THE ANXIETY LEVEL AMONG MOTHERS DURING THE COVID-19 PANDEMIC

Septinda R. Dewanti¹, Zeti Novitasari², Indah Dwi Jayanti³

Abstract: The COVID-19 pandemic has resulted in various social and economic problems that have caused anxiety for mothers in Indonesia. The study aims to determine the difference in the level of anxiety between stay-at-home mothers and working mothers during the COVID-19 pandemic and its causes. The study was using a survey method. Two hundred seventy-six mothers completed the survey. An instrument used in the study was Beck Anxiety Inventory (BAI), while the statistical analysis used the independent sample T-test. The result shows no significant difference in the anxiety level between stay-at-home mothers and working mothers. Factors that influence the lack of difference in anxiety level include age, education level, and culture. Both working mothers and stay-at-home mothers face the same level of anxiety during the Covid-19 pandemic. We suggest providing online activities such as training activities for mothers to boost their resilience.

Keywords: covid-19, anxiety, mental health, woman, family

INTRODUCTION

The number of COVID-19 victims in Indonesia has been increasing gradually. The COVID-19 has resulted in an ongoing erratic situation in the country and caused anxiety among Indonesians (Satgas COVID-19, 2020).

Anxiety is related to feeling worries, primarily because of overthinking situations, resembling other negative emotions (Beck, 1979; Beck et al., 2005, 2015). People tend to experience negative thinking when facing unfamiliar
situations. In that sense, anxiety comes from thoughts and can be reduced by learning information about unexpected situations. One way to confront fear is by finding a solution to the problem as soon as possible.

Generally, it is typical for people, including those who are mothers, to experience anxiety in a difficult situation, such as in the COVID-19 pandemic. The role of families, especially mothers in the family, in dealing with COVID-19 is significant (Ashidiqie, 2020; Hua & Shaw, 2020). If the anxiety lasts for a long time because a mother does not have the coping skill, her mental health may be negatively affected.

Anxiety is a natural response to difficult situations (Getzfeld, 2010; Root, 2000). It is an excessive fear that responds to threats from the surrounding (Getzfeld, 2010). Anxiety mostly happens because of the anticipation of what will happen. People consider the expectation of the unfamiliar situation is worse than the actual condition (Beck et al., 2005). On the other hand, people feel calmer if they have information about the difficulties they face, even if the information about the situation is not good news. It is still better than lacking knowledge about the problem (Getzfeld, 2010).

The effect of anxiety, if people cannot cope with the situation, is spoiling concentration and performance. Anxiety disorder has high control on daily life and roots a great deal in the individual's suffering. In addition to severe psychological effects, anxiety also has significant social and economic impacts (Demir, 2018; Overbeek et al., 2001).

COVID-19 may result in a psychological disturbance to those infected and uninfected (Abidah et al., 2020; Hidayati, 2018; Mazza et al., 2020; Palgi et al., 2020; Wang et al., 2020). Naturally, patients who are tested positive for COVID-19 show more symptoms of psychopathology than those who are not infected (Mazza et al., 2020).

During the COVID-19 pandemic, people reported experiencing poor sleep (Favieri et al., 2020), high anxiety and depression, high distress, and PTSD (Casagrande et al., 2020)(Casagrande et al., 2020). In addition to that, the quarantine period has also taken a toll on society. Quarantine is applied as the principal approach to decrease the transmission of coronavirus. But, the psychological effects of the quarantine are harmful to both the quarantined and unquarantined (Lu et al., 2020). Quarantined people worry about their health and their family's health, while unquarantined people are also concerned about their family members in the quarantine and worry about their health.
Quarantine policy causes numerous impacts on the economy (Abdi, 2020). Another impact of the pandemic is the work-from-home policy that applied widely. On the one hand, workers are seemingly given extra time off work, but in reality, it provides more burden (Boals & Banks, 2020). For working mothers, especially, the demand to work and take care of their family at the same time is a new challenge, which is likely to affect their well-being as a mother.

Further, the mother's psychological condition affects the development of children (Levy et al., 2019). The mother's psychological state is crucial as the relationship between mother and child will affect the child's success in interacting with other people later in life (Nguyen et al., 2020). A study shows that women are more affected by economic stress in adulthood than men (Morrissey & Kinderman, 2020). The financial problems during the pandemic causing even more pain, as the economic impact on families in Indonesia is enormous. Therefore, it has become a significant concern that the effect of excessive anxiety during the pandemic will also harm children's development (Rollè et al., 2017; Vismara et al., 2016, 2019).

Even though the mother's mental health condition during the pandemic is instrumental, unfortunately, studies on the role of the family, especially mothers, are still limited. A survey conducted in the Middle East found that women had higher stress levels than men during the COVID-19 pandemic (Al-Rabiaah et al., 2020; Alonzi et al., 2020). Hence, research on the level of anxiety among mothers in Indonesia, both stay-at-home and working mothers, is imperative.

The purpose of this study is to determine the difference in anxiety levels between stay-at-home mothers and working mothers during the COVID-19 pandemic. The results of this study will illustrate the anxiety level among mothers in Indonesia. In response to the unpredictable nature of the pandemic, it is essential to prepare policies for parents, especially mothers at home.

**METHOD**

**Sample**

This research employed the quantitative survey design. The subjects of the study were mothers in East Java Indonesia. The total number of research participants was 276, consisting of 188 working mothers and 88 stay-at-home mothers aged twenty-two to fifty-nine years. Data on the participants’ age
range are presented in Table 1. The sample was determined by random sampling. Another characteristic of the participants is they are all Javanese women.

<table>
<thead>
<tr>
<th>Age range</th>
<th>Working mother</th>
<th>Housewives</th>
</tr>
</thead>
<tbody>
<tr>
<td>21–30</td>
<td>52</td>
<td>17</td>
</tr>
<tr>
<td>31–40</td>
<td>84</td>
<td>48</td>
</tr>
<tr>
<td>41–50</td>
<td>40</td>
<td>15</td>
</tr>
<tr>
<td>51–60</td>
<td>12</td>
<td>8</td>
</tr>
<tr>
<td>Total</td>
<td>188</td>
<td>88</td>
</tr>
</tbody>
</table>

The ratio of the respondent groups between working mothers and stay-at-home mothers is 2.1: 1. This is proportional to the number of all working mothers and housewives in East Java, namely 3: 1.

We are also paying more attention to the participants’ educational backgrounds. Data on respondents’ education can be seen in Table 2.

<table>
<thead>
<tr>
<th>Education Degree</th>
<th>Working mother</th>
<th>Housewives</th>
</tr>
</thead>
<tbody>
<tr>
<td>High School</td>
<td>30</td>
<td>26</td>
</tr>
<tr>
<td>Bachelor</td>
<td>117</td>
<td>57</td>
</tr>
<tr>
<td>Master</td>
<td>33</td>
<td>5</td>
</tr>
<tr>
<td>Total</td>
<td>188</td>
<td>88</td>
</tr>
</tbody>
</table>

**Instruments**

The research instrument was adopted from the Beck Anxiety Inventory (BAI) which was translated into Indonesian. The adaptation of the inventory was completed by an expert, a lecturer on the Indonesian language, with more than 2 years of experience in the field, and a bachelor’s and master’s degree in the Indonesian Language. The internal consistency for the BAI was Cronbach’s \( \alpha = .94 \), while the test-retest reliability for BAI = .67 (Fydrich et al., 1992). The BAI scoring is as follows:

- A score of 0–21 = low anxiety
- A score of 22–35 = moderate anxiety
- A score of 36 and above = potentially concerning level of anxiety

**Procedures**

After all, participants gave informed consent, they filled out information about demography and gave their responses to the BAI which was designed online using Google Form. Lastly, respondents answered questions about the sources of their anxiety during the pandemic.
Data Analysis
Data analysis was conducted using SPSS. To analyze the difference in anxiety levels between stay-at-home mothers and working mothers, we used ANOVA. At first, we conducted a homogeneity test as a condition for determining the parametric test. After that, the data were analyzed using ANOVA. Other data about the source of anxiety were analyzed by the following procedure: (1) grouping respondent’s opinions and (2) comparing the presentation of each source of anxiety conveyed by the respondent.

FINDINGS
The research found that the anxiety levels of both working and stay-at-home mothers are not significantly different. Based on the BAI instrument, both groups experience anxiety because of the COVID-19 pandemic. The result of the statistical analysis of the sig. (two-tailed) from ANOVA is .713. The sig. (two-tailed) is more than .005. The result of ANOVA is presented in Table 3.

Table 3. Means and Standard Deviations for Response Rates

<table>
<thead>
<tr>
<th>Anxiety Level</th>
<th>Working Mothers</th>
<th>Housewives</th>
</tr>
</thead>
<tbody>
<tr>
<td>Means</td>
<td>23.53</td>
<td>23.1</td>
</tr>
<tr>
<td>SD</td>
<td>10.19</td>
<td>7.40</td>
</tr>
</tbody>
</table>

Table 3 provides information about the result of the statistical analysis. Overall, the table consists of the data about the number of respondents (N), mean, and standard deviation.

The homogeneity test shows that the data are homogenous, thus qualified to be analyzed using the parametric test. The parametric test shows that the mean scores of both working mothers and stay-at-home mothers are similar, namely about 23. This means they are at a moderate level of anxiety. The mean score of anxiety level among the working mothers is slightly higher than that among stay-at-home mothers. The difference in mean score, however, is only about .4. Data about mean scores show that there is no significant difference in the anxiety level of working mothers and stay-at-home mothers. This finding is supported by the results of the ANOVA analysis that shows the sig. (two-tailed) of .713 (more than .005). This suggests that the level of anxiety between working mothers and stay-at-home mothers are the same.
By proposing the question of “What are the main resources that make you feel anxiety?” this study has identified situations that make mothers experience anxiety. A summary of the causes of maternal anxiety in Indonesia is presented in Table 4.

<table>
<thead>
<tr>
<th>Causes of Anxiety</th>
<th>% (percentage)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Information on socio-economic impacts</td>
<td>62.9%</td>
</tr>
<tr>
<td>Information about victims</td>
<td>60.3%</td>
</tr>
<tr>
<td>Tired of not being able to leave the house</td>
<td>44.7%</td>
</tr>
<tr>
<td>Unable to work normally</td>
<td>42.4%</td>
</tr>
<tr>
<td>The price of necessities that went up during the pandemic and the family's financial condition</td>
<td>37.8%</td>
</tr>
<tr>
<td>A lot of children's work</td>
<td>15.3%</td>
</tr>
</tbody>
</table>

Five conditions are causing anxiety during a pandemic. The first one is news on the social and economic impacts, followed by news about the victims of Covid-19. The next reason is the weariness of being in quarantine and the physical distancing policy. Moreover, the increasing prices of daily needs cause worries among mothers. The last source of anxiety during the pandemic is the children’s school assignments.

**DISCUSSIONS**

The research found no significant difference in the level of anxiety between working mothers and stay-at-home mothers. It also discovered that anxiety among working mothers and stay-at-home mothers in Indonesia during the COVID-19 pandemic is at a moderate level.

Anxiety is related to cognitive function (Eysenck et al., 2007) (Ferreri et al., 2011) (Short et al., 2002). Additionally, a study found that the human ability to cope with emotions is related to working memory (Ciriegio et al., 2020). It matches with other research that found that an individual's thinking ability determines their level of anxiety (Smits et al., 2012). Based on their educational background, the respondents in this study ranged from high school graduates to master's degree holders. As they have nearly the same cognitive function, their anxiety is likely at the same level.

It is also possible that education background plays a role in this result because one factor affecting individual resilience is the level of education (Jones & D'Errico, 2019). Another study on the relationship between resilience and education level found that mothers with undergraduate teaching
and higher tended to be more able to avoid depressive symptoms (Peng et al., 2019).

Resilience is a significant aspect in helping individuals cope with stressful situations—the level of resilience influence the ability to cope with anxiety (Vinkers et al., 2020). The research examined the relationship between resilience, and psychological distresses and found that resilience and psychological distress were negatively correlated (Fradelos et al., 2017; Smith & Yang, 2017).

The anxiety level among working mothers and stay-at-home mothers is slightly different because these two groups are in the same range of age, between 22 years and 59 years old. Previous research shows that young women are the group who is susceptible to experiencing stress during the COVID-19 pandemic (Elbay et al., 2020).

Another aspect that influences anxiety is culture (Beck et al., 2005, 2015; Hofmann & Hinton, 2014). Culture stimulates the way people cope with difficult situations and seek help (Hwang et al., 2008). In Javanese culture, the concept of success for Javanese women lies not in professional success or other achievements but in how she takes care of her family. Javanese culture sees successful women as those who can maintain the family's well-being (Triratnawati, 2005). Based on this concept, both working and non-working mother values their family as the primary focus. As a result, they have the same anxiety in protecting their family in the COVID-19 pandemic.

Indonesian women are ruled by a culture (Dania & Singhaputargun, 2020). Culture has an essential role for Indonesian women in managing coping. Studies have shown that an Indonesian woman's identity lies in being a decent mother and a skilled wife (Ford & Parker, 2008; Miller & Kirschbaum, 2019; Triratnawati et al., 2014). Indonesian women are committed that women must be patient and accepting (Candrarini & Ranggawarsita III, 2020), holding back, and be able to hide their emotions (Musthafawi et al., 2017). Those values teach Javanese women how to regulate their emotions. The research found that emotion regulation has countless impacts on anxiety traits (Strickland & Skolnick, 2020).

Javanese women have the attitude to be involved, responsible, and partake in fulfilling household needs. They are also proven to have a robust optimistic attitude compared to women from other ethnicities in Indonesia (Agustina, 2014). Modern Javanese women still adhere to the old Javanese virtues. They accentuate their self-improvement as a woman along with their
given role (Budiati, 2010). The research found mother's resilience is a significant factor in encouraging children's self-confidence (Dewanti & Novitasari, 2020). In that sense, how they manage their anxiety is influenced by their values as Javanese women.

From these explanations, we highlight that the factors that influence the absence of differences in the level of anxiety among working mothers and stay-at-home mothers are the same education level, age range, and culture between working mothers and stay-at-home mothers in this study. Because the respondents have the same characteristics in these three aspects, their response to the COVID-19 pandemic does not differ significantly.

The primary reasons that mothers in Indonesia experience anxiety stem from concerns about the uncertain situation during the pandemic. For Indonesian mothers, COVID-19 is a new issue. They have little information about COVID-19—the lack of details about COVID-19 causes anxiety among Indonesian mothers.

News on the economic impact and the number of COVID-19 victims are the two main factors for anxiety because they create a sense of certainty about what to do. On the other hand, their concern arises when mothers believe they cannot anticipate the COVID-19 situation. Therefore, government efforts are needed to filter information about COVID-19 so that mothers and the public obtain accurate and convincing data.

The last reason for anxiety among mothers is the task of accompanying their children to study from home. Eventually, it is not a significant factor. Only 15% of respondents stated that this factor caused their anxiety. Few women are concern about how to accompanying their children because they consider that looking after their children is the task as their service to their families. This culture contributes to the priceless value that a woman feels happy if her family is happy. In that sense, their new job of accompanying their student is not a burden.

CONCLUSION AND RECOMMENDATION

Conclude your COVID-19 has led to various changes in the lives of the global community. The novel coronavirus is impacting economic conditions, education, and social sectors. Following the effects, both working mothers and stay-at-home mothers experience anxiety. Psychological interventions are needed to empower their resilience during the Covid-19 pandemic.
From the research, we can conclude that the anxiety level between the two groups, namely the stay-at-home mothers and working mothers, does not differ significantly. The two groups struggle with this condition to sustain their families. Factors that influence the same level of anxiety among stay-at-home mothers and working mothers in Indonesia are age, education level, and culture. The Javanese culture, fortunately, is a factor supporting the resilience of mothers in Indonesia.

To reduce the negative impact of anxiety in dealing with COVID-19 is necessary to have reliable information about COVID-19 so that mothers do not suffer from hoaxes. Besides, it is significant to conduct women empowerment activities online, such as training activities to improve their resilience.

REFERENCES


