found that the age of families who have the elderly were

21-30 years old, female, married, with a university degree, and living with 1 person.

Table 2: The Relationship between the Level of Resilience with the Level of Anxiety

Level Resilience	Anxiety Level							
	No Worry		Mild Anxiety		Moderate Anxiety		Total	
	F	%	F	%	F	%	N	%
Low	1	3.3%	26	87%	3	10%	30	100%
Moderate	33	27.3%	85	70.2%	3	2.5%	121	100%
High	10	50%	10	50%	0	0%	20	100%
Total	44	25.7%	121	70.8%	6	3.5%	171	100%

Spearman's rho statistical test value $p = 0.000$ ($\alpha = 0.05$)

The above table shows that the results of the frequency of family anxiety levels had mild anxiety and moderate resilience. The Spearman Rho statistical test has a value of value = 0.000. There was a relationship between the level of resilience and the level of anxiety of families who have the elderly in the face of COVID-19.

DISCUSSION

Resilience, according to Irawan, Dwisona & Lestari (2020), is a person's ability to cope with anxiety, stress, reactions to stress, and even depression of a pandemic

that is changing the way of life around the world. Resilience is also influenced by the status of the respondent, like age and status of marriage. It is in line with the research of Ramdan (2019) that an older age is more resilient than a younger age. An older age indicates a more competent age in determining problem solving and solutions. According to the factors, factors that affect resilience, like social support, In the family environment, family resilience is needed, especially in the current COVID-19 condition, because family resilience affects the lives of every family member and

affects and contributes to education, the economy, and socialization (Salamah, Suryani & Rakhmawati, 2020). In going through the difficult times of the COVID-19 pandemic, families are required to be able to survive in daily life by utilizing gender roles. It is supported by Kasdi & Saifudin (2020), which states that uncertain conditions make the family a target from a social and economic perspective, thus requiring cooperation between husbands, wives, and other family members in carrying out family tasks.

Most families who have the elderly at home do not experience severe disturbances in their anxiety, so there is no excessive feeling of fear or worry about COVID. This mild anxiety is related to the stress of everyday life. This anxiety causes individuals to be alert and increases the individual's perceptual field (Pasongli & Malinti, 2021). Anxiety disorders can occur at any age. A person has experienced young adulthood, already has both physical and mental maturity and has gained deeper experience in solving problems so that he is able to suppress the anxiety he feels. According to Setiawati *et al.* (2021) related to anxiety, women are more worried about their inability than men. Men are more exploratory active and have a strong mentality towards something that is considered threatening to them. This is in line with the research of Rayani & Purqoti (2020) where women are more anxious and sensitive than men. In general, men are better able to solve problems calmly, so that the anxiety experienced is lower than women.

Resilience is not a personality trait but something that involves behaviors, thoughts, or actions that anyone can learn. In the residential environment, there is support carried out by the surrounding community, such as bringing food and vitamins that are placed in front of each affected family's house. The better the resilience possessed by a person, the level of anxiety will decrease, and vice versa, if the resilience is getting worse, the level of anxiety will increase towards the level of panic. Because with resilience, a person can analyze and

change their perspective to be more positive and increase their ability to control their lives, according to the resilience function. So-called resilient families have a tendency to be stronger and not easily fall sick and anxious in the face of existing stressors. Similar observations have also been made in a COVID-19 related study with 761 participants (Kimhi *et al.*, 2020), where higher resilience is associated with lower levels of anxiety. Resilience is a modifiable trait that is highly responsive to psychological interventions, with well-designed resilience-building therapies likely to improve mental health (Mikocka-Walus *et al.*, 2020).

CONCLUSION

From the above study it is relevant that the level of family resilience had a moderate level of resilience. The level of family anxiety had mild anxiety. There is a fairly strong relationship between the level of resilience and the level of family anxiety. Individual, organizational, and institutional strategies must be recognised to guarantee that older adults are able to continue social contacts, preserve family ties, and maintain the ability to give or receive assistance during the pandemic. Forthcoming studies should emphasis on definite consequences and requirements of more vulnerable older adults to ensure their inclusion, both in public health recommendations and considerations made by policy makers.

Conflict of Interests

The authors declare that they have no conflict of interests.

ACKNOWLEDGEMENT

The authors would like to express their gratitude to the health workers in the working area of the Gedangan Health Center and the respondents who have assisted in this research. The authors also express gratitude to God for helping to complete this research.

REFERENCES

- Abidin, A. Z., & Julianto, E. K. (2020). Hubungan Fungsi Pemeliharaan Kesehatan Keluarga dengan Pencegahan Penularan COVID19 bagi Lansia di Desa Kadungrejo Baureno Bojonegoro. *Journal Ilmu Keperawatan Komunitas*, 3(2), 1-9.
- Efendi, F., Nursalam, N., Kurniati, A., & Gunawan, J. (2018, April). Nursing qualification and workforce for the association of Southeast Asian Nations economic community. In *Nursing Forum* (Vol. 53, No. 2, pp. 197-203).

<https://doi.org/10.1111/nuf.12243>

- Gayatri, M., & Irawaty, D. K. (2022). Family resilience during COVID-19 pandemic: A literature review. *The Family Journal, 30*(2), 132-138. <https://doi.org/10.1177/10664807211023875>
- Irawan, A. W., Dwisona, D., & Lestari, M. (2020). Psychological impacts of students on online learning during the pandemic COVID-19. *KONSELI: Journal Bimbingan dan Konseling (E-Journal), 7*(1), 53-60. <https://doi.org/10.24042/kons.v7i1.6389>
- Kasdi, A., & Saifudin, S. (2020). Resilience of muslim families in the pandemic era: Indonesian millennial muslim community's response against Covid-19. *Journal Penelitian, 81*-94.
- Kimhi, S., Eshel, Y., Marciano, H., & Adini, B. (2020). Distress and resilience in the days of COVID-19: Comparing two ethnicities. *International Journal of Environmental Research and Public Health, 17*(11), 3956. <https://doi.org/10.3390/ijerph17113956>
- Meng, H., Xu, Y., Dai, J., Zhang, Y., Liu, B., & Yang, H. (2020). Analyze the psychological impact of COVID-19 among the elderly population in China and make corresponding suggestions. *Psychiatry Research, 289*(112983), 19-21. <https://doi.org/10.1016/j.psychres.2020.112983>
- Mikocka-Walus, A., Stokes, M. A., Evans, S., Olive, L., & Westrupp, E. (2020). Finding the Power Within: Is Resilience Protective Against Symptoms of Stress, Anxiety, and Depression in Australian Parents During the COVID-19 Pandemic?. <https://doi.org/10.31234/osf.io/v5gpm>
- Minannisa, C. (2021). Kondisi stress lansia dimasa pandemi COVID-19 dan pencegahannya. <https://doi.org/10.31219/osf.io/j8t4y>
- Nicomedes, C. J. C., & Avila, R. M. A. (2020). An analysis on the panic during COVID-19 pandemic through an online form. *Journal of Affective Disorders, 276*, 14-22. <https://doi.org/10.1016/j.jad.2020.06.046>
- Oktavia, W. K., & Muhopilah, P. (2021). Model konseptual resiliensi di masa pandemi COVID-19: Pengaruh religiusitas, dukungan sosial dan spiritualitas. *Psikologika: Journal Pemikiran dan Penelitian Psikologi, 26*(1), 1-18. <https://doi.org/10.20885/psikologika.vol26.iss1.art1>
- Pasongli, G. S., & Malinti, E. (2021). Gambaran tingkat kecemasan keluarga tenaga kesehatan akibat pandemi covid-19. *Coping: Community of Publishing in Nursing, 9*, 127-134. <https://doi.org/10.24843/coping.2021.v09.i02.p01>
- Ramdan, I. M. (2019). Reliability and validity test of the Indonesian version of the hamilton anxiety rating scale (ham-a) to measure work-related stress in nursing. *Journal Ners, 14*(1), 33. <https://doi.org/10.20473/jn.v14i1.10673>
- Rayani, D., & Purqoti, D. N. S. (2020). Kecemasan Keluarga Lansia Terhadap Berita Hoax Dimasa Pandemi COVID-19. *Realita: Journal Bimbingan dan Konseling, 5*(1).
- Ridlo, IA. (2020). Pandemi COVID-19 dan Tantangan Kebijakan Kesehatan Mental di Indonesia. *Journal of Psychology and Mental Health, 5*(2), 155-64. DOI <https://doi.org/10.20473/jpkm.V5I22020.162-171>
- Salamah, A., Suryani, S., & Rakhmawati, W. (2020). Relationship Between Demographic Characteristics and Nursing Students' Resilience Working on Bachelor Thesis. *JPsycho, 16*(2), 110-125.
- Setiawati, Y., Wahyuhadi, J., Joestandari, F., Maramis, M. M., & Atika, A. (2021). Anxiety and resilience of healthcare workers during COVID-19 pandemic in Indonesia. *Journal of Multidisciplinary Healthcare, 14*, 1. <https://doi.org/10.2147/JMDH.S276655>
- Vibriyanti, D. (2020). Kesehatan mental masyarakat: mengelola kecemasan di tengah pandemi COVID-19. *Journal Kependudukan Indonesia, 69*-74. <https://doi.org/10.14203/jki.v0i0.550>
- Zhang, J., Yang, Z., Wang, X., Li, J., Dong, L., Wang, F., ... & Zhang, J. (2020). The relationship between resilience, anxiety and depression among patients with mild symptoms of COVID-19 in China: A cross-sectional study. *Journal of Clinical Nursing, 29*(21-22), 4020-4029. <https://doi.org/10.1111/jocn.15425>