A PICTURE OF ANXIETY IN THE ELDERLY DURING THE COVID-19 PANDEMIC IN THE PUSKESMAS AREA

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ABSTRACT

Currently, the elderly are one of the comorbid groups that are vulnerable to COVID 19, in the situation of the Corona Virus pandemic, usually anxiety comes in various forms including fear of death, this happens because of seeing the death rate due to the corona outbreak which is getting bigger day by day. The purpose of the study identified a picture of elderly anxiety as a comorbid Covid 19 in the city of Sedinginan, Rokan Hilir.Riau Regency. The design of this study is descriptive with a cross sectional approach. The research was carried out for 1 month from June 2021 to July 2021. Meanwhile, the research site was conducted in Sedinginan Village, Rokan Hilir Riau Regency, in 2021. The population is elderly in Sedinginan City, Rokan Hilir Riau Regency as many as 60 people with the "total sampling" method and research instruments using questionnaires. Univariate analysis is displayed in the frequency distribution. Result: research shows that out of 60 elderlies, the most elderly with high anxiety are 37 people (61,7%). Conclusion: that the elderly is of a high category and are recommended for the elderly to be able to control and manage anxiety well and can increase knowledge about the dangers of COVID-19 to the elderly so that they understand how to prevent the elderly from contracting COVID-19.

Keywords: Anxiety, Elderly, COVID-19

INTRODUCTION

The family is the main support system for the elderly in maintaining their health as well as an important role in caring for the elderly, if family knowledge is reduced it will have a negative impact on the daily activities carried out by the elderly in addition to knowledge, family attitudes are also a major influence on the health of the elderly, attitudes The family is very influential in elderly health care one of them is in fulfilling the Activities of Daily Living (ADL), in the process of aging you will definitely experience physical and psychological changes and tend to depend on meeting your basic needs, so family attitudes must be applied properly without offending the feelings of the elderly (Nixson, 2016).

Corona Virus Disease (COVID-19) is a new type of virus that has never been previously identified in humans. Clinical manifestations of COVID-19 usually appear within 2 days to 14 days after exposure. Common signs and symptoms of corona virus infection include symptoms of acute respiratory disorders such as fever, cough and shortness of breath. In severe cases it can cause pneumonia, acute respiratory syndrome, kidney failure and even death. COVID-19 cases in Indonesia as of April 14 2020 still show a significant increase in the number of infected patients by 4,839 people with 282 new cases, patients recovered 426 people and a death rate of 459 people (MorawskaL, CaoJ, 2020).

Changes experienced by the elderly physically, mentally and emotionally require a good attitude from the family because with a good attitude the family helps the problems faced by the elderly, so that the elderly receive happiness in old age, this attitude directs the elderly so that the elderly can still carry out activities according to their abilities and in moderation. If the attitude of the family is not good in caring for the elderly, it will have a negative impact on the health of the elderly. if the treatment or attitude of the family is not good towards the elderly.

Because in caring for the elderly, they must have procedures or a higher level of knowledge apart from education as well as from experiences gained by elderly families, because with a low level of family knowledge, it will also have a negative impact on mental health (Bintang, 2013).

Currently the elderly are one of the comorbid groups that are susceptible to COVID-19. There are 8 out of 10 deaths in the United States of America are elderly people aged over 65 years and infected with COVID-19 (CDC, 2020). Based on data from the CDC, it was found that aged 65-74 years are at 5x greater risk of being treated for COVID 19 and 90x more prone to be at risk of death due to COVID 19. In Indonesia, research results show that as many as 68% of the elderly experience COVID 19 and are hospitalized. With a mortality rate of 23% (Azwaretal, 2020).

In a situation of a Corona Virus pandemic, usually anxiety is present in various forms including fear of death, this occurs because the death rate due to the corona outbreak is getting bigger day by day. Fear of being infected with the corona virus or infecting other people. Fear of lack of availability of drugs because until now a vaccine or anti-covid 19 virus has not been found. Worried about losing jobs/income due to restrictions on leaving the house causing large-scale social restrictions to cause businesses to be empty of buyers, or even workplaces to close, fear of a lack of basic food ingredients due to panic throughout the community who buy up groceries until they are scarce on the market (Jarnawi, 2020).

The number of incidents of Covid 19 also occurred in the Sedindingan sub-district area in Rokan Hilir Riau, which was treated at the Sedindingan Community Health Center. The number of residents who experienced Covid-19 was 117 people, one of whom was an elderly, totaling 7 people aged 60-74 years. who don't wear masks or don't comply with health protocols (data from Puskesmas reports as cold).

The community in general already knows about the Covid 19 virus, especially the elderly because news is spreading from the public and social media that the Covid 19 virus easily attacks the elderly and according to news in the Kelurahan area as cold as 7 elderly people who died. Because the covid 19 virus is causing a group of elderly people to experience anxiety that causes anxiety in the elderly because of the transmission and the high death rate of covid 19. Based on the description above, the author is interested in conducting research research to find out the level of knowledge and anxiety in the elderly during the Covid 19 Pademi in Sedindingan Village, Rokan Hilir Regency.

RESEARCH METHODS

This research uses a type of descriptive research. Descriptive research is research with a method to describe a research result. The variable that is measured in this study is anxiety. The research was carried out for 1 month from March 2021 to April 2021. While the research location was carried out in Sedindingan City, Rokan Hilir Regency, Riau in 2021. The research consisted of 60 elderly people in Sedindingan City, Rokan Hilir Regency, Riau in 2020. The sample was the elderly in the city of Sedindingan, Rokan Hilir Regency, Riau. In 2002, 60 people met the

inclusion and exclusion criteria. The sampling technique used is Accidental sampling. The method taken by the author is to determine based on the subject who happens to meet the writer. The anxiety variable in this study was measured using the DASS instrument (Depression, Anxiety, Stress Scale). This instrument consists of three variables that are measured simultaneously. Each variable has 14 questions. In this study, researchers only used the anxiety variable. The measurement results of the anxiety variable are as follows: Normal: 0-7, Mild: 15-18, Moderate: 19-25, Severe: 26-35, Very Severe: >34

RESULTS AND DISCUSSIONS

Data description of the Anxiety Level of the Elderly in the city of Sedindingan, Rokan Hilir Regency. Riau during Pademi Covid 19 based on Elderly Characteristics. The data obtained is described in the form of a frequency distribution of each questionnaire. For more details, see the following description: An overview of the anxiety of the elderly in the city of Sedindingan, Rokan Hilir Regency. Riau during Pademi Covid 19, with the following description:

Table 1 Descriptive Anxiety of the Elderly in the city of Sedindingan, Rokan Hilir Regency.
Riau during Pademi Covid 19

Elderly anxiety	F	0/0
Low	23	38,3
High	37	61,7
Total	60	100

Based on the table above, it was found that out of 60 elderly people, the most elderly experienced low anxiety, namely 37 people (61.7%) and high anxiety as many as 23 people (38.3%).

Table 2. Questionnaire Answers for Each Perception Statement Item

No	Statement	Answer							
		SS	F	S	F	KD	F	TP	F
1.	Dry lips	4	6,7	10	16,7	16	26,7	30	50
2.	Hard to breath	3	5	12	20	16	26,7	29	48,3
3.	Unsteady legs	2	2,3	9	15	17	28,3	32	53,3
4.	Anxious self	5	8,3	22	36,7	18	30	15	25
5.	Limp and faint	0	0	10	16,7	13	21,7	37	61,7
6.	Excessie sweating	2	3,3	10	16,7	26	43,3	22	36,7
7.	Afraid of unclear reasons	2	3,3	12	20	14	23,3	32	53,3
8.	Difficulty swallowing	1	1,7	9	15	26	43,3	24	40
9.	Heart conscious	3	5	9	15	17	28,3	31	51,7
10.	Almost panickd	5	8,3	6	10	12	20	37	61,7
11.	Afraid	4	6,7	12	20	26	43,3	18	30
12.	Very scared	5	8,3	15	25	20	33,3	20	33,3
13.	worry	3	5	16	26,7	21	35	20	33,3
14	vibrate	4	6,7	17	28,3	11	18,3	28	46,7

Based on the table above, the answers to the questionnaire about anxiety were obtained, of the 14 questionnaire items, the most were (28.3%) the elderly strongly agreed to feel their hands shaking, (43.3%) the elderly sometimes sweated excessively and had difficulty swallowing and as many as (61, 7%) never fainted and fainted and never nearly panicked.

CONCLUSION

Based on the research, the results obtained from 60 elderly, mostly elderly with normal anxiety, namely 25 people (41.7%) in the city of Sedindingan, Rokan Hilir Regency. Riau during Pademi Covid 19 based on Elderly Characteristics.

In line with Sitohang's research, (2021), the results obtained showed that the anxiety level of the elderly was in the mild / asymptomatic category. This was proven because the majority of respondents, namely 20 respondents (63%) had no symptoms and a small number experienced mild anxiety. However, there were also respondents experiencing severe anxiety, 1 person (4%). This shows that there are still elderly people who feel anxious about COVID-19 and also another study conducted by Guslinda, (2020) also found that the most (30%) of the elderly are experiencing anxiety.

Anxiety in the elderly arises from a vague and diffuse feeling of worry related to feelings of uncertainty, helplessness, and unspecified objects. This anxiety is manifested directly through physiological changes such as (trembling, sweating, increased heart rate, abdominal pain, shortness of breath). breath) and by changes in behavior such as (anxiety, fast speech, surprised reactions) and indirectly through the emergence of symptoms as an effort to fight anxiety (Febrina & Lesmana, 2015).

Based on the answers to the questionnaire, it was found that (36.7%) the elderly agreed that they felt anxious, (28.3%) the elderly felt shaking in their hands. Anxiety is fear, worry and anxiety that have an impact on behavior changes such as withdrawal from the environment, difficulty focusing on activities, difficulty eating, irritability, low emotional control of anger, illogicality, insomnia (Jarnawi, 2020). That is why with sufficient knowledge, anxiety can be reduced and of course the negative effects of anxiety itself. Conversely, lack of knowledge can cause anxiety. As found by Manurung et al. (2020) students with low knowledge have severe anxiety.

Efforts that can be made to reduce the anxiety of the elderly are ensuring that the elderly always maintain physical distance, wash their hands, wear masks, eat nutritious food, and do light exercise. Hobbies that can be done indoors, such as reading books, painting, or watching movies, can still be done. Explanations should be given as concisely as possible to the elderly. If the elderly understand, then they will feel safe and peaceful. Quality of life will increase. Social relations with family and friends through communication tools must be maintained. Emotional support is especially important for seniors living alone. They are prone to anxiety and confusion during this uncertain period (Minannisa 2020).

The government should provide free telephone counseling services for the community, especially the elderly. Families and neighbors should look after each other for the elderly who live near them. They can send regular food and medicines to the elderly's homes so they don't have to leave the house too often. Elderly with Alzheimer's disease, depression, or other psychiatric disorders should be monitored more closely because they have a risk of suicide. Psychosocial needs are very important for the elderly. (Yuliana, 2020).

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