



Relationship between emotional regulation and anxiety among nurses during the Covid-19 pandemic

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ABSTRAK

Latar Belakang: Penyebaran wabah *The Coronavirus Disease (COVID-19)* dalam waktu yang relatif cepat terjadi hampir di seluruh negara. Fenomena ini menyebabkan terjadinya perubahan pada berbagai aspek kehidupan, seperti kesehatan, ekonomi, sosial, psikologis, budaya dan lainnya. Respon psikologis yang dialami oleh petugas kesehatan yaitu perasaan cemas tentang kesehatan diri sendiri dan penyebaran virus pada keluarganya. Oleh karena itu, perawat perlu memahami masalah yang sedang dihadapi sehingga tidak kesulitan dalam mengenali emosi yang ada dalam dirinya. Kemampuan seorang perawat dalam meregulasi emosi sangat diperlukan untuk memfokuskan diri dalam menghadapi suatu masalah.

Tujuan: Penelitian ini bertujuan untuk mengetahui hubungan regulasi emosi dengan kecemasan perawat pada masa pandemi COVID-19.

Metode: Jenis penelitian ini adalah penelitian kuantitatif dengan desain deskriptif korelasi dan menggunakan pendekatan *cross sectional*. Teknik pengambilan sampel yang digunakan yaitu *accidental sampling* sejumlah 202 responden, yang dilakukan selama bulan Juli 2020. Responden mengisi kuesioner yang diberikan oleh peneliti melalui *online google form*. Instrumen penelitian yang digunakan adalah *Emotion Regulation Questionnaire (ERQ)* dan kuesioner kecemasan dengan *Coronavirus Anxiety Scale (CAS)*.

Hasil: Hasil analisis *pearson product moment* didapatkan *p value* $0,007 < 0,05$ sehingga dapat disimpulkan bahwa terdapat hubungan antara regulasi emosi dengan kecemasan perawat pada masa pandemi COVID-19.

Kesimpulan: Perawat yang memiliki kemampuan regulasi emosi yang baik tidak akan mengalami kecemasan pada masa pandemi COVID-19. Diharapkan perawat mampu mengendalikan emosi yang ada dalam dirinya sehingga dapat mengenali masalah dan menentukan tindakan yang tepat, dengan demikian kecemasan tidak akan terjadi.

KATA KUNCI: *covid-19; kecemasan; perawat; regulasi emosi*

ABSTRACT

Background: *The Coronavirus Disease (COVID-19) outbreak occurred in almost all of countries. This phenomenon causes changes in various aspects of life, such as health, economic, social, psychological, cultural, and more. Psychological responses experienced by health workers are the feelings of anxiety about their health and the spread of the virus to their families. Hence, nurses need to understand the problems that being faced, therefore they have no difficulties in recognizing their emotions. The ability of nurses to regulate their emotions is needed to focus on dealing with a problem.*

Objectives: *This study aims to determine the relationship between emotional regulation and anxiety among nurses during the COVID-19 pandemic.*

Methods: *This is quantitative research with a descriptive correlation design and a cross sectional approach. The sampling technique that used was accidental sampling with a*

total of 202 respondents, which was carried out during July 2020. Respondents filled out questionnaires that given by the researcher trough online google form. The research instruments used were Emotion Regulation Questionnaire (ERQ) and anxiety questionnaire with Coronavirus Anxiety Scale (CAS)

Results: *The results of the pearson product moment analysis obtained that p-value is $0.007 < 0.05$. It can be concluded that there is a relationship between emotional regulation and anxiety among nurses during the COVID-19 pandemic.*

Conclusions : *Nurses who have good emotional regulation skills will not experience anxiety during the COVID-19 pandemic. Nurses are expected to be able to control their emotions, so they can recognize problems and determine appropriate actions, so that anxiety does not occur.*

KEYWORD: *covid-19 pandemic; anxiety; emotional regulation; nurses*

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INTRODUCTION

The COVID-19 outbreak has spread at the end of 2019 in Wuhan, Hubei, China (1). In a relatively short period, the outbreak spreads to almost all countries (2). According to World Health Organization on 6 April 2020, there were 1,278,523 persons infected with COVID-19 (3). In Indonesia, the first COVID-19 case was discovered on 2 March 2020 and detected in almost all provinces and cities (4). This phenomenon causes various life changes. Not only influences health aspect, but also it has an impact on economic, social, culture, and other aspects (5). Psychological responses faced by health workers towards the pandemic coronavirus infectious disease is increasing due to the anxiety about personal health and spreading the COVID-19 to family (6). They also might feel depression caused by shortages of personal protective equipment (PPE) (7). Moreover, health workers especially nurses are at increased risk for exposure to COVID-19, a heavy workload, moral dilemma, and environment that is different from what they are familiar with (6,8,9).

Health workers have high job demands like long working hours, increasing the number

of patients, lack of social support due to having social stigma against frontline health workers, personal protective equipment that restricts movement, lack of information about long-term exposure to infected persons, and fear of frontline health workers who can transmit COVID-19 to friend and family because of their field of work. These cause them to have anxiety (10). A research conducted by Chen et al, conveys that the health workers feel anxiety because protective supplies have not been fulfilled when performing action to patients (6). Healthcare workers, especially nurses, are a group that is very vulnerable to infection because they are at the forefront in dealing with the spread of COVID-19.

Nurses are required to be able to cope with anxiety that they have experienced. Nurses with psychological disorders need to comprehend the problems thoroughly, their mind related to the problems, and their emotions experienced. The understanding can help nurses determine nursing actions in providing optimal care to patients. Nurses who do not understand problem encountered will have difficulties in identifying the emotions. The nurses' ability to regulate the

emotions is very necessary to focus on dealing with a problem (11).

Emotion regulation as intrinsic and extrinsic processes is responsible for monitoring, evaluation, and modifying emotional reactions intensively and specifically to achieve goals (12). Emotion dysregulation causes individuals to be unable to create reasonable evaluation, not creative, and unable to make decision in various contexts(13). Davis, Griffith., Thiel., & Connelly, show that emotion regulation can affect goal and performance in the service sector (14). Gross states that emotion regulation can dampen, or maintaining emotion depends on how someone experiences and expresses the emotions. Emotion regulation involves all strategies used consciously or unconsciously to increase, maintain, or decrease one or more components of emotional response like feeling, behaviour, and physiological response (12). The study aimed to determine the relationship between emotion regulation and nurses' anxiety during the COVID-19 pandemic.

MATERIALS AND METHODS

The study was a quantitative research with a descriptive correlation design and cross-sectional approach. The population were nurses working in health centers and hospitals throughout some of province in Indonesia. The sample were taken by accidental sampling during July 2020 numbered 202 respondents. Respondents filled out questionnaires that given by the researcher trough online google form. The research instruments used were Emotion Regulation Questionnaire (ERQ) and anxiety questionnaire with Coronavirus Anxiety Scale (CAS).

Univariate analysis was in the form of frequency distribution table displayed in a percentage table. Then, bivariate analysis used pearson product-moment correlation.

RESULTS AND DISCUSSION

RESULTS

The results of filling out the questionnaires were then continued by calculating univariate and bivariate analysis to find out the relationship between emotion regulation and nurses anxiety during the COVID-19 pandemic.

Table 1. Frequency distribution based on nurses' emotion regulation (n=202)

Emotion Regulation	Frequency (f)	Percentage (%)
High	76	37.6
Fair	124	61.4
Low	2	1.0
Total	202	100

Table 1 describes that majority of nurses emotion regulation is in "fair" category as many as 124 respondents (61.4%). This is in line with a research conducted by Nafisah, Khatrine and Juwariyah (2021) resulting that most of respondents experienced "fair" emotion regulation by 41 people (68.3%) of 60 respondents (15). Syahadat (2013) said that emotion regulation is an expected way to assist in facilitating emotional needs (16).

The results of this study indicate that the majority of nurses emotion regulation is in "fair" category. Nurses can regulate some of their emotions. Some nurses prefer to keep their emotions to themselves, hide their feelings, and when they feel sad they decide to didn't express it. Nurses also claimed to be able to change their views on their emotions, so that, they don't feel sad or angry. But sometimes nurses also can't think well when faced with stressful situations.

Emotion regulation can be conducted through two ways namely intrinsic (regulate emotions in individuals) and extrinsic (feel or regulate someone's emotions) (17). Factors affecting emotion regulation stated by Ratnasari and Suleeman (2017) were (1) age; the older a person gets, the more problems they face and the better emotion regulation they have, (2)

family; each family member has different way to cope with problem that will be an example for other family members, (3) environment; it is about friends and the media used will affect the emotions, (4) cognitive; it will have an impact on how to interpret an event related to the emotions (18).

Table 2. Frequency distribution based on nurses' anxiety (n=202)

Anxiety	Frequency (n)	Percentage (%)
Severe	7	3.5
Moderate	10	5.0
Mild	114	56.4
No Anxiety	71	35.1
Total	202	100

Table 2 reports that most of nurses experiences mild anxiety as 114 people (56.4%). It is supported by a study by Situmorang and Sudharmono (2021). They stated that most of nurses who worked in emergency departments during the COVID-19 faced mild anxiety as many as 6 persons (40%) of 15 respondents (19). Lautan and Savitri (2021) explained that 117 persons (97.7%) of 129 nurses were in mild anxiety; it was due to adaptation to new habits against COVID-19 (20).

Problems caused by COVID-19 are not only health disorders but also social, economic, and mental; one of them is anxiety (21). Cheng et al (2020) illustrated that health workers have increase of physiological problems in facing the COVID-19 pandemic due to the anxiety (22). Anxiety is vague feeling due to fear or discomfort followed by a certain response. If the feeling is not given by the right intervention, it will be chronic anxiety that can interfere with daily activities (23).

Table 3. The Relationship between emotion regulation and nurses anxiety

Variable	Mean	Standard Deviation	r-count	p value
Emotion Regulation	48.19	6.755	-0.191	0.007
Anxiety	7.4	2.743		

Table 3 is the analysis result of pearson product-moment obtained p-value is 0.007 meaning that p-value is lower than 0.05, this shows that there is a significant relationship between emotion regulation and nurses anxiety during the COVID-19 pandemic. The better emotion regulation the nurses get, the lower anxiety they felt. Vice versa, the lower emotion regulation the nurses have, the higher anxiety they get. The result is in line with statement of Gross and Thompson (2006) that someone having a good emotion regulation will perform re-assessment of emotions and can control instruction on anxiety suppression, otherwise, individuals who have a bad emotion regulation are unable to do re-assess of emotions in order to control anxiety suppression (24).

DISCUSSION

Nurses feel anxiety during the COVID-19 pandemic. With the number of COVID-19 cases increased, it makes nurses worry about contracting the virus, both transmitted from patients and colleagues. According to Aprisandityas and Elfida (2012), when individuals get stressful situations on the environment and social life, they are in a state of being anxious. It means that when the individuals' cognitive is under pressure from environment and social life, it can produce anxiety as a reaction to the impending danger (25).

Nurses' anxiety can interfere with the work performance. As the frontline health workers handling the COVID-19 outbreak, nurses are required to control the emotions and provide nursing care professionally without worry or fear. Emotion regulation can decrease less adaptive emotion and increase significantly learning ability including learn to respond situation more adaptive (26). In this case, nurses must conduct emotional management to minimize the anxiety.

Nurses who are able to manage the emotion well or have ability of high emotion regulation,

they will not feel anxiety in facing the COVID-19 pandemic. Nurses who are still having anxiety about the COVID-19 pandemic need to train their mental and focus on their mind to reduce anxiety they felt. Managing emotions in individuals can affect anxiety and even their psychology. A good emotion regulation can reduce anxiety so that nurses can show professional performance.

CONCLUSION AND RECOMMENDATION

In this study, it was found that there is a relationship between emotion regulation and nurses anxiety during the COVID-19 pandemic. It is expected that nurses comprehend their psychological condition and are able to regulation the emotions to focus on dealing with the problems, thus they are still able to determine the right intervention when providing nursing care to patients. Nurses are expected to be able to manage their emotion in order to reduce the anxiety when take care of patients. A competent expert in psychology are needed to help improve psychoeducation of nurses who experience anxiety, so that they can assist nurses in controlling psychological disorders.

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