



STUDY OF THE INFLUENCE OF COVID-19 REPORTING MEDIA ON THE MENTAL HEALTH OF INDONESIAN COMMUNITY WITH STRUCTURAL EQUATION MODEL (SEM) APPROACH

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ABSTRACT

The coronavirus outbreak phenomenon has become a headline that colors the daily news that the World Health Organization (WHO) identifies the virus as a novel Coronaviruses disease (Covid-19) designated a global pandemic. This pandemic has spread to almost all countries globally and infected millions of people in it. This pandemic has spread to almost all countries globally and infected millions of people in it. In a short time, almost all news media reported about the Covid-19 pandemic starting from prevention, positive diagnosed characteristics of Covid-19, and news of the impact that will be felt if someone is known to be affected by Covid-19. The news that circulated not only happened but also much fake news emerged, which caused more pressure on the community. The World Health Organization (WHO) identifies that many of the rumors and misinformation that spread fear in this community mostly come from social media. Therefore, there must be an effort made by a study to find out and test whether there is an influence of the Covid-19 news media on the mental health of the Indonesian people. Based on the results of SEM calculations obtained, media factors that concern mental health are the role of media, content media, media frequency, and media sources. These four things have contributed to mental health factors, namely anxiety, and depression. Depression and anxiety are mental health factors.

Keywords: Covid-19, Mental Health, Structural Equation Modelling.

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1. INTRODUCTION

Today, the phenomenon of the outbreak of the Coronavirus becomes a headline that colors the daily news. The emergence of cases of symptomatic diseases such as pneumonia that have not been previously identified was initially found in Wuhan City, China in December, late 2019. Then by the World Health Organization (WHO) identified the virus as a novel Coronavirus disease (Covid-19), which on March 11, 2020, was designated as a global pandemic. This pandemic has spread to almost all countries globally and infected millions of people in it. Based on data from WHO as of April 23, 2020, the pandemic cases have targeted 2,647,349 people who have been confirmed positive for Covid-19 and 175,694 confirmed deaths due to Covid-19. In Indonesia alone, as of April 23, 2020, there were 8,211 positive confirmed cases of Covid-19 and 689 others died.

Efforts to break the chain of the spread of the virus make millions of people in Indonesia must be at home, schools and campuses are housed, even work from home must be done. In addition to all the restriction policies taken by the government, the government also seeks to increase public awareness of the dangers of the Covid-19 outbreak, including through websites and social media. Many of them report what Covid-19 is, how the characteristics or symptoms of the disease from health impacts to effects from various social and economic aspects. In a short time, almost all news media reported about the Covid-19 pandemic starting from prevention, positive diagnosed characteristics of Covid-19 and news of the impact that will be felt if someone is known to be affected by Covid-19.

News about covid-19 that is growing rapidly in Indonesia impacts the mental stress felt by Indonesia's people. The news that circulated not only happened but also much fake news emerged, which caused more pressure on the community. The World Health Organization (WHO) identified many rumors and misinformation that spread fear in this community mostly came from social media (Mar/2020). Many studies say that social media exposure is one of the vital factors that cause

increased rates of post-traumatic stress disorder (PTSD), and it also occurs during the Covid-19 pandemic. As reported by CNN Indonesia (Wednesday/22) that the demand for antianxiety drugs has increased since the Covid-19 pandemic, this indicates that this pandemic not only impacts the community physically but also has an impact on psychological health that can result in mental health disorders that can occur. Therefore, there must be an effort made by a study to find out and test whether there is an influence of the Covid-19 news media on the mental health of the Indonesian people.

To minimize the influence of news media or social media on the mental health of people in Indonesia need to do some testing. The test is done to describe mental problems that occur in the community, one method that can be used to find out that there are factors that influence a test is the Structural Equation Model (SEM) method (Kreitner, 2007). The advantage of the SEM method with other methods is that with the SEM method we can clearly describe the model of a study that we do along with factors that affect or are related to the research conducted (Jason, 2009). Therefore, modeling factors that impact or are related between the Covid-19 news media and the mental health of the People of Indonesia will be done with the SEM (Structural Equation Modeling) method. The results of the SEM model can be expected to be known what factors affect and relate to provide preventive recommendations that can be done to reduce the impact of media coverage about Covid-19 on people's mental health in Indonesia.

2. RESEARCH METHODS

This study is quantitative research with questionnaires as a research measuring tool using descriptive research methods, where the descriptive method is fact-finding with the proper interpretation (Neny, 2009) and then processed using the Structural Equation Model (SEM). Structural Equation Modeling is a multivariate statistical technique that combines factor analysis and regression analysis (correlation), which aims to test the relationships between variables in a model, be it between indicators with their constructs, or relationships between constructs (Santoso, 2007).

In addition, the statistical test conducted in this study is a validity test that is a test used to measure the valid or not of the questionnaires used in the study, Measurable variables are said to be valid if they have a correlation coefficient of ≥ 0.4 to 1.00 (Sugiyono, 2004). Instrument validity testing using the help of the SPSS 24 program. Reliability Test is a test used to test the consistency of answers to research questionnaires; Variables can be expressed as reliable if the Alpha Cronbach coefficient > 0.60 , meaning the reliability level of 0.60 indicates the reliability of a construct (Kaplan and Saccuzo, (1982).

The analysis of the classification of the SEM model was conducted to find out the relationship between the influence of the Covid-19 news media and public mental health, which can be a recommendation for improvement to overcome public mental health problems during the pandemic.

This research was conducted in several community settlements in DKI Jakarta in June-September 2020. The sample used in this study amounted to 200 respondents, consisting of the public with a productive age range of about 18-50 years. According to Boomsma, 1987:84 quoted by Ghazali and Fuad, 2005:13, recommends that the estimation of structural equations through the Maximum Likelihood method will be effective if the sample number ranges from 100-200 respondents. Data collection techniques are carried out in various ways, namely questionnaires, interviews, and patient data Covid-19. According to Arikunto 2006, questionnaires are questions prepared to get information from respondents about matters related to or known to respondents, in this study used Likert scale in his measurement scale. The variables used to consist of 4 variables, namely covid and media, depression, anxiety which includes exogenous variables and mental health, which includes endogenous variables with the hypothesis that there is a relationship between Covid-19 & media on mental health, depression on mental health, and anxiety on mental health.

Table 1. Indicators of Media Variables, Content Media, Respondent Behavior, and Frequency.

A. COVID-19 DAN MEDIA		Skala Pengukuran
1	Menonton TV	Skala Likert 5 poin. 1 = Tidak pernah, 2 = Jarang, 3 = Kadang-kadang, 4 = Sering, 5 = Selalu.
2	Mendengarkan radio	
3	Membaca koran cetak	
4	Membaca koran online	
5	Melihat video di media sosial	
6	Mencari informasi terbaru lewat sosial media	
7	Memposting ulang berita/informasi/postingan di media sosial	
B.2 Content Media		Skala Likert 5 poin. 1 = Tidak pernah, 2 = Jarang, 3 = Kadang-kadang, 4 = Sering, 5 = Selalu.
8	Update kasus COVID-19 harian	
9	Berita kejadian terkini / viral terkait COVID-19	
10	Kebijakan pemerintah terkait penanganan COVID-19	
11	Perkembangan penerapan masa transisi menuju ew-normal di nasional / regional	
12	Perilaku pencegahan (penggunaan masker, cuci tangan pakai sabun, Sosial distancing)	
13	Informasi terkait suplemen vitamin dan antioksidan (contoh merek : redoxon, YouC1000, imboost, fibres forces, dll) yang dapat membantu mengurangi risiko tertular	
B.3 Perilaku Responden Selama 1 Pekan Terakhir		Skala Likert 5 poin. 1 = Tidak pernah, 2 = Jarang, 3 = Kadang-kadang, 4 = Sering, 5 = Selalu.
14	Menggunakan masker ketika berada di luar rumah	
15	Menggunakan masker ketika berbicara dengan orang lain di luar rumah	
16	Menggunakan maskertetika berkendara / di angkutan umum	
17	Mencuci tangan dengan sabun setelah berpergian	
18	Mencuci tangan dengan sabun setelah bersalaman / bersentuhan dengan orang lain	
19	Mencuci tangan dengan sabun setelah memegang benda-benda di tempat umum (gagang pintu, tombol lift)	
20	Menjaga jarak bicara dengan lawan bicara 1 meter	Skala Likert 5 poin. 1 = Tidak pernah, 2 = Jarang, 3 = Kadang-kadang, 4 = Sering, 5 = Selalu.
21	Menjaga jarak duduk dengan orang lain	
22	Menjaga jarak berdiri/antri dengan orang lain	
23	Berapa banyak waktu yang Anda luangkan / habiskan untuk pencarian informasi pada media media tersebut (jam/hari)	
B.4 Frekuensi		

Table 2. Indicators of Media Role Perception Variables, Covid-19 Risk Perception.

B.5 Persepsi Peran Media		Skala Likert 5 poin. 1 = Tidak pernah, 2 = Jarang, 3 = Kadang-kadang, 4 = Sering, 5 = Selalu.
1	Media memiliki peran dalam mendidik masyarakat tentang protokol / langkah langkah yang harus dilakukan pada masa transisi menuju new-normal	
2	Media memiliki peran dalam meningkatkan perilaku pencegahan dimasyarakat untuk mengendalikan penularan covid-19	
3	Media memiliki peran dalam menyebarkan kesadaran di masyarakat	
4	Media memiliki peran dalam mengedukasi masyarakat tentang perilaku seseorang yang sakit atau diduga sakit covid-19	
5	Media memiliki peran dalam menyebarkan berita hoak / tidak benar	
6	Media memiliki peran dalam meningkatkan rasa takut, kecemasan dan kebingungan di masyarakat	
7	Memposting ulang berita/informasi/postingan di media sosial	
8	Seberapa tingkat Kepercayaan Anda terhadap apa yang Anda posting di media sosial Anda	
Persepsi Risiko Covid-19		
9	Saya merasa untuk saat ini masih sangat berbahaya untuk beraktifitas di luar rumah.	Skala Likert 5 poin. 1 = Tidak pernah, 2 = Jarang, 3 = Kadang-kadang, 4 = Sering, 5 = Selalu.
10	Saya merasa hanya dengan menggunakan masker ketika beraktifitas di luar rumah, cukup mencegah risiko penularan covid-19	
11	Saya merasa dengan selalu mencuci tangan dengan sabun, akan menurunkan risiko penularan	
12	Saya merasa Tingkat pemulihan pasien covid-19 tinggi, dan itu merupakan hal yang menyenangkan	
13	Saya merasa Penyakit ini lebih berbahaya daripada batuk pilek	
14	Saya merasa khawatir tentang kemungkinan akan tertular covid-19 pada saat mulai bekerja	
15	Saya merasa khawatir tentang kemungkinan akan tertular covid-19 saat berada di tempat-tempat umum (contoh mall, pasar, tempat nongkrong)	
16	Saya khawatir tentang kemungkinan akan tertular covid-19 pada transportasi umum dan tempat-tempat umum	
17	Saya merasa bahwa penyakit ini akan sangat mudah memular hanya pada anak-anak dan lansia saja	
18	Seseorang dengan tingkat imunitas baik tidak akan tertular covid-19	
19	Saya merasa dengan mengkonsumsi suplemen vitamin dan antioksidan akan mencegah penularan covid-19	
20	Saya merasa tidak ada yang perlu dikhawatirkan dari masa transisi ini.	

Table 3. Indicators of Media Role Perception

Variables, Covid-19 Risk Perception

B.7 Bagaimana perasaan Anda selama 1 minggu terakhir pada masa transisi/new normal ini.		
1	Tertarik	Skala Likert 5 poin. 1 = Tidak pernah, 2 = Jarang, 3 = Kadang-kadang, 4 = Sering, 5 = Selalu.
2	Stress	
3	Gembira	
4	Kecewa	
5	Merasa Bersalah	
6	Takut	
7	Menentang	
8	Antusias	
9	Bangga	
10	Mudah marah	
11	Waspada	
12	Malu	
13	Bersemangat	
14	Gelisah	
15	Bertekad	
16	Berhati-hati	
17	Gugup	
18	Giat	
19	Khawatir	
B.8 Pengetahuan Responden tentang Covid-19		
1	Cara menularnya covid-19 melalui	Skala Likert 5 poin. 1 = Tidak pernah, 2 = Jarang, 3 = Kadang-kadang, 4 = Sering, 5 = Selalu.
2	Virus COVID-19 sangatlah mudah dan cepat menular dari orang ke orang	
3	Penularan virus covid-19 sangatlah berbahaya/fatal	
4	Penularan virus covid-19 tidak dapat dicegah	
5	Penderita covid-19 mayoritas lansia	
6	Masa transisi merupakan suatu kondisi aman untuk keluar rumah	
7	Dapatkah cuci tangan menggunakan sabun secara teratur dapat menghentikan penularan COVID-19	
8	Gejala COVID-19	
9	Dapatkah penggunaan masker mampu menghentikan penularan COVID-19	

Table 4. Variable Indicators of Depression and Stress In The Pandemic Covid-19

DEPRESI		
1	Selama 2 minggu ini, apakah Anda secara terus menerus merasa sedih, depresif, atau murmur, hampir sepanjang hari, hampir setiap hari?	1 = Tidak pernah, 2 = Jarang,
2	Selama 2 minggu ini, apakah Anda hampir sepanjang waktu kurang berminat terhadap banyak hal atau kurang menikmati hal-hal yang biasanya Anda nikmati?	3 = Kadang-kadang, 4 = Sering, 5 = Selalu.
3	Selama 2 minggu ini, apakah Anda merasa lelah atau tidak berharga, hampir sepanjang waktu?	
4	Selama 2 minggu ini, apakah nafsu makan Anda berubah secara mencolok atau apakah berat badan Anda meningkat atau menurun tanpa upaya yang sengaja?	
5	Selama 2 minggu ini, apakah Anda mengalami gangguan tidur hampir setiap malam (kesulitan untuk memulai tidur, terbangun tengah malam, terbangun lebih dini, atau tidur berlebihan)?	
6	Selama 2 minggu ini, apakah Anda berbicara atau bergerak lebih lambat daripada biasanya, gelisah, tidak tenang, atau mengalami kesulitan untuk tetap diam?	
7	Selama 2 minggu ini, apakah Anda kehilangan kepercayaan diri, atau apakah Anda merasa tidak berharga atau bahkan lebih rendah dari orang lain?	
8	Selama 2 minggu ini, apakah Anda merasa bersalah atau mempersalahkan diri sendiri?	
9	Selama 2 minggu ini, apakah Anda mengalami kesulitan berpikir atau berkonsentrasi, atau apakah Anda kesulitan untuk mengambil keputusan?	
10	Selama 2 minggu ini, apakah Anda berniat untuk menyakiti diri sendiri, ingin bunuh diri atau berharap mati?	
Stress, Keadaan Stress di Masa Pandemi Covid-19		
1	Sering sakit kepala	Skala Likert 5 poin. 1 = Tidak pernah, 2 = Jarang,
2	Tidak nafsu makan	3 = Kadang-kadang, 4 = Sering, 5 = Selalu.
3	Sulit tidur	
4	Mudah takut	
5	Sering tegang/ cemas/ khawatir	
6	Tangan gemetar	
7	Pencernaan terganggu	
8	Sulit untuk berpikir jernih	
9	Tidak bahagia	
10	Tidak bahagia	
11	Sulit menikmati kegiatan sehari-hari	
12	Sulit mengambil keputusan	
13	Pekerjaan sehari-hari terganggu	
14	Tidak mampu melakukan hal bermanfaat	
15	Kehilangan minat pada berbagai hal	
16	Merasa tidak berharga	
17	Mempunyai pikiran untuk mengakhiri hidup	
18	Lelah sepanjang waktu	
19	Rasa tidak enak pada bagian perut	
20	Mudah lelah	

3. RESULT AND DISCUSSION

Some software was used to process data in this research, namely Excel 2016, SPSS 26, and AMOS. The raw data obtained from the questionnaire is returning and worth processing, compiled with the help of Excel 2016 and SPSS 26 software. Then, process the entire data (respondent's characteristic data and indicators) with descriptive analysis techniques and crosstab analysis techniques, with the help of SPSS 26 software to see the reliability and validity values of the questionnaire data that we have disseminated. After getting reliability and validity values that already have a cut-off value, model the indicator data per latent variable by looking at the Goodness of Fit value on the model through AMOS software.

From the results of Goodness of Fit that are valid and reliable, data processing continued with the SEM method, which is the final method in this study. From Minto Waluyo, it is known that SEM is a multivariate data analysis method that aims to test measurement models and latent variable structural models. Also mentioned in Minto Waluyo, there are two models combined in SEM, so a full SEM model is obtained called Measurement, Structural and Modification. Refers to the conceptual framework as measured by the measurement and structural models that finally obtained the measurement model formulated hybrid model.

Table 5. Reliability Test

Reliability Statistics		
Cronbach's Alpha	Cronbach's Alpha Based on Standardized Items	N of Items
,874	,874	30

From reliability testing the Cronbach Alpha value is already above the standart criteria (0.874).

Table 6. Validity Test

KMO and Bartlett's Test		
Kaiser-Meyer-Olkin Measure of Sampling Adequacy.		,765
Bartlett's Test of Sphericity	Approx. Chi-Square	1163,171
	df	435
	Sig.	,000

KMO > 0.05 (0,764)

3.1 MEASUREMENT MODEL

Measurement Model (Goodness of Fit Test)
Measurement model results see figure below.
Good of Fit values and cut-off values, suggesting the model still does not reflect the latent variables analyzed. The test is done using parameters at critical values, while the output of confirmatory factor analysis can be seen in the table below. After that, we value how Good Value of Fit and cut off the value structural model and finally the GOF value is good & marginal.

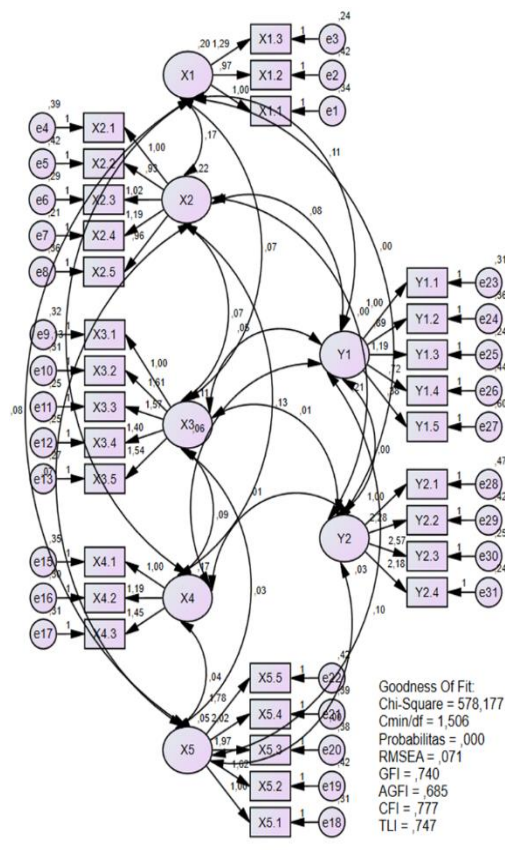


Figure.1 The SEM relationship results between media variables and mental health

Table.7 Goodness of Fit and Cut off Value

Criterion	Model Test Results	Critical Value	Information
X^2 Chi-square	578.177	Small, X^2 with df = 31 with $\alpha = 0.05$ is 44,98534	Bad
Probability	0,000	$\geq 0,05$	Marginal
RMS	0,071	$\leq 0,08$	Marginal
GFI	0,685	$\geq 0,90$	Marginal
AGFA	0,685	$\geq 0,90$	Marginal
TLI	0,747	$\geq 0,95$	Marginal
CFI	0,777	$\geq 0,95$	Marginal

Table. 8 Regression Weight Model Measurement

Regression Weights: (Group number 1 - Default model)

	Estimate	S.E.	C.R.	P	Label
X1.3 <-- X1	,940	,217	4,330	***	,682
X1.2 <-- X1	,858	,228	3,769	***	,535
X1.1 <-- X1	1,000				,593
X2.3 <-- X2	,982	,219	4,482	***	,558
X2.2 <-- X2	1,092	,248	4,398	***	,564
X2.1 <-- X2	1,000				,614
X2.4 <-- X2	,718	,161	4,464	***	,558
X2.5 <-- X2	1,366	,261	5,231	***	,719
X3.3 <-- X3	,947	,179	5,288	***	,750
X3.2 <-- X3	1,034	,199	5,193	***	,710
X3.1 <-- X3	1,000				,588
X3.4 <-- X3	1,070	,198	5,417	***	,768
X3.5 <-- X3	1,035	,186	5,575	***	,761
X4.3 <-- X4	,999	,217	4,607	***	,587
X4.2 <-- X4	1,335	,234	5,703	***	,774
X4.1 <-- X4	1,000				,661
X5.3 <-- X5	,774	,120	6,433	***	,673
X5.2 <-- X5	,841	,131	6,424	***	,647
X5.1 <-- X5	1,000				,771
X5.4 <-- X5	,412	,143	2,875	,004	,337
X5.5 <-- X5	,660	,172	3,825	***	,459
Y2.1 <-- Y2	1,000				,243
Y2.2 <-- Y2	2,308	1,220	1,891	,059	,516
Y2.3 <-- Y2	3,172	1,786	1,776	,076	,793
Y2.4 <-- Y2	1,988	1,010	1,970	,049	,543
Y1.3 <-- Y1	,837	,211	3,970	***	,546
Y1.4 <-- Y1	,725	,197	3,681	***	,466
Y1.5 <-- Y1	,081	,197	,412	,680	,048
Y1.2 <-- Y1	1,100	,224	4,909	***	,746
Y1.1 <-- Y1	1,000				,640

From the table above, it can be seen that all indicators are not valid and significant because of the value of C.R > 2 S.E and the Probability < 0.5, so it can be concluded that the indicators are significantly not yet dimensions of the latent variable formed.

MODEL STRUCTURAL

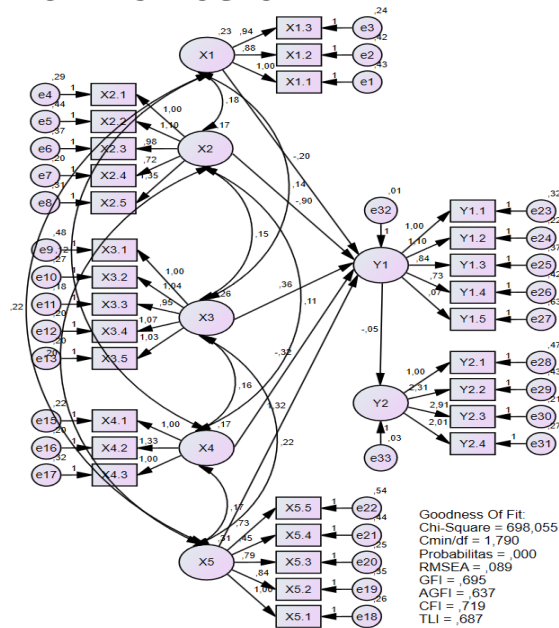


Figure. 2 Structural Model of Relationship Between Media Role Variables and Mental Health
Table.9 Goodness of Fit and Cut off Value

Criterion	Model Test Results	Critical Value	Information
X^2 Chi-square	698.055	Small, X^2 with df = 390 with $\alpha = 0.05$ is 437,0468	Marginal
Probability	0,000	$\geq 0,05$	Marginal
RMS	0,089	$\leq 0,08$	Good
GFI	0,695	$\geq 0,90$	Marginal
AGFA	0,637	$\geq 0,90$	Marginal
TLI	0,687	$\geq 0,95$	Marginal
CFI	0,719	$\geq 0,95$	Marginal

Table.10 Regression Weight Model Structural

Regression Weights: (Group number 1 - Default model)

	Estimate	S.E.	C.R.	P	Regression Weight
Y1 <-- X1	-,196	1,368	-,143	,886	,202
Y1 <-- X2	-,904	1,562	-,579	,563	,813
Y1 <-- X3	,365	,557	,655	,513	,397
Y1 <-- X4	-,322	,429	-,751	,453	,285
Y1 <-- X5	1,323	,463	2,856	,004	1,594
Y2 <-- Y1	-,054	,060	-,901	,367	,141
X1.3 <-- X1	,943	,223	4,223	***	,680
X1.2 <-- X1	,877	,230	3,817	***	,543
X1.1 <-- X1	1,000				,589
X2.3 <-- X2	,976	,220	4,435	***	,555
X2.2 <-- X2	1,095	,250	4,385	***	,566
X2.1 <-- X2	1,000				,614
X2.4 <-- X2	,716	,164	4,370	***	,557
X2.5 <-- X2	1,354	,259	5,225	***	,714
X3.3 <-- X3	,946	,180	5,258	***	,749
X3.2 <-- X3	1,038	,200	5,197	***	,712
X3.1 <-- X3	1,000				,587
X3.4 <-- X3	1,070	,198	5,401	***	,768
X3.5 <-- X3	1,034	,186	5,559	***	,760
X4.3 <-- X4	,995	,217	4,589	***	,585
X4.2 <-- X4	1,335	,234	5,700	***	,774
X4.1 <-- X4	1,000				,661
X5.3 <-- X5	,793	,124	6,373	***	,663
X5.2 <-- X5	,839	,139	6,021	***	,620
X5.1 <-- X5	1,000				,741
X5.4 <-- X5	,455	,144	3,164	,002	,357
X5.5 <-- X5	,727	,169	4,313	***	,486
Y2.1 <-- Y2	1,000				,252
Y2.2 <-- Y2	2,308	1,209	1,910	,056	,535
Y2.3 <-- Y2	2,915	1,531	1,904	,057	,755
Y2.4 <-- Y2	2,007	1,000	2,008	,045	,568
Y1.3 <-- Y1	,837	,209	3,995	***	,539
Y1.4 <-- Y1	,732	,200	3,661	***	,465
Y1.5 <-- Y1	,072	,196	,365	,715	,042
Y1.2 <-- Y1	1,100	,220	4,997	***	,736
Y1.1 <-- Y1	1,000				,632

From the creation of measurement and structural models obtained that the variable construct and indicators used are not bad (viewed from the Cut-off value / critical value). In the sense that the test of the model is valid and significant.

4. RESULT AND DISCUSSION

Based on the findings of this study, namely that the presence of stress during the global pandemic has caused some disturbances such as fear and anxiety both in oneself and those close to one another; changes in sleep and eating patterns, feelings of depression and difficulty concentrating; tired and stressed from constantly being at home, especially children, as well as the emergence of psychosomatic disorders (Abid Haleem, 2020).

There are several solutions that can be done to reduce the anxiety caused by COVID-19,

including doing positive activities at home using physical activity (Cyrus SH, 2020), consuming nutritious food, building good relationships with family and friends and meditating to control anxiety (Lijun Kang, 2020). To be protected from this COVID-19 disease, follow the government's advice, do the above solution to reduce anxiety, do not forget to live a clean life, and always pray.

5. REFERENCE

- Abid Haleem, Mohd Javaid., et al. March 2020. Effects of COVID-19 pandemic in daily life. Department of Mechanical Engineering, Jamia Millia Islamia, New Delhi, India; Department of Orthopaedics, Indraprastha Apollo Hospital, Sarita Vihar Mathura Road, New Delhi, 110076: India.
- Colquitt & Jason A. Organization Behavior, Improving Performance and Commitment in the Workplace. New York: McGraw Hil Irwin; 2009.
- Cyrus SH Ho, Cornelia YI Chee, Roger CM Ho. 2020. Mental Health Strategies to Combat the Psychological Impact of COVID-19 Beyond Paranoia and Panic. Department of Psychological Medicine, National University Health System, Level 9, NUHS Tower Block, 1E Kent Ridge Road: Singapore.
- Hsien, Wen Ching Sheng. Research Article Effects of Job Rotation and Role Stress Among Nurses on Job Satisfaction and Organizational Commitment. Taiwan: BioMed Central Ltd; 2009.
- I. Neny Mukhlisani, Sritomo Wigjosoebroto (2008) 'Pendekatan Structural Equation Modeling Untuk Analisa Faktor Yang Mempengaruhi Produktivitas Dari Tinjauan Keselamatan, Kesehatan, dan Lingkungan Kerja di PT. Barata Indonesia (Persero)-Gresik', pp. A-22-1 A-22-12.
- Kreitner R & Kinicki A. Organizational Behavior, 7th edition. New York McGraw-Hill Irwin; 2007.
- Lijun Kang., Simeng Ma, et al. March 2020. Impact on mental health and perceptions of psychological care among medical and nursing staff in Wuhan during the 2019 novel coronavirus disease outbreak: A cross-sectional study
- Purwanto S dan Mulyani S. Pengaruh Stres Kerja dan Afektivitas Negatif terhadap Pemberdayaan Psikologis, Kepuasan Kerja, dan Kinerja. Universitas Wijaya Kusuma Surabaya; 2009.
- Ramdhani, Marchaban dan Sumarni. Pengaruh Gaya Kepemimpinan Kepala Ruang Terhadap Kepuasan Kerja Perawat (Studi Kasus di Rumah Sakit Jasa Kartini Tasikmalaya). Jurnal Manajemen dan Pelayanan Farmasi. 1 (4): 216-220; 2011.
- Robbins SP. Perilaku Kepemimpinan edisi kesepuluh terjemahan Benyamin Molan. Jakarta: Gramedia; 2006.
- Runtu. Iklim Organisasi, Stres kerja dan kepuasan Kerja Perawat, Jakarta Fak. Psikologi Univ. Gunadharma; 2002.
- R. Miao, H. Zhang, Q. Wu, J. Zhang, Z. Jiang (2020) 'Using structural equation modeling to analyze patient value, satisfaction, and loyalty: a case study of healthcare in China' pp. 577-596
- Schermerhorn. Organizational Behavior 12th Edition. Inchooken: John Wiley & Sons Inc.; 2012.