

## Conference Paper

# Nurses' Anxiety Levels in the Covid-19 Isolation Room

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**Abstract.**

During the Covid-19 pandemic, the medical team, including nurses, have struggled in isolation rooms, helping patients. Isolation rooms pose a greater risk than regular treatment rooms and direct contact can increase the risk of infection. Nurses' anxiety may be high; they may be worried not only about the risk of transmitting Covid-19 to themselves, but also to their families at home, especially for those who are in vulnerable groups. This study aimed to identify the anxiety level of nurses in the Covid-19 isolation room at Universitas Muhammadiyah Malang Hospital. This was a descriptive observational study conducted from May 25 - June 3, 2021 with 16 nurses. The nurses' anxiety was measured using the Hamilton Anxiety Rating Scale Questionnaire. The results showed that 13 nurses (81.25%) in the Covid-19 isolation room had mild anxiety levels.

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**Keywords:** anxiety, nurse, Covid-19, isolation room

## 1. Introduction

Covid-19 is a new type of disease that never been previously identified in humans [1]. The current Covid-19 pandemic has certainly caused a significant crisis in various groups and populations in the world, especially nurses. Nurses are health workers who have direct contact with patients. This direct contact can increase the risk of disease transmission, so nurses' anxiety can increase because of the risk of transmitting Covid-19.

In the research conducted by Retnaningsih & Fatmawati [2] (2018), on nurses at the inpatient installation of Tugurejo Hospital Semarang, the workload increased due to differences in the number of activities or activities on work shifts, the number of patients, the number of nurses and differences in treatment classes. In the research conducted by Sari [3] (2014) in west Kalimantan, excessive workload can be seen from the number of nurses on the afternoon and evening shifts who have to treat 60-70 patients per room with mental disorders with only one to two nurses. If it is contextualized to medical

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personel who are working in the Covid-19 pandemic, indications of work overload can be seen from demands that are not in accordance with the existing reality. In Indonesia, based on World Bank data of 2,1 nurses per 1000 population, which means that there are only two nurses to treat 1000 residents [4]. Of the 11 nurses who were interviewed at a Bengkulu Hospital, 6 of them said they were anxious while on duty in the Covid isolation room, while the remaining 5 said that the nurse's job was to take care of sick people, so how else could her name be a duty and obligation to be followed and followed health protocol [5].

The high workload can cause physical fatigue in nurses. They must also be vigilant and wear personal protective equipment for up to 10 hours. In addition, emotional exhaustion can also arise as a result of being separated from family members because they still have to work in hospital and treat Covid patients, whose number is increasing day by day [6].

The results of interviews that have been conducted by researchers on nurses in the Covid isolation room in Universitas Muhammadiyah Malang Hospital was found that the Covid treatment was carried out based on the regulation of the Minister of Health. The treatment of Covid patients must use standard 3 personal protective equipment (N95 masks, google glasses, gloves, hasmat, boots, face shields) and the covid isolation room must be under negative pressure. The division of work for nurses in the covid isolation room is divided into 3 shifts. The total working hours of nurses each month is 175 hours. The nurse said that so far there had never been an anxiety screening by the hospital. The nurse said that they had difficulty sleeping several times and felt tired while on duty in the room. Some nurses also said that they did not claim to be nurses in the Covid isolation room for the surrounding community. The nurse also said that being a nurse in the Covid isolation room caused restrictions on interaction with the outside community.

Anxiety is a feeling of worry, restlessness, and fear of the unknown where this also affects the physical response and behavior [7]. Symptoms of anxiety include tension, restlessness, shaking limbs, sweating, headache, difficulty speaking, and difficulty breathing [8]. According to Untari [9] (2014), factors that influence anxiety include age, gender, developmental stage, personality type, education, and health status.

Research conducted on the psychological effects of nurses and midwives as a result of the Covid-19 outbreak in Turkey concluded that nurses and midwives there experience severe psychological effects and sometimes find it difficult to overcome them [1]. Meanwhile, research conducted with the title of factors that affect anxiety in health workers in efforts to prevent Covid-19 shows that there are several factors such as age, family status, patient honesty, availability of personal protective equipment and

knowledge that cause anxiety for health workers in an effort to reduce anxiety Covid-19 prevention. Excessive anxiety has a detrimental effect on the mind and body and even cause physical disease [8]. Besides that, it can also cause errors in work.

Errors in the practice of nursing and medicine are very dangerous for patient safety. An anxious person is prone to make mistakes. Errors that have the potential to be made by nurses are drug dilution, inaccuracy in infusion speed, wrong injection location, incomplete or inaccuracy of nurses in carrying out an action procedure [8]. Therefore, it is very important to identify the anxiety of nurses in the Covid-19 isolation room so that preventive measure can be taken to prevent unwanted events.

## 2. Methods

This type of research is descriptive observational with quantitative data types. The place of research was carried out in the Covid isolation room at Universitas Muhammadiyah Malang Hospital. The population in this study were all 16 Covid isolation room nurses. This study used total sampling. Researchers identified nurses' anxiety using the Hamilton Anxiety Rating Scale questionnaire. Data collection using google form. Data analysis was conducted to explain the characteristics of each variable. The variables analyzed were demographic data containing age, gender, and occupation. This research has also gone through an ethical test at the Health Research Ethics Commission Muhammadiyah Malang University with the number E.5.a/113/KEPK-UMM/V/2021.

## 3. Results

This research was carried out on May 25 – June 3, 2021 in the Covid isolation room at the Universitas Muhammadiyah Malang Hospital. The results of the study are as follows:

TABLE 1: Covid Isolation Room Nurse Anxiety Level.

Anxiety level	Respondent	Percentage (%)
Mild Moderate	13 3	81,25 % 18,75 %
Total	16	100 %

Based on age characteristics, the majority of nurses in the Covid isolation room experienced mild anxiety, only 3 people aged 26 years experienced moderate anxiety. In addition, it is known that based on gender characteristics, the majority of Covid-19 isolation room nurses, both male and female, experience mild anxiety. There are only 3 male nurses in the Covid isolation room who are experiencing moderate anxiety. It

TABLE 2: Crosstabulation between Respondents' Characteristics and Anxiety Levels of Nurses in the Covid Isolation Room.

		Anxiety Level		Total
		Mild	Moderate	
Age	24 25 26 28	1 2 4 1 1 1 2 1	0 0 3 0 0 0 0	12 7 1 1 1 2
	29 30 31 34		0	
<b>Total</b>		<b>13</b>	<b>3</b>	<b>16</b>
Gender	Male Female	7 6	3 0	10 6
	<b>Total</b>	<b>13</b>	<b>3</b>	
Length of work	< 1 year > 1 year	7 6	3 0	10 6
	<b>Total</b>	<b>13</b>	<b>3</b>	

can also be seen that based on the characteristics of the length of work, the majority of Covid isolation room nurses, both those who have only worked for less than 1 year and those who have worked for more than 1 year, experience mild anxiety. There were only 3 nurses who worked for less than 1 year experiencing moderate anxiety.

#### 4. Discussion

Based on the results of data analysis, the majority of the anxiety levels of nurses in the Covid isolation room were at a mild level of anxiety. The results of this study are in accordance with the research of Li et al., [9] (2020) that nurses who have mild anxiety are because they already have almost good knowledge and attitudes about Covid-19. This is because nurses already have good knowledge about information about Covid-19, modes of transmission, methods of prevention, and how to behave towards patients suffering from Covid-19. Even so, they still feel anxious. However, they can control this anxiety by staying positive. Research conducted by Yona & Nursasi (2020) [10] said that nurses as health workers who have the most contact with patients have a risk of contracting the corona virus. Nurses are one of the health workers with a large number in health care centers, directly involved and in contact with patients for 24 hours. The risk of contracting a disease in caring for a patient with an easily communicable disease can cause anxiety. Several factors behind the majority of nurses experiencing mild anxiety levels include age, gender and length of work.

On the age factor, this study shows that the majority of nurses in the Covid isolation room experience mild anxiety. This is because age is closely related to a person's level of maturity in responding to anxiety, the older a person is, the more mature they are in terms of thinking and acting. This is in line with research conducted by Yusuf (2018) [11] which explains that physiologically, a person's growth and development can

be described by increasing age. With increasing age, it is expected that motor skills will increase in accordance with their growth and development, which is identical with high idealism, high enthusiasm, and excellent energy. The age of the respondents in this study was between 24 years to 34 years. Age up to 40 years is an age that is still very productive in carrying out its work, it is still ideal to be supported by a strong and excellent physique so that they can carry out their duties properly. In principle, as a person's age increases, his level of maturity increases and absorbs more information that will affect his behavior. This is in accordance with the situation on the ground where all nurses in the Covid isolation room are entering the early adulthood stage.

On the gender factor, researchers assume that gender does not affect a person's level of anxiety, because everyone, both male and female has their own coping mechanism to overcome the anxiety they feel. This is line with research conducted by Yesa (2018) [12] about the anxiety level of patients who are given intravenously which states that gender does not affect a person's level of anxiety because everyone who is sick and has an infusion will feel various feelings of anxiety.

On the factor of length of work, the results showed that nurses who worked more than 1 year tended to experience more mild anxiety. This is because nurses are already familiar with the situation and conditions in the field. This is in line with research conducted by Evaldiana (2013) [13], which explains that the length of work can effect performance and job satisfaction, so that the person will enjoy his work without prioritizing his own health interests. A nurse with long work experience will have patience or broader skills because she has handled various cases and has been able to adapt to her work. Nurses with long-standing work experience are less likely to experience feelings of anxiety while working in a hospital.

## 5. Conclusions

The results showed that the average nurse in the Covid isolation room had mild anxiety. In future research, it is hoped that they can examine the factors that can cause nurses' anxiety during the Covid-19 pandemic. In addition, it is necessary to increase the number of respondents in futher research.

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