Original Research Article

SOCIETY DIMENSIONS REVIEWED FROM LOOS AND GRIEVING IN COVID-19 PANDEMIC ERA

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Abstract

Background: Covid-19 pandemic has spread across the world and is having an impact globally. The rules for handling the Covid-19 pandemic force people to change their habits and patterns of daily life. Covid-19 has brought dramatic changes to our lives, including many losses. However, change or transition experienced by the community due to the Covid-19 pandemic can cause loss and grief (Rosyanti&Hadi, 2020).

Objectives: This study aims to determine society dimension variables with loss and grief in Covid-19 pandemic era.

Methods: Correlational analytic with cross sectional approach. A sample of 278 respondents with accidental sampling technique. The instrument used a questionnaire distributed by social media which included data on community dimensions and instrument loss and grieving community facing the Covid-19 pandemic. The validity and reliability of the research instrument were tested using the Cronbach's Alpha test. Descriptive analysis with process analysis, analytic analysis with chi square test and Spearman's Rho at a significance level of 5%.

Results: Based on age, adolescence to early adult are mostly in the anger stage (33.3%), adult and the elderly range are in the Bargaining stage (50.76-70%). Based on gender, male (48.4%) and female (57.2%) are in the Bargaining stage. Based on the education: basic until higher education, more than half of them are in the Bargaining stage (42.8-54.4%). Based on occupation, most respondents who do not work are in the anger stage (50%) government employees, general employees, self-employed and still in school are in the Bargaining stage (47.2-61.8%).

Conclusion: The length of time the incident occurred, the cultural context, the similarity of policies, and the territorial background of the Indonesian State greatly influenced the loss and grieving stages, making the majority of the grieving stages in the Bargaining stage.

Keywords: *Loss, grief, Covid-19.*

INTRODUCTION

Corona virus known as Covid-19 was originally an epidemic case that infects the respiratory tract and first occurred in Wuhan, the largest metropolitan area in Hubei Province, China. This case of Covid-19 was first reported to WHO on December 31, 2019. It was recorded on August 2, 2020 that 17,660,523

confirmed Covid-19 and 680,894 people died. In Indonesia, data on September 15, 2020 shows that confirmed positive Covid-19 reached 225,030 people, 161,065 recovered and 8,965 people died (Satgas RI, 2020).

Covid-19 pandemic has spread across the world and is having an impact globally. The Covid-19 pandemic is currently affecting people around the world in many different ways. It is a major crisis event, exposing the world to significant challenges (Ogliastri, 2020). To prevent the spread of Covid-19, several regulations have been implemented, such as physical distancing and large-scale social restrictions (PSBB). The rules for handling the Covid-19 pandemic force people to change their habits and patterns of daily life. Covid-19 has brought dramatic changes to our lives, including many losses, such as: economy, jobs, income, physical connectedness, social and emotional. Because these losses, society may not understand it as something that can cause sadness and difficulty. However, any loss, change or transition experienced by the community due to the Covid-19 pandemic can cause loss and grief. Public reactions to the Covid-19 pandemic include changes in concentration, irritability, anxiety, insomnia, reduced productivity, and interpersonal conflicts (Rosyanti & Hadi, 2020). The emotional reactions that arise from the impact of the Covid-19 pandemic in society are very diverse, including shock, numbness, denial, anger, fear, anxiety, panic and guilt when individuals learn to live with loss (CMHA, 2020). Some people feel the loss of significant people in life due to Covid-19, some have lost their jobs and income, and even lost their social freedom. This has led to an increase in the number of cases of prolonged grief disorder as a result of the Covid-19 pandemic. This study aimed to determine society dimension variables with loss and grieving in Covid-19 pandemic era.

METHODS

Study Design

The research method used is correlational analytic with cross sectional approach. This study connects the variable dimensions of society which include age, gender, occupation, and education with grief and loss facing the Covid-19 pandemic era.

Setting

This research was conducted from May to August 2020 using social media, so that the location reaches all parts of Indonesia.

Research Subject

The population in this study is all Indonesian people in 2020 with the inclusion criteria for people aged 15 years and over, with the consideration that they are old enough to understand the measurement tools provided. The sampling technique used purposive sampling technique. Samples were recruited by distributing google forms to social media (facebook, whatsapp group, and instagram). To reduce selection bias, the google form is distributed through the whatsapp group which is forwarded in a chain from the whatsapp groups owned by the group members concerned, thereby minimizing unclear accounts. incoming data is checked, duplicate data is deleted until only a single data remains. The response of participants in the comment's column stating that they have filled out the google form is checked to find out whether it is an unclear account or not. After the process is carried out, the participants who are left behind are selected as samples. The population that was netted was 289, after going through the validation process, there

were 11 duplication of data, so that the selected sample was 278 respondents.

Instruments

The instrument in the study used a questionnaire which included data on community dimensions, namely age, gender, education, and occupation as well as a questionnaire to measure the level of loss and grieving in the community facing the Covid-19 pandemic. The validity and reliability of the research instrument were tested using the Cronbach's Alpha test. The results of Cronbach's Alpha test were 0.489. With df 45 at a significance level of α 0.05, the critical point of correlation coefficient (r) is 0.288. So, it can be concluded that the questionnaire is reliable. The results of the validity test show that all item items in the questionnaire have a correlation coefficient (r) higher than the critical point correlation coefficient (r) 0.288 so it can be concluded that the questionnaire used is valid. The Loss and Grieving questionnaire consist of 25 questions indicating each of the loss and grieving stages. A closed-ended type questionnaire with 2 yes and no answer options. Yes, a score of 1 is given and no score of 0. The Loss and Grieving category are based on the maximum or dominant number at the Loss and Grieving stage.

Data Analysis

Data were analyzed descriptively and analytically using SPSS software version 23.00. Descriptively, the data will be analyzed based on the percentage. Gender variables are categorized into male and female sex. Education is categorized into primary, secondary and tertiary education. Jobs are categorized as still in school, unemployed, self-employed, private and civil servants. The ages were categorized as 15-20 years, 21-30 years, 31-40 years, 41-55 years and 56-65 years. Analytically, the correlational relationship between gender variables, work with loss and grieving, using the Chi Square test with a significance level of α 5% and seeing the strength of the relationship with the Contingency Coefficient. Meanwhile, the variables of age and education were analyzed correlational with Loss and Grieving using the Spearman Rho test. H0 is rejected if the P-value $<\alpha$, which means there is a correlation between variables.

Ethical Consideration

This research has received permission for its implementation from the College of Health of Rajekwesi, Bojonegoro with number: 507/STIKES.R/XI/2020.

RESULTS

Characteristics of Respondents by Community Dimensional

Table 1. Distribution of Respondents by Community Dimensional Characteristics in the Covid-19 Pandemic Era in Indonesia in 2020.

Characteristics of Respondents	Frequency (f)	Percentage (%)
Age (Years)		
15-20	6	2.2
21-30	68	24.5
31-40	91	32.7
41-55	93	33.4
56-65	20	7.2

Characteristics of Respondents	Frequency (f)	Percentage (%)
Gender		
Male	91	32.7
Female	187	67.3
Educational Level		
Basic School	4	1.4
High School	34	12.2
College	237	85.3
Occupational		
Government Employee	75	27.0
General Employee	123	44.2
Entrepreneur	36	13.0
Unemployed	10	3.6
School	34	12.2

Sources: Primary Data of Questionnaires, 2020.

Based on table 1, it is found that the characteristics of respondents in the study based on age dominated by adults, namely 68 respondents (24.5%) aged 21-30 years, 91 respondents (32.7) aged 31-40 years, and 93 respondents (33.4%) aged 41-55 years. Based on gender, most of them were female, as many as 187 respondents (67.3%). Based on educational level, the majority were college, as many as 237 respondents (85.3%). Based on work, most are general employees, as many as 123 respondents (44.2%).

Characteristics of Respondents by Community Loss and Grieving

Table 2. Distribution of Respondents of Community Loss and Grieving in the Covid-19 Pandemic Era in Indonesia in 2020.

Variables	Frequency (f)	Percentage (%)
Denial	20	7.2
Anger	75	27.0
Bargaining	151	54.3
Depression	1	0.4
Acceptance	31	11.2
Total	278	100.0

Sources: Primary Data of Questionnaires, 2020.

Based on table 2, it found that the community loss and grieving stage in this study of 278 respondents, more than half of them were in the bargaining stage, as many as 151 respondents (54.3%), while a small portion was in the anger stage, as many as 75 respondents (27.0%) and Acceptance, as many as 31 respondents (11.2%).

Analysis of the Relationship between Society Dimension Variables with Loss and Grieving in Covid-19 Pandemic Era

Table 3. The Results of the Relationship between Society Dimension Variable with Loss and Grieving in Covid-19 Pandemic Era in Indonesia in 2020 using Chi Square Test and Spearmen Rho Test.

Variable	Denial		Anger		Bargaining		Depression		Acceptance		Sum		Sig
	Sum	%	Sum	%	Sum	%	Sum	%	Sum	%	Sum	%	
Age (Years)													0.515
15-20	2	33.3	3	50.0	1	16.7	0	0	0	0	6	100	
21-30	3	4.5	20	29.9	34	50.7	1	1.5	9	12.4	67	100	
31-40	4	4.4	27	29.7	51	56.0	0	0	9	9.9	91	100	
41-55	9	9.7	21	22.6	51	54.8	0	0	12	12.9	93	100	
56-65	2	10.0	3	15.0	14	70.0	0	0	1	5.0	20	100	
Gender													0.32
Male	8	8.8	25	27.5	44	48.4	1	1.1	13	14.3	91	100	
Female	12	6.4	50	26.7	107	57.2	0	0	18	9.6	187	100	
Educational Level													0.85
Basic School	1	14.28	3	42.8	3	42.8	0	0	0	0	7	100	
High School	3	8.8	7	20.6	19	55.9	1	2.9	4	11.8	34	100	
College	16	6.8	65	27.4	129	54.4	0	0	27	11.4	237	100	
Occupational													0.26
Government Employee	6	8.0	21	28	41	54.7	0	0	7	9.3	75	100	
General Employee	6	4.9	33	26.8	69	56.1	0	0	15	12.2	123	100	
Entrepreneur	4	11.1	11	30.6	17	47.2	0	0	4	11.1	36	100	
Unemployed	2	20.0	5	50.0	3	30.0	0	0	0	0	10	100	
School	2	5.9	5	14.7	21	61.8	1	2.9	5	14.7	34	100	

Table 3 explained that based on age, respondents aged adolescence to early adulthood are mostly in the anger stage, namely 33.3%, while in the adult age range and the elderly are in the Bargaining stage, namely between 50.76-70%. Based on gender, both men and women are all in the Bargaining stage, male 48.4% while female 57.2%. Based on the education of both respondents with basic education, high school to higher education, more than half of them are in the Bargaining stage, namely 42.8-54.4%. Based on occupation, most respondents who do not work are in the anger stage, namely 50%, while those who work as government employees, private, self-employed and still in school are in the Bargaining stage, namely between 47.2-61.8%. Based on hypothesis testing to analyze the relationship between age and the loss ang Grieving stage, the sig results were obtained. 0.515, The relationship between sex and the stages of Loss and Grieving Sig.0.32, The relationship between education and the stages

of Loss and Grieving Sig.0.85 and the relationship between work and the stages of Loss and Grieving Sig.0.26. These results indicate that there is no relationship between age, sex, education and employment with the Loss and Grieving stages.

DISCUSSION

Table 2 explained that the community loss and grieving stage in this study of 278 respondents, more than half of them were in the bargaining stage of 54.3%, while a small portion was in the anger stage at 27% and Acceptance of 11.2%. Since WHO announced that Covid-19 was a global emergency or pandemic on March 11, 2020 (Djalante, 2020), Work from Home and Learning from Home began. The existence of social restrictions, and even large-scale social restrictions were imposed in a number of areas, causing everyone to feel deprived of freedom. Loss or a sense of loss is a situation that has occurred (actual) or potential that an individual can experience when he is separated from

something that previously existed, either partially or completely (Hidayat, 2012). Loss or loss is the condition of an individual separating from something that previously existed to be partially or completely non-existent (Yosep, 2011). During a pandemic, previously people could do activities as usual, there were no social restrictions then lost their freedom, experienced limited social, economic and educational access. Losing does not only mean something that is visible, but can also be in the form of loss of psychological aspects of the self-such as loss of freedom (Hidayat, 2012). A sudden reaction of loss will usually produce a reaction of shock, denial and a sense of emptiness that typically lasts days or weeks. The results showed that most respondents were in the Bargaining stage, namely the bargaining stage. This is because this pandemic has been going on for several months so that the periods of denial and anger have passed, even though the responses between respondents were different.

Factors that influence loss and grief are age, gender, personality, relationship with the object of loss, duration and socio-culture (Aiken., 2004). Meanwhile, according to (Papalia, 2014), although grieving is universal, it is also influenced by the cultural context. The results showed that age and education were associated with loss and grieving stages with moderate to high relationship strength, while gender and occupation had no relationship with loss and grieving stages. Papalia (2014) stated that loss is universal and influenced by cultural context. This is relevant because the pandemic that occurred was experienced by respondents at the same time, with relatively similar socio-cultural conditions because both occurred in Indonesia. Men experience a different grief (grieving) than women (Sanders, 1993). Men are socialized in roles that are independent, have control and are not emotional, are not crybaby and strong (Berry, 1992), while women are socialized as caregivers, have empathy and are sensitive to the feelings of others. Table 3 explains that based on gender, both men and women are all in the Bargaining stage, male 48.4% while female 57.2%.

Although analytic shows a p-value of 0.32 does not differ between men and women, the results show that men are more capable of being in the Acceptance stage than women, namely 14.3% for men and 9.6% for women. Based on age, respondents aged adolescence to early adulthood are mostly in the anger stage, namely 33.3%, while in the adult age range and the elderly are in the Bargaining stage, namely between 50.76-70%. Age is a unit of time that measures the time of existence of living things or objects (Ministry of Health, 2013). The elder enough, the level of maturity and strength of a person will be more mature in thinking and working (Notoatmodjo, 2012).

The statistical analysis shows a p-value of 0.039 with a correlation coefficient of 0.515 which interprets a relationship between age and the stages of loss and grieving with moderate strength. This is relevant to the concept of age. The relatively young age of the anger stage is longer than that of adulthood. This is shown in the results of the study even though it has been several months, but the relatively young age is still in the anger stage (33%), while the adults to the early elderly are in the Bargaining stage (50.76-70%). Based on the education of both respondents with basic education, high school to higher education, more than part of them are in the Bargaining stage, namely 42.8-54.4%. According to Nursalam (2015), the higher the level of education, the higher the knowledge. Less education will hinder the development of one's attitude towards newly introduced values (Nursalam, 2015). The statistical results show a p-value of 0.011 with a correlation coefficient of 0.85. These results interpret that there is a strong relationship between education and the stages of loss and grieving. Based on occupation, most of the respondents who did not work were in the anger stage, namely 50%, while those who worked as government employees, private sector, self-employed and still in school were in the Bargaining stage, namely between 47.2-61.8%. Work is something that is done as a means of living to earn a living. The work environment can make a person gain experience and knowledge either

directly or indirectly. The results of the analysis show a *p*-value of 0.26 which interprets there is no relationship between occupational and the Loss and Grieving stages. However, respondents who did not work showed stages of anger (50%). Someone who does not work tends to be at home and is less aware of the conditions outside. Limited access to education with online learning, limited economic access due to decreased income, changing social habits due to reduced interaction are frustrating, especially for someone who does not know or directly encounter the actual conditions. Whereas someone who is still in school or who is already working is mostly in the Bargaining stage (47.2-61.8%) because the situation and conditions that develop with all the changes require to adapt quickly.

CONCLUSION

The conclusion from this study is that statistically all respondents experience loss and grieving, and the dimension of society that is strongly associated with loss and grieving is education, the dimension of society that is moderately related to loss and grieving is age, and the dimension that does not show a relationship is type gender and work. Men are more receptive to feelings of loss and grief, adulthood and early elderly are in the Bargaining stage, while adolescence to early adulthood tends to be in the anger stage. In terms of education, both those with basic education and tertiary education are all in the bargaining stage while based on work, people who do not work to respond to this pandemic are still in the anger stage, in contrast to those who are still in school and have worked to respond to this feeling of loss and grief in the Bargaining stage. The length of time the incident occurred, the cultural context, the similarity of policies, and the territorial background of the Indonesian State greatly influenced the loss and grieving stages, making the majority of the grieving stages in the Bargaining stage.

SUGGESTIONS

In this study, the dimensions of public knowledge about the Covid-19 pandemic were not measured. This knowledge is important because when people are in an acceptance stage based on adequate knowledge, the adaptation of a new normal life will be easier to apply. A person's acceptance of loss is also influenced by the duration of the incident, this is to assess the adaptability to the loss. Based on these limitations, it is suggested for other researchers to develop this research by reviewing the knowledge variable, the duration of the incident and differentiating the samples based on strata using stratified sampling, so that it will be clear that the loss and grieving situations in the lower, middle, upper strata and can be generalized be a conclusion to seek appropriate follow-up.

DECLARATION OF CONFLICTING INTEREST

None.

AUTHOR CONTRIBUTION

Rahmawati Rahmawati: Planning the research, analyzes research results and compiling research results to be best article.

Evita Muslima Isnanda Putri: Assisting the main author in planning research, distributing

questionnaires, compiling research results as an article and as a correspondence author.

Fidrotin Azizah: Assisting to distribute questionnaires and compile research results as an article form.

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REFERENCES

Aiken., L. (2004). *Psycholog Testing and Assesmentical.* Needham Height: Allyn & Bacon.

Berry, J. (1992). *Cross Culture Psychology : Research and Application.* USA: Cambridge University Press.

CMHA, C. M. (2020). LOSS AND GRIEF DURING THE COVID-19 PANDEMIC. pp. 1-7.

Depkes. (2013). *Riset Kesehatan Dasar.* Jakarta: Badan Penelitian dan Pengembangan Kesehatan Kemenkes RI.

Djalante. (2020). Review and Analysis of Current Responses to Covid-19 In Indonesia: Period of January until March 2020. *Progress in Disaster Science*, 1-9.

Hidayat. (2012). *Pengantar Kebutuhan Dasar Manusia: aplikasi, konsep dan proses keperawatan.* Jakarta: Salemba Medika.

Notoatmodjo. (2012). *Promosi Kesehatan dan Perilaku Kesehatan.* Jakarta: Rineka Cipta.

Nursalam. (2015). *Manajemen Keperawatan Aplikasi dalam Praktek Keperawatan Profesional.* Jakarta: Salemba Medika.

Ogliastri, D. (2020). *Loss and Grief during COVID-19.* Copenhagen: FRC Reference Centre for Psychosocial Support.

Papalia. (2014). *Menyelami Perkembangan Manusia; Experience Human Development.* Jakarta: Salemba Humanika.

Rosyanti, L., & Hadi, I. (2020, Juni 1). Dampak Psikologis dalam Memberikan Perawatan dan Layanan Kesehatan Pasien COVID-19 pada Tenaga Profesional Kesehatan. *HIJP : HEALTH INFORMATION JURNAL PENELITIAN, 12*.

Sanders. (1993). *Human Factor in Engineering and Design 7th ed.* Mc Graw-Hill Inc.

Satgas RI, C. 1. (2020). *Satuan Tugas Penanganan Covid 19.* Retrieved on September 16, 2020, from https://covid19.go.id/

Yosep. (2011). *Keperawatan JIwa Edisi 4.* Jakarta: Refika Aditama.