Research Paper

The Effect of Social Stigmatization on Coping Stress of COVID-19 Survivors Nurses in Handling COVID-19

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ABSTRACT

During the Covid-19 pandemic in Indonesia, there was not only an increasing trend in the number of cases, but also a stigma that emerged from the community both to patients and health workers so that it would affect psychologically for health workers in caring for patients. The purpose of this study was to analyze the effects of social stigma on coping stress of Covid-19 Survivors Nurses with stress in handling Covid-19. This study used a correlative quantitative approach with a total sample of 101 nurses at a few hospitals of Central Java Indonesia of Indonesia. The questionnaire method is used as an instrument in data collection and is processed using a Likert scale. Data analysis in this study used the SPSS 20 application to perform statistical tests such as image analysis test, Kolmogorov Smirnov test, hypothesis test, correlation test, regression analysis test. The results of the study can be concluded that with a probability value of p of 0.015 < from the value of α (0.05), this means that in theory h0 is rejected and on the contrary ha is accepted, which means that the emergence of social stigma affects the coping stress of nurses in handling Covid-19.

Keywords: *Stigmatization, Stress Coping, Nurses Survivor, COVID-19*

Indonesia declared the Covid-19 case to be a non-natural national disaster on April 13, 2020. The Ministry of Health through the Covid-19 Task Force reported an increasing trend in the number of cases per day where up to January 7, 2021 the number of confirmed Covid-19 patients was 797,723 with 23,520 fatalities. (COVID-19, 2021).

What Indonesia is currently facing is not only the trend of increasing the number of cases, both morbidity and mortality, but also the stigma that emerges from the community both to patients and health workers.

The emergence of social stigmatization or negative relationships in individuals or communities who experience symptoms or have certain diseases amid the tendency to increase the number of people exposed to COVID-19 are some social phenomena that can potentially worsen the condition. Labeling, stereotyping and discrimination and treating them differently

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or having harassment status are given to them because they are indicated by certain diseases.(Kawalcovid_19, 2020).

The existence of a group of individuals / community groups who provide stigmatization to health workers and covid-19 patients actually creates a trend of increasing mortality and morbidity of Covid-19 cases. This is what causes patients and nurses as health workers as the vanguard of the Covid-19 pandemic to be very prone to suffering from health problems both physically and mentally due to the stigma they receive both by nurses as health service providers and for patients with Covid-19.

The emergence of social stigma will actually encourage a person to cover up the disease to avoid different treatment, prevent immediate seeking help, and prevent adopting and adopting healthy living behaviors. This condition will affect the handling of prevention of the spread of disease during the Covid-19 pandemic.

Community behavior that isolates and avoids individuals exposed to Covid-19 may occur due to feelings of excessive intimidation where people find it easier to correlate feelings of worry in different communities and tend to worry about something that is not yet known. (Kawalcovid_19, 2020)

What is meant by stigma?
Here is that stigma is not only a point of view or action on something that has become bad but also creates feelings of marginalization and makes health status and recovery worse as well. This is what needs to be known that stigma also contributes to the increasing mortality rate. For this reason, stigma should not be seen in isolation and must be comprehensive.(Covid-19 Task Force, 2020). So that it is not only physical management but also in the framework of mental health and psychosocial community of the population in an effort to reduce the spread of COVID-19 which is carried out comprehensively and sustainably.

In the framework of health, social stigma is a negative relationship between individuals or groups of individuals who have homogeneous characteristics and certain diseases. People who are labeled, stereotyped and discriminated against as treated separately or feel deprived of their position in an epidemic situation are considered to have some connection with the diagnosis of certain diseases.

They (nurses, their families, their relationships and communities) who suffer from a disease will get a negative impact because they get this kind of treatment. On the other hand, the stigma will also be obtained by people who do not have the disease but have the same characteristics as this group. Social stigma and a character to discriminate appears to individuals with certain ethnic backgrounds as well as anyone who is suspected of having had contact with the Covid-19 virus.(WHO, UNICEF, 2020).

Other research suggests that there is evidence to suggest that stigma can become internalized, and that internalized stigma can lead to distrust of health professionals, skepticism of the public health system, and reluctance to disclose behaviors related to transmission. (Budhwani & Sun, 2020).

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Another study that examined the stigma of society towards COVID-19 patients by (Oktaviannoor et al., 2020) which explains that the lack of knowledge from the community will have a significant effect on giving stigma to patients and health workers.

According to research, difficulties in maintaining physical and spiritual conditions that are prone to psychological problems such as hopelessness, anxiety and heavy mental stress and fatigue will be experienced by health workers. Unsupportive feelings, poor personal health conditions, worry of being a source of infection and spreading to relatives or other people, isolation, uncomfortable responses, social labeling, overloaded work obligations, and feeling insecure and comfortable when providing care services and health in individuals exposed to Covid-19 is another identified risk factor.(Rosyanti & Hadi, 2020)

Consuming alcohol, carrying workload from home, income, gender, limited food sources and anxiety of being infected are all factors that cause stress in society. food, and fears of being infected.(Handayani et al., 2020)

Research that discusses stress is where self-isolation and quarantine experienced by an individual will result in substantial changes in the level of anxiety, emotions, nervousness and mental stress. On the other hand, people who are outside where individuals carry out quarantine / isolation will certainly experience fear and anxiety of being infected due to a lack of limited or inaccurate knowledge about Covid-19. This was disclosed by (Brooks et al., 2020) in his research entitled "The psychological effects of quarantine and ways to minimize them: a quick review of the evidence."

But some time before (Luo et al., 2020) have conducted previous research which published that a pandemic condition caused by a viral infection that has symptoms such as SARS syndrome similar to the ongoing Covid-19 pandemic has a serious psychological and mental impact on medical personnel and the general public, including anxiety, depression, and psychotic symptoms.

From the research that has been elaborated above, it can be concluded that compared to physical injuries, mental changes due to major disasters will have broader and lasting implications, even though the concern for mental health is still low, both from the individual side, procurement for planning and resources. The emergence of various mental problems has been reported and announced during the pandemic in China, the country that was first exposed to Covid-19, both at the individual, community, national and international levels. At the individual level, individuals may feel more fear and anxiety for those infected and experience symptoms that tend to be severe or critical, become vulnerable, and become dependent on others. There will even be a mental crisis due to the Covid-19 pandemic.(Ramanathan et al., 2020).

Nurses are health workers who have a very important role when a disaster occurs. Because nurses work 24 hours to monitor developments and provide health care for Covid-19 patients. The community, government and non-governmental organizations have realized the importance of preparedness of health workers, especially hospital nurses in dealing with disasters, maintaining patient health and safety and providing comprehensive health services in carrying out their duties.

It is crucial to avoid worry is to facilitate standardized self-protection tools, so that working health professionals do not feel afraid of themselves or their relatives. (Fadli R, Safruddin, Andi Sastria Ahmad, Sumbara, 2020)

An individual may respond to stress in many of their ways if the individual is in a pinch. Symptoms that indicate a psychological disorder include increased anxiety, mood swings, low impulses, and thoughts of being restless or depressed. When the home quarantine period is enforced, increased anxiety will be experienced by the community during the Covid-19 pandemic and can have a serious impact on mental health. In this case, the nurse may be exposed to psychosocial disasters arising from ambiguity of current and future workplace conditions or from transitional processes and work rules. Even more worrying, there are still many triggers experienced by health workers during this pandemic that can cause stress. among others, fear of themselves or their families and work partners who may be infected with Covid-19; minimal personal protective equipment; lack of social support; the emergence of debate about the rules enforced and expectations of caring for or accommodating individuals; inability in daily activities such as exercise, eating regularly and getting enough rest(International Labor Organization, 2020).

Nurses in carrying out their responsibilities and duties absolutely require preparation both physically and psychologically. An unpleasant workplace coupled with patient behavior will make nurses lose concentration. Something that is likely to cause stress and conflict in the nurse is a pressure that must be overcome immediately.(Permatasari & Utami, 2018)

Based on this, a study was conducted on social stigmatization that would affect the coping stress of nurse survivors in dealing with Covid-19 In Central Java Province of Indonesia where the purpose of this study was to analyze the effect of social stigma on coping stress on nurses survivors in handling Covid-19 in Central Java Province of Indonesia. This research was conducted in the period December 2020 to March 2020

METHODOLOGY

Sample
This study used a total sampling technique to obtain a sample of 101 inpatient nurses who were sampled using the method of sample count using the Slovin formula with a significance degree of 5%.

The research approach used is a quantitative correlation approach which aims to determine the effect of social stigma on the coping stress of survivors nurses in handling the Covid-19 In Central Java Province of Indonesia Magelang.

Instruments
In this study researchers used a questionnaire method in the form of google form as an instrument in data collection where the questionnaire used was processed using a Likert scale. Analysis of the data in this study, the researcher used the help of the SPSS version 20 application to perform statistical tests which carried out in this test were demographic description analysis, Kolmogorov Smirnov test, hypothetical test, correlation test, regression analysis test. Respondents were given queries to reply each item by indicting the extent of their agreement on 5 point Likert.

RESULTS

Table 1. Age Frequency of Respondents

Age Range	N	Percentage
25-30 Years	25	24.8%
31-35 Years	22	21.8%
36-40 Years	28	27.7%
41-45 years	22	21.8
> 45 Years	4	4%
Total	**101**	**100%**

From Table 1. above, it can be identified that respondents aged 25-30 years have a percentage of 24.8% (21 respondents). For respondents aged 31-35 years have 22 respondents with a percentage of 21.8%. Furthermore, respondents aged 36-40 years had the highest percentage, namely 27.7% (28 respondents) and 21.8% (22 respondents) aged 41-45 years, the latter were respondents aged more than 45 years with a total of 4 respondents (4%).

Table 2. Distribution of Length of Employment of Respondents

Length of working	N	Percentage
0-5 years	14	13.9%
6-10 years	26	25.7%
> 10 years	61	60.4%
Total	**101**	**100%**

The description from Table 2. above can be explained that respondents with work experience of more than 10 years have the highest percentage of 61% (61 respondents) and 14 respondents (13.9%) have a work period of 0-5 years.

Table 3. Gender Distribution

Gender	N	Percentage
Men	18	17.8%
Woman	83	82.2%
Total	**101**	**100**

Based on Table 3, it is defined that female respondents have the largest number of respondents with 83 respondents (82.2%) compared to male respondents who are only 18 people (17.8%).

Table 4. Kolmogrov Smirnov test

Factor	Sig	p	Conclusion
Social stigma	0.482	0.05	Normal Distribution
Stress coping	0.071	0.05	Normal Distribution

According to the Kolmogrov Smirnov test based on table data 4. Above it is obtained if the sig value in the social stigma and coping stress variables is 0.482 and 0.071, which means that if the sig value is> 0.05, then the data can be said to have a normal distribution or distribution.

Table 5. Distribution of Social Stigma Scoring During Pandemic Period

Interval	Categorization	Frequency	Percentage
35.21 <X	High	14	13.9%
21.32 <X <35.21	Moderate	72	71.3%
X <21.32	Low	15	14.8%
	Total	**101**	**100%**

Based on table 5 above, it is known that nurses perceive that the stigma they receive from society is in the medium category with a percentage of 71.3% (72 respondents) and 14 respondents (13.9%) consider that the stigma they feel is quite high and disturbing. The remaining 15 respondents (14.8%) consider that the stigma they receive is not a bother or is a low category.

Table 6. Distribution of the Stress Coping Scoring Against Stigma

Interval	Categorization	Frequency	Percentage
36.51 <X	High	8	7.9%
28.33 <X <36.51	Moderate	78	77.2%
X <28.33	Low	15	14.9%
	Total	**101**	**100%**

From table 6. it can be concluded that those who have sufficient / moderate coping stress category are 78 respondents (77.2%) and 15 (14.9%). respondents do not have good stress coping in accepting the stigma. Only 8 respondents (7.9%) had high category coping.

Table 7. Correlation Test

Factor	R	p	α	Interpretation
Social stigma with stress coping	0.242	0.015	0.05	Related

The conclusion is based on Table 7. where with a probability value of p of 0.015 <from the value of α (0.05), this means that there is a correlation between social stigma and coping stress for survivors nurses in handling the Covid-19 pandemic In Central Java Province of Indonesia

DISCUSSION

The Covid-19 pandemic is a non-natural disaster which is an event that can threaten and affect all sectors of life, be it socio-economic, security, education and the most influential sector is the health sector.

Because the coronavirus disease (COVID-19) is a very contagious disease, contact tracing is very important to assess the extent to which it has spread to the community. Thus, it is very important for individuals to trust the existing public health system and health care system. The public is willing to accept testing and, if diagnosed with COVD-19, report its whereabouts and activities.

This is what is likely to create and provide stigma related to COVID-19 to individuals which will actually harm public health efforts to be involved in their health system.(Budhwani & Sun, 2020)

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Massive media coverage of infections as well as 'infodemics' i.e. inaccurate information can lead to sharpened misconceptions about the disease and increase the level of stigmatization of people suffering from the disease. (Li et al., 2020).

From the results of statistical tests, it shows that nurses perceive the stigma they receive is still in the moderate / moderate category, which is the highest category, namely 72 respondents (71.3%), and 13.9% (14 respondents) think that the stigma they receive from society is high.

This is in line with a survey conducted by the University of Indonesia in collaboration with the Indonesian Mental Health Nurses Association, it was found that as many as 140 nurses had felt humiliated because of their status as Covid-19 nurses or served in the Covid-19 Management hospital. On the other hand, 135 nurses were asked to leave their places of residence and who were intimidated by the expulsion of 66 nurses and who admitted that their families were affected by their distance from their neighbors, there were 71 nurses.(Indonesia, 2021).

The increase in the number of cases and the existence of stigma from the community about Covid 19 and the lack of social functions of the community will certainly disturb the psychological side of nurses which will actually have an impact on the quality of service to the community. in the hospital. Therefore, the Covid-19 pandemic certainly requires coping with stress from nurses both from the internal and external sides of the Health personnel.

Nurse's stress coping, based on the results of the study, showed that 78 respondents (77.2%) had adequate / moderate coping mechanisms, while only 8 respondents (7.9%) had high / good coping mechanisms in accepting stigma from society. Even 15 respondents (14.9%) have low coping mechanisms in accepting stigma from society.

This is in line with research related to health workers who treat Covid-19 patients with a risk of experiencing psychological disorders as much as 50.4% had signs of stress and 44.6% found signs of anxiety. (Lai et al., 2020)

The effect of social stigma on the coping mechanism of nurses in handling Covid-19 according to statistical tests, it was concluded that the p value was obtained, namely the value of $p = 0.015$, which means that $p < \alpha$ (0.050 or h0 is rejected, which means that there is an effect of stigma with coping stress on nurses survivors who handle Covid. -19 In Central Java Province of Indonesia.

In the analysis of the coefficient of determination, the value is 0.059. This value interprets that there is a contribution of 5.9% of social stigma to coping stress nurses and the rest is caused by other aspects not examined in this research amounting to 94.1%. This shows that the social stigma received by nurses in handling covid-19 was proven to have contributed to the stress coping of nurses by 5.9%.

When compared with previous research conducted by (Rian & Fitriani, 2020)It shows that the stigma of the majority of families receiving the Atma Husada Mahakam samarinda Polyclinic is enough as many as 50 people (59.52%). This study describes the condition of family stigma at the Atma Husada Mahakam Samarinda Psychiatric Hospital which is given to schizophrenic patients, most of whom can accept schizophrenia in the family, while the average family coping mechanism in schizophrenia in the work area of the Polyclinic Hospital Atma Husada

Mahakam samarinda is positive as many as 45 people (54%). This means that there is a significant relationship with the stigma and family koing mechanisms of family members with schizophrenia at the Polyclinic at Atma Husada Mahakam Hospital Samarinda.

CONCLUSION

The conclusion from the research results above is that the stigma received by nurses will affect the coping mechanism of nurses in dealing with Covid-19. The stigma from society will also disturbing the psychological side of nurses which will actually have an impact on the quality of service to the community. In the hospital, difficulty in maintaining physical and spiritual conditions that are at risk of experiencing psychological disorders such as mental stress, anxiety and severe stress and fatigue will be experienced by health workers. The higher the stigma received by nurses, either negative or positive, the higher the stress coping mechanism needed by nurses to overcome the stigma.

The conclusion from the results of the hypothesis test statistically shows thatThere is an influence between the stigma and coping mechanisms of nurses survivors in Central Java Province Of Indonesia with p value 0.015.

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