Student's Anxiety and Overthinking in Conducting Face-to-Face Learning Process During the Covid-19 Pandemic

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Abstract: This study aims to identify the anxiety and overthinking (rumination) of private school students in Jakarta in conducting face-to-face learning process during the Covid-19 pandemic. This study used a quantitative approach with 272 respondents. This study used the Beck Anxiety Inventory (BAI) and Rumination Response Scale (RRS) instruments. Meanwhile, the data of this study were analyzed by using descriptive statistics. The results of the study overall show that more students have low anxiety, that are 76% (208 people). In Rumination, they are more likely to be on the brooding indicator by 49% (132 people). Meanwhile, on the reflection indicator by 45% (123 people), depression by 4% (12 people), and 2% (5 people) respondents get the same score as the three indicators of reflection, brooding, and depression.

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Introduction
The Covid-19 pandemic is a virus outbreak which hit almost all over the world, including Indonesia. Coronavirus-2019 (Covid-19) infection which causes Severe Acute Respiratory Syndrome – Coronavirus 2 (SARS-CoV-2) has become a global pandemic (Chui & Shi, 2019). Moreover, the Covid-19 pandemic situation has an impact on mental health in society; such as, rumination (Jamshaid, et al., 2020), anxiety (Winurini, 2020), depression, insomnia, fear, and anger (Torales, O'Higgins, Castaldelli-Maia, & Ventriglio, 2020).

The amount of time alone at home during the Covid-19 pandemic has resulted in a person experiencing overthinking (Lehrer, et al., 2021). Furthermore, overthinking or rumination which is caused by pandemic has been linked to fatigue as well as depression symptoms. Rumination is characterized by persistent and passive cognitive considerations resulting from an event which eventually worsens pre-existing depression (Ye B, et al., 2020). A person who indicates higher rumination will experience more intense negative emotions and feelings of hopelessness. In addition, rumination which is experienced by individuals will result in excessive anxiety (Dewajani & Karneli, 2020).

Anxiety because of the impact of Covid-19 is experienced by health workers who directly face people who are infected with Covid-19 (Alnazly, Khraisat, Al-Bashaireh, & Bryant, 2021). It is caused by the increased workload, worrying about the health of himself and his family, and directly seeing the situation of loss faced by the patient's family (Fadli, Safruddin, Ahmad, Sumbara, & Baharuddin, 2020). In addition to health workers, the elderly group experiences anxiety which is caused by this pandemic. Moreover, the vulnerability of the elderly is caused by a degenerative process that causes a decrease in body immunity so that the elderly are susceptible to infection with diseases, including the Corona Virus. In the midst of a pandemic that is full of uncertainty, it is easy for the elderly to feel excessive...
anxiety which then affects their physical health condition (Vibriyanti, Community Mental Health: Managing Anxiety in the Midst of the Covid-19 Pandemic, 2020).

Since the increase in Covid-19 cases, the changing lifestyle has also caused anxiety for many individuals. The government issued a policy related to working and studying from home to control the spread of this virus. Furthermore, it eventually affects the level of student anxiety. The results of research which had conducted by Laksmi, Annashr, & Atmaja (2021) shows that 52.9% of college students in Java experienced high anxiety. In addition to college students, students also conduct distance learning during the Covid-19 pandemic. Online learning which is conducted during the Covid-19 pandemic causes anxiety for students at school since students do not understand the material, have difficulty doing assignments properly according to the time limit, have limitations in accessing the internet, face various technical obstacles, and feel worried about dealing with material in the learning process (Oktawirawan, 2020).

A survey which had conducted by the Association of Indonesian Public Health Scholars and Professionals (Persakmi) also found that more than 50% of respondents experienced anxiety, with the categories of anxiety and very anxiety (Putri & Septiawan, Community Anxiety Management in Facing COVID-19, 2020). Continuous negative news about COVID-19 raises a high level of anxiety in Indonesian society (Pratiwi & Sukarta, 2020). Moreover, Aufar & Raharjo (2020) stated that the more seeing and knowing statistical data regarding the spread of the virus and the number of positive patients to the world's number of victims, it can increase person's anxiety. Research on adolescents is very little even though adolescents are a group which is susceptible to anxiety and anxiety in adolescents will have an impact on academic, social, career skills, etc. Furthermore, Chen, Zheng, Liu, Guan, & Lou et al (2020) conducted a study in Giyang China and identified as many as 196 (18.92%) adolescents who have cases of anxiety. Teenage girls show a higher risk of anxiety during Covid-19. Meanwhile, the late teens show a more depressed risk than early teens (Chen, Zheng, Liu, Guan, & Lou, 2020). Therefore, a pandemic situation is something which makes a person feel anxious, people infected with Covid-19 will experience material losses (stuck business, hospital expenses if infected with Covid-19) and non-material (feel sad, unable to do activities outside, and worried).

According to research which had conducted by Chen et al (2020), adolescents are a population which is susceptible to psychological problems since they have implemented the school curriculum online and have conducted daily activities at home since the outbreak of Covid-19 in China so that lifestyle transformations and the threat of infection cause psychological disorders; such as, anxiety among adolescents even until they grow up (Chen et al., 2020). This study aims to identify the anxiety and overthinking (rumination) of private school students in Jakarta in conducting face-to-face learning process during the Covid-19 pandemic.

**Research Method**

The method of this study used a descriptive quantitative approach. The populations in this study were students at private high schools in Jakarta, with a population of 824 students. The sampling technique used in this research was Simple Random Sampling. In addition, the method of selecting respondents was using the Slovin formula so that from a total of 824 populations, at a margin of error of 5%, at least 235 students were selected as samples of this study. There were two variables in this study that were the level of anxiety and the level of overthinking (rumination). In order to determine this level of anxiety, the researcher adopted the Beck Anxiety Inventory (BAI) questionnaire from the previous researcher which
The instrument used in this study was the Beck Anxiety Inventory (BAI) which was developed by Beck, Brown, Epstein, & A. Steer (1988) and adapted by Mahendra (2020). Beck Anxiety Inventory (BAI) can be given to children to adults so that it can be used to determine the level of anxiety experienced by students. Furthermore, the Beck Anxiety Inventory (BAI) has 21 statements about how the subject felt in the past week and it is a Likert scale. There are four answer choices in the form of an intensity score for each statement that is 0-3. A higher total score may indicate a higher/severe level of anxiety. In addition, the assessment standards for this instrument are; a score of 0-21 indicates low anxiety, a score of 22-35 indicates moderate anxiety, and a score of more than 36 indicates high anxiety (Beck, Brown, Epstein, & A. Steer, 1988).

Furthermore, instrument testing was conducted on 60 respondents from private STM students in Jakarta and statistical analysis used IBM SPSS Statistics 26. Meanwhile, validity test used Pearson product moment and it showed that overall items in the instrument were declared valid since r 0.379 – 0.807 was greater than rtable 0.254 with significance p < 0.05. All statements in the BAI instrument are valid items. Therefore, the researcher only changes the editorial which is more appropriate and better so that the item can be used in research. In addition, the reliability test using alpha cronbach was 0.756 the number that can be declared reliable according to Guilford's rules (Yunanto, 2016).

The Ruminative Response Scale (RRS) was developed by Treynor, Gonzalez, and Nolen-Hoeksema (2003) to measure the trait rumination in the form of a subject's repetitive tendency to think about causes, effects, and symptoms of perceived negative affect. RRS identifies a person's tendency to think or do certain things under pressure. This instrument has 22 statement items regarding one's own feelings, and there are 3 categories of assessment, that are Reflection, Brooding, and Depression-Related. Items on the rumination scale asking "think how sad you feel" are continuous with the depression statement category "I feel sad." Indeed, the previous agreement with cognition about feeling sad and the latter relates to being, or presence, and sadness so that it becomes a single entity (Treynor, Gonzalez, & Nolen-Hoeksema, 2003).

Testing an instrument was conducted on 60 respondents of private STM students in Jakarta and statistical analysis used IBM SPSS Statistic 26. Validity test using Pearson product moment showed that overall items in the instrument were declared valid since r 0.314 – 0.714 was greater than rtable 0.254 with 0.05 significance. There was one item that was not valid, namely statement number 20. However, item number 20 was still used in the study since the item was related to other items. If these items were omitted, it would reduce the meaning of the results of the Beck Anxiety Inventory (BAI) instrument. Therefore, the researcher only changed the editorial which was more appropriate and better so that the item could be used in research. In addition, the reliability test using Cronbach's alpha showed result of 0.900 the number was declared reliable according to Guilford's rules (Yunanto, 2016). The data analysis technique of this research used descriptive statistical analysis while the processing used Microsoft Excel.
Results and Discussion

Anxiety

Based on the findings of this study, it can be seen the results of the categorization of the level of anxiety experienced by students in conducting Face-to-face Learning Process (PTM) during the pandemic are that a total of 76% (208 people) of students experienced low anxiety, 17% (45 people) of students experienced moderate anxiety, and 17% (20 people) students experienced high anxiety. Anxiety is a response to feelings of fear or worry which are prolonged on something which is not clear and results in feelings of helplessness.

Table 1. Beck Anxiety Inventory

<table>
<thead>
<tr>
<th>Category</th>
<th>Score</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Low (Mild) Anxiety</td>
<td>208</td>
<td>76%</td>
</tr>
<tr>
<td>Moderate Anxiety</td>
<td>45</td>
<td>17%</td>
</tr>
<tr>
<td>High (Severe) Anxiety</td>
<td>20</td>
<td>7%</td>
</tr>
</tbody>
</table>

Lubis (2009) stated that anxiety is a feeling of fear of weakness. Furthermore, anxiety is the feeling which we experienced when we think about something unpleasant that will happen. The most anxiety is at the level of mild anxiety, followed by moderate anxiety and severe anxiety. It shows that most students do not experience much anxiety when conducting face-to-face learning process (PTM).

Mild anxiety is related to the tensions of daily life where it can cause individuals to be alert and increases the individual's field of perception (Annisa & Ifdil, 2016). Physiological responses which exist are very short breath, increased pulse and blood pressure, mild stomach symptoms, wrinkled face and quivering lips. Meanwhile, cognitive responses which exist are widening perceptual fields, being able to receive complex stimuli and still being able to concentrate and explain problems. In addition, the behavioral and emotional responses which exist are fine tremors in the hands, unable to sit quietly and sometimes the voice is raised (Anggraeini, 2018). Individuals with mild anxiety tend to be unrealistic and deny/hide anxiety symptoms (Beck, Brown, Epstein, & A. Steer, 1988).

Moderate anxiety is a condition where the individual only focuses on the things that are important. In this condition, the field of individual perception becomes narrow. The physiological responses that exist are anxiety, frequent experience shortness of breath and increased pulse and blood pressure. Meanwhile, the cognitive responses which exist are that the perceptual field is narrowed and external stimuli cannot be accepted. In addition, the behavioral and emotional responses that exist are talking more and faster (Pramana, Okatiranti, & Ningrum, 2016). Individuals with moderate anxiety tend to show symptoms of uncomfortable anxiety openly, so that individuals may look for ways to calm themselves (Beck, Brown, Epstein, & A. Steer, 1988).

In high anxiety, it is characterized by individuals who only focus on specific and detailed things. Cognitive responses which exist are lack of perception, focus on one thing, difficulty concentrating and difficulty solving a problem. Physiological responses which exist are that individuals can experience headaches, nausea, shaking, palpitations, increased pulse, and frequent urination. Meanwhile, behavioral and emotional responses which exist are feelings of fear; besides, focus and individual attention is only focused on themselves (Muyasaroh, 2020). Individuals with high levels of anxiety should seek counseling with a counselor or psychologist if their anxiety persists (Beck, Brown, Epstein, & A. Steer, 1988). High anxiety shows that the individual's perception is very narrowed and disturbed so that the
individual is unable to control himself and is unable to follow directions in doing something. Physiological responses which exist at this stage are shortness of breath and chest pain. Meanwhile, the cognitive responses which exist are a very narrow perceptual field and unable to think logically. In addition, the behavioral and emotional responses which exist are fear and screaming, agitation and anger (Pramana et al., 2016).

Anxiety can happen to every individual. Characteristics of gender and age can affect the anxiety of the individual. It is due to differences in the way they interact and experience with the surrounding environment which can affect the way individuals deal with problems (Prayer, Katuuk, & Malara, 2019).

Overthinking (Rumination)

In Rumination's findings, the researcher finds that the categorization of overthinking experienced by students on the reflection indicator is 45% (123 people), brooding is 49% (133 people), depression is 4% (12 people), and 2% (5 people) of respondents have the same score with the three indicators of reflection, brooding, and depression.

<table>
<thead>
<tr>
<th>Category</th>
<th>Score</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Reflection</td>
<td>123</td>
<td>45%</td>
</tr>
<tr>
<td>Brooding</td>
<td>133</td>
<td>49%</td>
</tr>
<tr>
<td>Depression</td>
<td>12</td>
<td>4%</td>
</tr>
<tr>
<td>Reflection, Brooding, and</td>
<td>5</td>
<td>2%</td>
</tr>
<tr>
<td>Depression</td>
<td></td>
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</tbody>
</table>

Overthinking (Rumination) identifies a person's tendency to think or do certain things under pressure (Hoeksema, 2000). Students who are in their brooding category tend to show a gloomy or anxious condition when contemplating something; besides, often think negatively when experiencing a certain event (Treynor, Gonzalez, & Nolen-Hoeksema, 2003). Individuals in the Brooding category do activities when they are sad, depressed and gloomy. They tend to think about “does I deserve it?”, “why do I have problems which no one else has”. Such thinking is not critical thinking that is needed by the individual, it is more appropriate to critique oneself, others, and fate (Treynor, Gonzalez, & Nolen-Hoeksema, 2003).

Students who are in the reflection category tend to focus at solving a problem experienced by someone to relieve symptoms of depression. It indicates that reflection can be triggered by negative influences, or lead to negative effects in the short term. However, it can eventually be adaptive in reducing negative influences, perhaps because it leads to effective problem solving (Treynor, Gonzalez, & Nolen-Hoeksema, 2003). Furthermore, students who experience depression-related feelings of sadness tend to show two aspects, which are brooding and reflection aspects which show a tendency to reflect on a problem and think negatively which eventually has an impact on future negative thinking. Meanwhile, the research respondents who experienced the same score will face issues related to the three rumination indicators. (Treynor, Gonzalez, & Nolen-Hoeksema, 2003).

Conclusion

It can be concluded that the description of the level of anxiety of students towards face-to-face learning process (PTM) mostly experienced anxiety. Furthermore, the highest level of anxiety is mild anxiety, followed by moderate anxiety and severe anxiety. Based on the characteristics of the respondents, most of the respondents who experienced anxiety are in the
age group of 15-18 years. In addition, overall the results of this study show that more students have mild anxiety namely 76% (208 people). In Rumination, they are more likely to be on the brooding indicator by 49% (132 people).

**Recommendation**

It is expected that counseling guidance teacher and the school to be more aware and pay attention to the anxiety and overthinking experienced by students who conduct face-to-face learning process (PTM). In addition, it is recommended further researchers to study coping strategies in order to reduce anxiety and overthinking in students who conduct face-to-face learning process (PTM).

**References**


