SOCIETY DIMENSIONS REVIEWED FROM LOSS & GRIEVING IN COVID-19 PANDEMIC ERA

By Rahmawati Rahmawati

SOCIETY DIMENSIONS REVIEWED FROM LOSS & GRIEVING IN COVID-19 PANDEMIC ERA

Rahmawati¹, Evita Muslima Isnanda Putri², Fidrotin Azizah³

¹ STIKES RajekwesiBojonegoro
*Correspondence:
Author
Mailing Address
Email:
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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 eving 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

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INTRODUCTION

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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, interpersonal conflicts and The (Rosyanti&Hadi, 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 aims to determine society dimension variables with loss and griefin Covid-19 pandemic era.

METHOD 10 Design Study

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 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 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 comments 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.

Instrument

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 correlation

coefficient (r) higher than the critical point correlation coefficient (r) 0.288 so it can be concluded that the questionnaire used is The valid. Loss and Grieving questionnaire consists 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 is 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 a 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.

PESULTS

Num

1

2

Ag<mark>2</mark> 15-20 Years

Sex Male

Female

Education Basic School

High School

College

Employee

Entrepreneur

Unemployed

Summary

School

General Employee

Job Government

21-30 Years

31-40 Years

41-55 Years 56-65 Years

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

Sum

6

68

91

93

20

91

187

4

34

237

75

123

36

10

34

278

Variable

of respondents in the study based on age dominated by adults, namely 24.6% aged 21-30 years, 32.9% aged 31-40 years, and 33.6% aged 41-55 years. Based on gender, most of them were female, amount 67.3%. Based on education, the majority are higher education, amount 85.3%. Based on work, most are general employees amount 44.2%

Table 1 explains the characteristics

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

Num	Variable	Sum	%
1	Denial	20	7.2
2	Anger	75	27
3	Bargaining	151	54.3
4	Depression	1	0.4
5	Acceptance	31	11.2
	Summary	278	100

Table 2 explains 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

Table 3. Frequency Distribution of Community Dimensions in terms of Loss and Grieving in the Covid-19 Pandemic Era in 2020

11.2%.

%

2.2

24.6

32.9

33.6

7.2

32.7

67.3

0.4

12.2

85.3

27 44.2

12.9

3.6

12.2

100

Num	Variable	Den	nial	Anger		ger Bargaining		Depression		Acceptance		Sum		Sig
		Sum	%	Sum	%	Sum	%	Sum	%	Sum	%	Sum	%	

Ag <mark>-2</mark>													0.515
15-20 Years	2	33.3	3	50	1	16.7	0	0	0	0	6	100	
21-30 Years	3	4.5	20	29.9	34	50.76	1	1.5	9	12.4	67	100	
31-40 Years	4	4.4	27	29.7	51	56	0	0	9	9.9	91	100	
41-55 Years	9	9.7	21	22.6	51	54.8	0	0	12	12.9	93	100	
56-65 Years	2	10	3	15	14	70	0	0	1	5	20	100	
Sex													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	
Education													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	
Job													0.26
	6	0	21	20	41	547	0	0	7	0.2	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	5	50	3	30	0	0	0	0	10	100	
School	2	5.9	5	14.7	21	61.8	1	2.9	5	14.7	34	100	
	15-20 Years 21-30 Years 31-40 Years 41-55 Years 56-65 Years Sex Male Female Education Basic School High School College Job Government Employee General Employee Entrepreneur Unemployed	15-20 Years 2 21-30 Years 3 31-40 Years 4 41-55 Years 9 56-65 Years 2 Sex Male Male 8 Female 12 Education 1 Basic School 1 High School 3 College 16 Job Government Employee 6 General Employee 6 Entrepreneur 4 Unemployed 2	15-20 Years 2 33.3 21-30 Years 3 4.5 31-40 Years 4 4.4 41-55 Years 9 9.7 56-65 Years 2 10 Sex Male 8 8.8 Female 12 6.4 Education Basic School 1 14.28 High School 3 8.8 College 16 6.8 Job Government Employee 6 8 General Employee 6 4.9 Entrepreneur 4 11.1 Unemployed 2 20	15-20 Years 2 33.3 3 21-30 Years 3 4.5 20 31-40 Years 4 4.4 27 41-55 Years 9 9.7 21 56-65 Years 2 10 3 Sex Male 8 8.8 25 Female 12 6.4 50 Education Basic School 1 14.28 3 High School 3 8.8 7 College 16 6.8 65 Job Government Employee 6 8 21 General Employee 6 4.9 33 Entrepreneur 4 11.1 11 Unemployed 2 20 5	15-20 Years 2 33.3 3 50 21-30 Years 3 4.5 20 29.9 31-40 Years 4 4.4 27 29.7 41-55 Years 9 9.7 21 22.6 56-65 Years 2 10 3 15 Sex Male 8 8.8 25 27.5 Female 12 6.4 50 26.7 Education Basic School 1 14.28 3 42.8 High School 3 8.8 7 20.6 College 16 6.8 65 27.4 Job Government Employee 6 8 21 28 General Employee 6 4.9 33 26.8 Entrepreneur 4 11.1 11 30.6 Unemployed 2 20 5 50	15-20 Years 2 33.3 3 50 1 21-30 Years 3 4.5 20 29.9 34 31-40 Years 4 4.4 27 29.7 51 41-55 Years 9 9.7 21 22.6 51 56-65 Years 2 10 3 15 14 Sex Male 8 8.8 25 27.5 44 Female 12 6.4 50 26.7 107 Education Basic School 1 14.28 3 42.8 3 High School 3 8.8 7 20.6 19 College 16 6.8 65 27.4 129 Job Government Employee 6 8 21 28 41 General Employee 6 4.9 33 26.8 69 Entrepreneur 4 11.1 11 30.6 17 Unemployed 2 20 5 50 3	15-20 Years 2 33.3 3 50 1 16.7 21-30 Years 3 4.5 20 29.9 34 50.76 31-40 Years 4 4.4 27 29.7 51 56 41-55 Years 9 9.7 21 22.6 51 54.8 56-65 Years 2 10 3 15 14 70 Sex Male 8 8.8 25 27.5 44 48.4 Female 12 6.4 50 26.7 107 57.2 Education Basic School 1 14.28 3 42.8 3 42.8 High School 3 8.8 7 20.6 19 55.9 College 16 6.8 65 27.4 129 54.4 Job Government Employee 6 4.9 33 26.8 69 56.1 Entrepreneur 4 11.1 11 30.6 17 47.2 Unemployed	15-20 Years 2 33.3 3 50 1 16.7 0 21-30 Years 3 4.5 20 29.9 34 50.76 1 31-40 Years 4 4.4 27 29.7 51 56 0 41-55 Years 9 9.7 21 22.6 51 54.8 0 56-65 Years 2 10 3 15 14 70 0 Sex Male 8 8.8 25 27.5 44 48.4 1 Female 12 6.4 50 26.7 107 57.2 0 Education Basic School 1 14.28 3 42.8 3 42.8 0 High School 3 8.8 7 20.6 19 55.9 1 College 16 6.8 65 27.4 129 54.4 0 Job Government Employee 6 8 21 28 41 54.7 0 General Employee 6 4.9 33 26.8 69 56.1 0 Entrepreneur 4 11.1 11 30.6 17 47.2 0 Unemployed 2 20 5 50 3 30 0	15-20 Years 2 33.3 3 50 1 16.7 0 0 21-30 Years 3 4.5 20 29.9 34 50.76 1 1.5 31-40 Years 4 4.4 27 29.7 51 56 0 0 41-55 Years 9 9.7 21 22.6 51 54.8 0 0 56-65 Years 2 10 3 15 14 70 0 0 Sex Male 8 8.8 25 27.5 44 48.4 1 1.1 Female 12 6.4 50 26.7 107 57.2 0 0 Education Basic School 1 14.28 3 42.8 3 42.8 0 0 High School 3 8.8 7 20.6 19 55.9 1 2.9 College 16 6.8 65 27.4 129 54.4 0 0 Job Government Employee 6 8 21 28 41 54.7 0 0 General Employee 6 4.9 33 26.8 69 56.1 0 0 Entrepreneur 4 11.1 11 30.6 17 47.2 0 0 Unemployed 2 20 5 50 3 30 0 0	15-20 Years 2 33.3 3 50 1 16.7 0 0 0 0 21-30 Years 3 4.5 20 29.9 34 50.76 1 1.5 9 31-40 Years 4 4.4 27 29.7 51 56 0 0 9 41-55 Years 9 9.7 21 22.6 51 54.8 0 0 12 56-65 Years 2 10 3 15 14 70 0 0 1 2 56-65 Years 2 10 3 15 14 70 0 0 1 2 56-65 Years 2 10 3 15 14 70 0 0 1 1 1.1 13 Female 8 8.8 25 27.5 44 48.4 1 1.1 13 Female 12 6.4 50 26.7 107 57.2 0 0 18 Education Basic School 1 14.28 3 42.8 3 42.8 0 0 0 12 6.8 65 27.4 129 54.4 0 0 27 Job Government Employee 6 8 21 28 41 54.7 0 0 27 General Employee 6 4.9 33 26.8 69 56.1 0 0 7 General Employee 6 4.9 33 26.8 69 56.1 0 0 15 Entrepreneur 4 11.1 11 30.6 17 47.2 0 0 4 Unemployed 2 20 5 50 3 30 0 0 0 0	15-20 Years 2 33.3 3 50 1 16.7 0 0 0 0 0 1 21-30 Years 3 4.5 20 29.9 34 50.76 1 1.5 9 12.4 31-40 Years 4 4.4 27 29.7 51 56 0 0 9 9.9 41-55 Years 9 9.7 21 22.6 51 54.8 0 0 12 12.9 56-65 Years 2 10 3 15 14 70 0 0 1 5 58	15-20 Years 2 33.3 3 50 1 16.7 0 0 0 0 0 6	15-20 Years 2 33.3 3 50 1 16.7 0 0 0 0 0 6 100

Table 3 explains 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 explains 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, et.al (2007) 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 (Sanders, 1993). Men 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 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 more old enough, the level of maturity and strength of a person will be more mature in thinking and working (Notoatmojo, 2012)

The statistical analysis shows a pof 0.039 with a correlation value 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, 42.8-54.4%. According namely Nursalam (2011), 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 work 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 followup.

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DECLARATION OF CONFLICTING INTEREST

This manuscript is an unpublished original work.

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AUTHOR CONTRIBUTION

Author 1 : Rahmawati, as main author, plans the research, analyzes research results and and compiling research results to be best article.

Author 2 : Evita Muslima Isnanda Putri, assisting the main author in planning research, distributing questionnaires compiling research results as an article and as a correspondence author.

Author 3 : Fidrotin Azizah, assisting to distribute questionnaires and compile research results as an article form.

ORCID

Author 1

ORCID ID Author 1 :0000-0001-5706-4732 Author 2

ORCID ID Author 2:0000-0001-5187-251X Author 3 ORCID ID Author 3:0000-0003-3075-1705

REFERENCES

- BIBLIOGRAPHY 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.
- Notoatmojo. (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).

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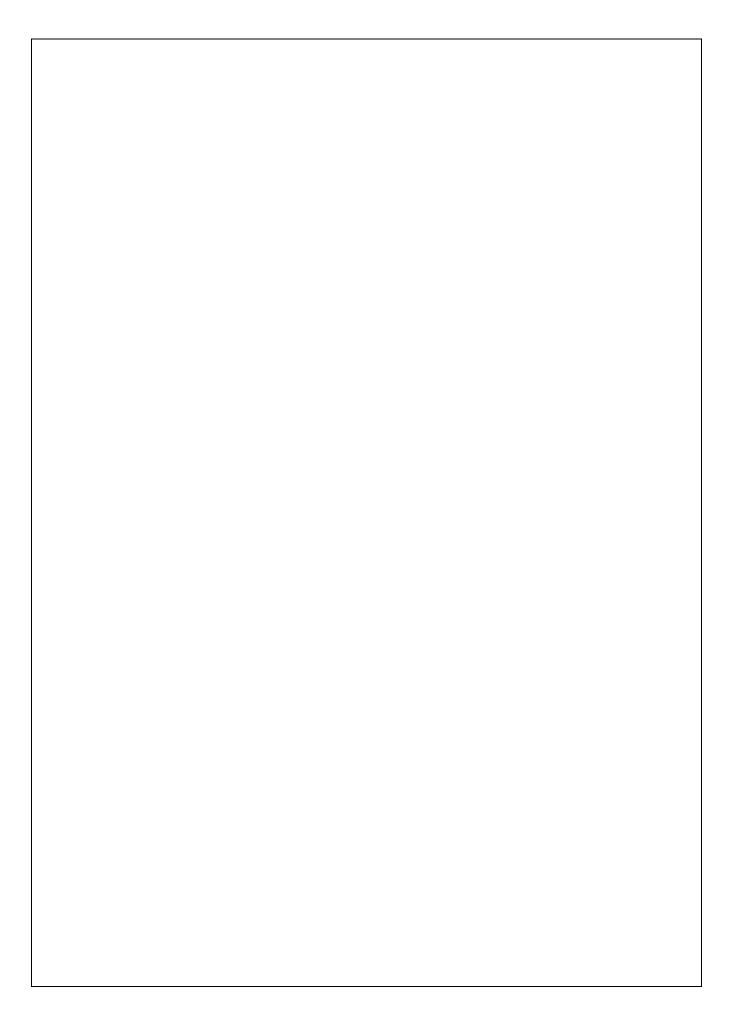
HEALTH INFORMATION JURNAL

PENELITIAN, 12.

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

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

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



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PRIMARY SOURCES

Sylvie Puspita, Enny Puspita. "THE RELATIONSHIP BETWEEN NURSE'S KNOWLEDGE ABOUT NURSING CARE AND PATIENT'S SATISFACTION", Nurse and Health: Jurnal Keperawatan, 2020 Crossref

- 2 oa.upm.es 28 words 1 %
- erepository.uonbi.ac.ke

 lnternet

 25 words 1 %
- Panji Dwi Ashrianto, Edwi Arief Sosiawan. "Content 18 words < 1 % Analysis of the Controversy Over the Communication of Government Policies in Handling Covid-19 in Online Media", Proceeding of LPPM UPN "VETERAN" YOGYAKARTA CONFERENCE SERIES 2020 POLITICAL AND SOCIAL SCIENCE SERIES, 2020 Publications
- Levkovich Inbar, Shiri Shinan-Altman. "Emotional reactions and subjective health status during the COVID-19 pandemic in Israel: the mediating role of perceived susceptibility", Psychology, Health & Medicine, 2020
- 6 docobook.com

 Internet 17 words < 1%
- 7 escholarship.org
 Internet 14 words < 1%

- Elfa Rahmawati Fitri, Herlin Fitriana Kurniawati.

 "The correlation between midwives' support and accessed to Voluntary Counseling and Testing (VCT) on pregnant women", Journal of Health Technology Assessment in Midwifery, 2018

 Crossref
- Yufi Aris Lestari, Hartin Suidah, Nur Chasanah, Elvatir Nusri Nur. "HUBUNGAN STRATEGI MEKANISME KOPING DENGAN TINGKAT KECEMASAN MENGHADAPI PEMBELAJARAN KLINIK PADA MAHASISWA SEMESTER IV PROGRAM STUDI ILMU KEPERAWATAN STIKES DIAN HUSADA MOJOKERTO", Nurse and Health: Jurnal Keperawatan, 2019
- Anderson Díaz-Pérez, Elkin Navarro Quiroz, DILIA APARICIO MARENCO. "Moral Structuring Of Children During The Process Of Obtaining Informed Consent In Clinical And Research Settings", Research Square, 2020

 Crossref Posted Content
- Lono Wijayanti, Nur Ainiyah. "THE EFFECT OF THE SKIN PERSONAL HYGIENE MODULES AS 11 words < 1% HEALTH EDUCATION MEDIA AGAINST KNOWLEDGE IN PREVENTION OF SKABIES", Nurse and Health: Jurnal Keperawatan, 2019
- Dona Muji Fitriana, Yuni Sufyanti Arief, Ilya Krisnana. "COMMITMENT MOTHER AND BEHAVIORAL PREVENTION OF PICKY EATING ON TODDLER", Nurse and Health: Jurnal Keperawatan, 2020
- Uly Agustine, Maria Endang, Era Kale, Emilia Akoit. 10 words < 1% "Risk Factors of Malaria Events among Pregnant Women in East Sumba Regency, Indonesia", Research Square, 2020



PROCESS IN EKA MEDIKA PRATAMA CLINIC, PUNGGING VILLAGE, MOJOSARI SUB-DISTRICT, MOJOKERTO DISTRICT",

Nurse and Health: Jurnal Keperawatan, 2018

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