The Correlation of Self-Efficacy with Anxiety Nurses from Prof. DR. W. Z. Johannes Hospital and S. K. Lerik Hospital in the Pandemic COVID-19 at Kupang City

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ABSTRACT

Introduction: COVID-19 can affect nurses physically and psychologically, such as anxiety. This requires good self-efficacy of nurses to be confident in their ability to face stressful conditions so that they can be positive and control nurses' anxiety and survive the difficult times of the COVID-19 pandemic.

Material and Methods: This research was an observational analytic study with a cross sectional design which was carried out on nurses and the research site was in Prof. DR. W. Z. Johannes Kupang hospital and S. K. Lerik Kupang hospital and used the General Self Efficacy Scale (GSES) questionnaire and the Zung Self Anxiety Scale (ZSAS) questionnaire. The sampling technique used cluster random sampling with 100 respondents who met the inclusion and exclusion criteria. The research was analyzed by univariate, bivariate using the Spearman rank test.

Results: From 100 respondents, it was found that 28 respondents (28%) had low self-efficacy and 72 respondents (72%) had high self-efficacy. Of the 100 respondents also found 26 respondents (26%) experienced mild-moderate anxiety, 74 respondents (74%) did not experience anxiety and no respondents experienced severe or very severe / panic anxiety. The results of the bivariate analysis test in this study showed p = 0.000 (p < 0.05).

Conclusion: There is a significant correlation between self-efficacy and anxiety of nurses at Prof. DR. W. Z. Johannes hospital and S. K. Lerik hospital during the COVID-19 pandemic in Kupang City.

Keywords: Self-efficacy, Anxiety, Nurse, COVID-19.

INTRODUCTION

2020 begins with the emergence of a new virus of the coronavirus type, namely Severe Acute Respiratory Syndrome Coronavirus-2 (SARS-CoV-2) with the name of the disease, Coronavirus Disease 2019 (COVID-19). SARS-CoV-2 is a new type of virus from the coronavirus family and there are several other types, namely Middle East Respiratory Syndrome (MERS) and Severe Acute Respiratory Syndrome (SARS).[1] COVID-19 can be transmitted from human to human and has spread widely. until March 11, 2020, WHO declared COVID-19 a pandemic.[2]

The total number of people who have been confirmed to have contracted the COVID-19 disease in the world until May 16, 2020, is 4,617,840 people, of which 1,749,346 patients were declared cured and there were 308,013 cases of death.

17,025 people tested positive for COVID-19, including 3,911 people who were declared cured and 1,089 people died and data in East nusa tenggara on May 16 2020 there were 15 positive people for COVID-19, of which 6 people recovered and 1 person died.[3,4] This condition affects nurses and other health workers who are at the frontline and have a high risk of contracting COVID-19 so they have a risk of both physical and psychological disorders such as anxiety, stress and others.[5]

Research conducted by Nasrullah et al (2020) states that anxiety is the most common condition experienced by health workers during the COVID-19 pandemic as much as 65.8%.[5] Research conducted by Lai et al (2020) on 1,257 doctors and nurses in China at the time The COVID-19 pandemic also found that many doctors and nurses experienced psychological disorders during the COVID-19 pandemic, which is 44.6% experiencing anxiety and nurses are the largest percentage experiencing anxiety.[6] The cause of anxiety for nurses and other health workers is due to worry infected and transmitting, worried about hearing information about COVID-19, inadequate personal protective equipment, experiencing a bad stigma and feeling depressed because of changes due to COVID-19. This requires good self-efficacy of nurses to be confident in their ability to deal with stressful conditions so that they can be positive and control nurses' anxiety and survive the difficult times of the COVID-19 pandemic.[7,8]

Individuals who have low self-efficacy will easily experience anxiety because these individuals feel that everything is considered a burden, threat, obstacle and feels unsure of themselves. On the other hand, individuals with high self-efficacy will find it difficult to experience anxiety because

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they are not easily burdened.[9]

Research conducted by Xiao et al (2020) on 180 doctors and nurses who treated patients with COVID-19 stated that there was a negative correlation between self-efficacy and anxiety levels.[10] Research conducted by Rajab (2017) also concluded that self-efficacy was significantly related negative towards anxiety.[11] In contrast to research from Seri (2016) which states that there is no significant correlation between self-efficacy and anxiety.[12]

The reason the researchers chose nurses as the research sample was because nurses were health workers with the largest number and were health workers who had the most contact with patients compared to other health workers.[13] The reason researchers chose Prof. DR. W. Z. Johannes Kupang hospital and S. K. Lerik Kupang hospital because Prof. DR. W. Z. Johannes Kupang hospital is the front line hospital for COVID-19 and S. K. Lerik Kupang hospital is the second line hospital for COVID-19 in Kupang City.[14,15]

Based on the description of the above problems, the researchers are interested in examining the correlation between self-efficacy and anxiety of nurses at Prof. DR. W. Z. Johannes Kupang hospital and S. K. Lerik Kupang hospital during the COVID-19 pandemic.

MATERIAL AND METHODS

The research location was in Prof. DR. W. Z. Johannes Kupang hospital in the isolation room, emergency room, Intensive Care Unit(ICU), Neonatal Intensive Care Unit(NICU) and dental polyclinic and S. K. Lerik Kupang hospital in the isolation room, emergency room and dental polyclinic, totaling 116 people but related to the ongoing COVID-19 pandemic, the research was carried out online so that it could be carried out access from each respondent's place. The time of the research was carried out in October-November 2020.

This research was an observational analytic study with a cross-sectional design which aims to determine the correlation between self-efficacy and anxiety of nurses at Prof. DR. W. Z. Johannes Kupang hospital and S. K. Lerik Kupang hospital.

Self-efficacy assessment used the General Self Efficacy Scale (GSES) questionnaire and anxiety used the Zung Self Anxiety Scale (ZSAS).

The sampling technique used cluster random sampling with 100 respondents who met the inclusion and exclusion criteria. The study was analyzed by univariate and bivariate using the rank spearman test.

The independent variable in this study is self-efficacy, and the dependent variable in this study is anxiety.

Based on table-1, it is known that the research respondents had an age range from 23 years to 52 years. The number of female respondents is more than the number of male respondents, because the number of female nurses is more dominant than men in the two hospitals. The number of respondents in Prof. DR. W. Z. Johannes Kupang hospital as many as 67 respondents and S. K. Lerik Kupang hospital as many as 33 respondents. This is in accordance with the

proportion of nurses in each hospital where the number of nurses at Prof. DR. W. Z. Johannes Kupang hospital more than S. K. Lerik Kupang hospital. The number of respondents based on workspace, namely in the isolation room as many as 30 respondents, emergency room as many as 46 respondents, ICU as many as 11 respondents, NICU as many as 4 respondents and dental polyclinic as many as 9 respondents. The number of respondents based on the latest education, namely as many as 64 respondents with the latest education D3, 11 respondents with the latest education D4 / S1, 24 respondents with the latest education as Nurse and 1

Variable	Frequency	%
Age		
23 Years	1	1
24 Years	2	2
25 Years	3	3
26 Years	2	2
27 Years	2	2
28 Years	9	9
29 Years	6	6
30 Years	7	7
31 Years	13	13
32 Years	1	1
33 Years	6	6
34 Years	7	7
35 Years	10	10
36 Years	4	4
37 Years	3	3
38 Years	3	3
39 Years	7	7
40 Years	3	3
41 Years	1	1
42 Years	3	3
43 Years	2	2
44 Years	2	2
46 Years	1	1
48 Years	1	1
52 Years	1	1
Gender		
Male	16	16
Female	84	84
Workplace		
Prof. DR. W. Z. Johannes Kupang hospital	67	67
S. K. Lerik Kupang hospital	33	33
Workspace		
Isolation room	30	30
Emergency room	46	46
Intensive Care Unit(ICU)	11	11
Neonatal Intensive Care Unit(NICU)	4	4
Dental polyclinic	9	9
Last education		
D3	64	64
D4/S1	11	11
Ners	24	24
S2	1	1
Total	100	100

Table-1: Characteristics of respondents

Workplace	Workspace	Self-efficacy				Total
		Low		High		
		n	%	n	%	
Prof. DR. W. Z. Johannes Kupang hospital	Isolation room	2	11,8	15	88,2	17
	Emergency room	11	35,5	20	64,5	31
	Intensive Care Unit (ICU)	3	27,3	8	72,7	11
	Neonatal Intensive Care Unit (NICU)	0	0,0	4	100,0	4
	Dental polyclinic	1	25,0	3	75,0	4
Total		17	25,4	50	74,6	67
S. K. Lerik Kupang hospital	Isolation room	7	53,8	6	46,2	13
	Emergency room	4	26,7	11	73,3	15
	Dental polyclinic	0	0,0	5	100,0	5
Total		11	33,3	22	66,7	33

Table-2: Distribution of nurses' self-efficacy by hospital and workspace

Workplace	Workspace	Anxiety				Total
		Normal		Mild-medium		
		n	%	n	%	
Prof. DR. W. Z. Johannes Kupang hospital	Isolation room	13	76,5	4	23,5	17
	Emergency room	22	71,0	9	29,0	31
	Intensive Care Unit(ICU)	8	72,7	3	27,3	11
	Neonatal Intensive Care Unit(NICU)	4	100,0	0	0,0	4
	Dental polyclinic	3	75,0	1	25,0	4
Total		50	74,6	17	25,4	67
S. K. Lerik Kupang hospital	Isolation room	6	46,2	7	53,8	13
	UGD	13	86,7	2	13,3	15
	Dental polyclinic	5	100,0	0	0,0	5
Total		24	72,7	9	27,3	33

Table-3: Distribution of nurses' anxiety based on hospital and workspace

Self-efficacy	Anxiety								Total		Level r	Level p
	Normal		Mild-medium		Severe		Very severe/panic					
	n	%	n	%	n	%	n	%	n	%	r = -0,798	p = 0,000
Low	5	5	23	23	0	0	0	0	28	28		
High	69	69	3	3	0	0	0	0	72	72		
Total	74	74	26	26	0	0	0	0	100	100		

* $p<0,05$ #spearman rank; * n:Number of respondents

Table-4: Correlation between self-efficacy and anxiety of hospital nurses during the COVID-19 pandemic in Kupang City
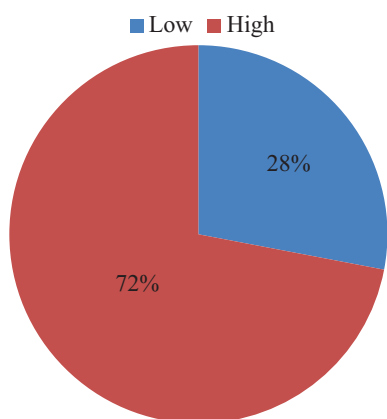
Graph-1: Frequency distribution of nurses' self efficacy
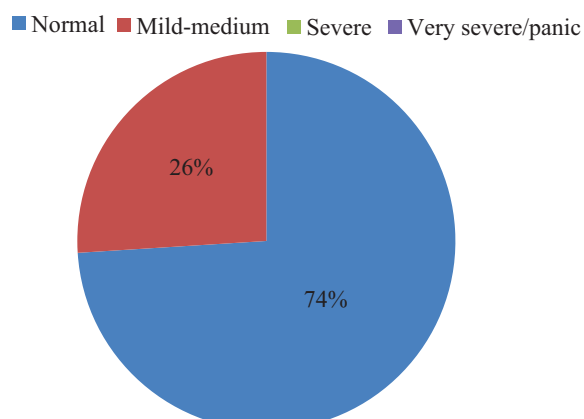
Graph-2: Frequency distribution of nurses' anxiety

respondent with the latest education S2.

Based on the graph-1 data taken from 100 nurse respondents at Prof. DR. W. Z. Johannes Kupang hospital and S. K.

Lerik Kupang hospital found that 28 respondents (28%) had low self-efficacy and 72 respondents (72%) had high self-efficacy.

Based on the data presented in table-2, it was found that the distribution of self-efficacy was low in Prof. DR. W. Z. Johannes Kupang hospital as many as 17 respondents (25.4%) and the distribution of high self-efficacy in Prof. DR. W. Z. Johannes Kupang hospital as many as 50 respondents (74.6%), while the data regarding the distribution of low self-efficacy in S. K. Lerik Kupang hospital were 11 respondents (33.3%) and the distribution of high self-efficacy in S. K. Lerik Kupang hospital was 22 respondents (66, 7%), so it can be concluded that the percentage of the distribution of low self-efficacy is more among nurses in S. K. Lerik Kupang hospital and the distribution of high self-efficacy is more in nurses at Prof. DR. W. Z. Johannes Kupang hospital. Based on the data above, it can be seen that the low self-efficacy of nurses based on the workspace in Prof. DR. W. Z. Johannes Kupang hospital in the emergency room as many as 11 respondents (35.5%), ICU room 3 respondents (27.3%), 1 respondents dental polyclinic (25%), 2 respondents isolation room (11.8%) and none respondents who have low self-efficacy in the NICU room, so it can be concluded that the low self-efficacy in Prof. DR W. Z. Johannes Kupang hospital was mostly experienced by nurses in the emergency room. The data above can also be seen that the high self-efficacy in Prof. DR. W. Z. Johannes Kupang hospital in the NICU room as many as 4 respondents (100%), isolation room 15 respondents (88.2%), dental polyclinic room as many as 3 respondents (75%), ICU room as many as 8 respondents (72.7%) and emergency room as many as 20 respondents (64.5%), so it can be concluded that the room that has the highest self-efficacy is in Prof. DR. W. Z. Johannes Kupang hospital is the NICU room.

Data in S. K. Lerik Kupang hospital regarding low self-efficacy in the isolation room were 7 respondents (53.85%), in the emergency room there were 4 respondents (26.67%) and there were no respondents who had low self-efficacy in the dental polyclinic, so that It can be concluded that the nurses at S. K. Lerik Kupang hospital who have the highest self-efficacy are found in the isolation room. Based on the data presented above, the high self-efficacy in S. K. Lerik Kupang hospital in the dental polyclinic was 5 respondents (100%), the emergency room was 11 respondents (73.33%) and the isolation room was 6 respondents (46.15%), So it can be concluded that the nurses at S. K. Lerik Kupang hospital who have the highest self-efficacy are found in the dental polyclinic.

Based on the data in graph-2 taken from 100 nurse respondents at Prof. DR. W. Z. Johannes Kupang hospital and S. K. Lerik Kupang hospital found that 74 respondents (74%) had no anxiety (normal), 26 respondents (26%) had mild-moderate anxiety, and none of the respondents had severe or very severe/panic anxiety.

Based on the data presented in table-3, it was found that the distribution of anxiety was normal in Prof. DR. W. Z. Johannes Kupang hospital as many as 50 respondents (74.6%) and the distribution of mild-moderate anxiety in Prof. DR. W. Z. Johannes Kupang hospital as many as 17 respondents (25.4%), while the distribution of normal anxiety in S. K. Lerik Kupang hospital was 24 respondents (72.7%) and the distribution of mild-moderate anxiety in S. K. Lerik Kupang hospital was 9 respondents (27.3%). It can be concluded that the percentage of normal distribution of anxiety is more in nurses at Prof. DR. W. Z. Johannes Kupang hospital and the distribution of mild-moderate anxiety was mostly among nurses at S. K. Lerik Kupang hospital.

The level of anxiety based on the workspace can be seen that the normal anxiety of the nurses at Prof. DR. W. Z. Johannes Kupang hospital in the NICU room as many as 4 respondents (100%), isolation room 13 respondents (76.5%), dental polyclinic 3 respondents (75%), ICU room 8 respondents (72.7%), and emergency room 22 respondents (71%), so it can be concluded that anxiety is normal in Prof. DR W. Z. Johannes Kupang hospital was mostly experienced by nurses in the NICU room. Regarding mild-moderate anxiety in Prof. DR. W. Z. Johannes Kupang hospital, there were 9 respondents in the emergency room (29%), 3 respondents in the ICU room (27.3%), 1 respondent in the dental office (25%), 4 in the isolation room (23.5%) and there were no respondents who experience mild-moderate anxiety in the NICU room, so it can be concluded that the room that has mild-moderate anxiety in Prof. DR. W. Z. Johannes Kupang hospital was mostly found in the emergency room.

The data obtained at S. K. Lerik Kupang Hospital regarding normal anxiety in the emergency room were 13 respondents (85.7%), the isolation room for 6 respondents (46.2%), and the dental polyclinic room for 5 respondents (5%), so it can be concluded that The most normal anxiety in S. K. Lerik Kupang hospital was in the nurses in the isolation room. The distribution of mild-moderate anxiety in S. K. Lerik Kupang hospital in the isolation room was 7 respondents (53.8%), 2 respondents (13.3%) in the emergency room, and there were no respondents who experienced mild-moderate anxiety in the dental polyclinic. It can be concluded that the nurses at S. K. Lerik Kupang hospital who experienced mild-moderate anxiety mostly were nurses in the isolation room.

Table-4 shows that of the 100 respondents surveyed, there are 28 respondents (28%) who have low self-efficacy among them there are 5 respondents (5%) with normal anxiety, 23 respondents (23%) with mild to moderate anxiety, and no respondents who suffer from severe anxiety and very severe/panic, while in 72 respondents (72%) who have high self-efficacy among them there are 69 respondents (69%) with normal anxiety, 3 respondents (3%) with mild to moderate anxiety and no respondents who suffer from severe anxiety and very severe/panic.

Based on the statistical test using the spearman rank, the results showed that the significant level value was $p = 0.000$ or $p < 0.05$, indicating that there was a significant correlation between self-efficacy and nurse anxiety at Prof. DR. W. Z. Johannes Kupang hospital and S. K. Lerik Kupang hospital. In this study, it was found that $r = -0.798$ indicated that the strength of the correlation between the variables of self-efficacy and anxiety was very strong and the direction of the correlation between the two variables was negatively related, which means that the lower the self-efficacy, the higher the

anxiety, and vice versa.

DISCUSSION

Based on the results of research conducted by researchers as shown in graph-1, it shows that the total number of respondents both from Prof. DR. W. Z. Johannes Kupang hospital and S. K. Lerik Kupang hospital which had low self-efficacy were 28 respondents (28%) and had high self-efficacy as many as 72 respondents (72%). This is in line with the research conducted by Xiong et al. (2020), the results showed that the average self-efficacy score > 24 showed that most respondents had high self-efficacy. This can be because nurses have adapted to the COVID-19 pandemic situation so that self-management in terms of nurses' self-confidence to be able to work in the midst of a COVID-19 pandemic situation is better so that high self-efficacy results can be obtained.[16] By several factors, namely experience of mastering something, social modeling, social persuasion, physical and emotional conditions.[17]

Based on table-2 it shows that the distribution of self-efficacy is low in Prof. DR. W. Z. Johannes Kupang hospital as many as 17 respondents (25.4%) while in S. K. Lerik Kupang hospital as many as 11 respondents (33.3%), so it can be concluded that the low self-efficacy is more in S. K. Lerik Kupang hospital. This is in line with research conducted by Xiong et al (2020) which states that medical personnel at second line hospitals for handling COVID-19 have a low level of self-efficacy. This condition is because the COVID-19 outbreak is new and spreads very quickly so that nurses are inexperienced and do not have a good level of confidence in dealing with or working in a COVID-19 pandemic situation so that it can affect the self-efficacy of nurses during the COVID-19 pandemic.[16]

Table-2 shows that the self-efficacy is low in Prof. DR. W. Z. Johannes Kupang hospital was found mostly in nurses in the emergency room with a percentage of 35.48%, while the S. K. Lerik Kupang hospital was found in the isolation room with a percentage of 53.85%. This is because the isolation room and emergency room are rooms with a high risk of transmission because nurses in the isolation room treat patients who are confirmed positive for COVID-19, while nurses in the emergency room treat patients with emergency conditions where it is not known whether the patient has COVID-19 or not, thus affecting the level of self-efficacy of nurses in performing tasks and services during the COVID-19 pandemic.[18]

According to the data in graph-2, it is found that the percentage distribution of nurses' anxiety at both hospitals is from Prof. DR. W. Z. Johannes Kupang hospital and S. K. Lerik Kupang hospital as many as 74 respondents (74%) with normal anxiety, 26 respondents (26%) with mild-moderate anxiety and no respondent who experienced severe or very severe/panic anxiety. This is in line with the research conducted by Yun Liu et al. (2020), it was found that the prevalence of anxiety was 12.5% and 87.5% of respondents did not experience anxiety. This is influenced by the fact that nurses have adjusted to the COVID-19 pandemic

situation so that nurses feel less anxious, but it is different from the research conducted by Nasrullah et al. (2020) which states that the distribution of anxiety among health workers during the COVID-19 pandemic is high, namely the percentage is 65,8%.[19,5] This difference depends on the phase of the COVID-19 pandemic, namely at the beginning of the COVID-19 outbreak, nurses felt more anxious, but over time nurses were able to adjust to existing conditions so that feelings of anxiety were reduced.[20] In addition, there are several factors that influence anxiety, namely age, gender, level of knowledge, personality type, family support and environmental conditions.[21]

Based on table-3 shows that the distribution of mild-moderate anxiety in Prof. DR. W. Z. Johannes Kupang hospital as many as 17 respondents (25.4%) while in S. K. Lerik Kupang hospital as many as 9 respondents (27.3%), so it can be concluded that mild-moderate anxiety is more in S. K. Lerik Kupang hospital. This result is different from the research conducted by Lai et al (2020) which explains that the distribution of anxiety among nurses who work in front line hospitals handling COVID-19 is more anxious than second line hospitals.[6]

The data in table-3 shows that mild-moderate anxiety in Prof. DR. W. Z. Johannes Kupang hospital was found mostly in nurses in the emergency room with a percentage of 23.5%, while in S. K. Lerik Kupang hospital there were in isolation rooms with a percentage of 53.8%. This is in line with research conducted by Lu et al (2020) which states that health workers who work in the emergency room, isolation and other frontline departments are at double risk of experiencing anxiety during the COVID-19 pandemic. This is because the emergency room and isolation rooms are at high risk of contracting COVID-19 so that feelings of anxiety and worry can be experienced by nurses.[22]

Based on the results of the research analysis presented in table-4, it is known that self-efficacy has a correlation with the anxiety of nurses at Prof. DR. W. Z. Johannes Kupang hospital and S. K. Lerik Kupang hospital during the COVID-19 pandemic, the results obtained were p = 0.000 or p < 0.05, meaning that statistically there is a similarity between the results of the research that has been done with the hypothesis (H1). This means the self-efficacy of nurses at Prof. DR. W. Z. Johannes Kupang hospital and S. K. Lerik Kupang hospital are high, so that the nurse's anxiety is normal. The high self-efficacy of nurses causes nurses not to experience anxiety even though the COVID-19 pandemic situation, so that the possible quality of nurse services at Prof. DR. W. Z. Johannes Kupang hospital and S. K. Lerik Kupang hospital were not disturbed during the COVID-19 pandemic.

Based on table-4 it can be seen that the strength of the correlation for each variable is very strong and the direction of the correlation is negative which is interpreted at the value of r = -0.798, meaning that the lower the self-efficacy, the higher the anxiety, and vice versa. This is in line with the research conducted by Xiao et al (2020), the results show that there is a correlation between self-efficacy and anxiety

of health workers during the COVID-19 pandemic with a value of p = 0.029 with a negative correlation which is interpreted from a value of r = -0,351.[10]

CONCLUSION

Distribution of self-efficacy to nurses at Prof. DR. W. Z. Johannes Kupang hospital as many as 17 respondents (25.4%) had low self-efficacy and 50 respondents (74.6%) had high self-efficacy, while distribution of self-efficacy among nurses at S. K. Lerik Kupang hospital as many as 11 respondents (33.3%) had low self-efficacy and 22 respondents (66.7%) had high self-efficacy.

The distribution of anxiety among nurses at Prof. DR. W. Z. Johannes Kupang hospital as many as 50 respondents (74.6%) did not experience anxiety, 17 respondents (25.4%) experienced mild-moderate anxiety and no respondents experienced severe or very severe/panic anxiety while distribution of anxiety among nurses at S. K. Lerik Kupang hospital as many as 24 respondents (72.7%) did not experience anxiety, as many as 9 respondents (27.3%) experienced mild-moderate anxiety and no respondents experienced severe or very severe/panic anxiety.

There is a significant correlation (p = 0,000 or p < 0.05) between self-efficacy and nurse anxiety at Prof. DR. W. Z. Johannes Kupang hospital and S. K. Lerik Kupang hospital which one self-efficacy was obtained from nurses at Prof. DR. W. Z. Johannes Kupang hospital and S. K. Lerik Kupang hospital are high, so that the anxiety of nurses at Prof. DR. W. Z. Johannes Kupang hospital and S. K. Lerik Kupang hospital are normal.

Limitations of study

Researchers only examined the correlation between self-efficacy and nurses' anxiety during the COVID-19 pandemic, while the causes of anxiety experienced by nurses during the COVID-19 pandemic were not studied by researchers.

Regarding the COVID-19 pandemic, the researchers did not interview respondents directly but instead conducted them online through the WhatsApp application.

This study was conducted only at 2 hospitals in Kupang City This research was conducted on samples who treated COVID-19 patients and those who did not treat them but worked in rooms that were at high risk of contracting them.

Suggestion

For respondents, researchers hope that they can increase self-efficacy so that they can minimize the anxiety that may be experienced during the COVID-19 pandemic and pay more attention to the psychological condition of respondents even in the midst of a risky situation such as the COVID-19 pandemic situation.

For future researchers, a sample of nurses who treat COVID-19 patients can be used.

For related agencies, it is hoped that it can increase education about self-efficacy with anxiety so that it can minimize the psychological impact that may occur on nurses during the COVID-19 pandemic so that the quality of nurse services remains optimal.

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