

# Covid Task Force Performance Reviewed from Perceived Stigma and Knowledge about Covid-19 with Infectious Anxiety as Intervening Variables

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## ABSTRACT

Work related to covid-19 creates a feeling of stigma attached to a person or group receiving stigma receiving discriminatory treatment from the majority group, so their environment rejects it. The method of collecting data by distributing questionnaires to 32 covid-19 task force people who were indicated by perceived stigma and anxiety of contracting who were carrying out tasks at 2 big Malls in Medan. The data from the study were processed using validity, reliability tests and linear regression tests to determine their relationship. The covid task force experiences anxiety of contracting, linear regression analysis is carried out to determine its relationship to performance. Based on the results there is a positive relationship between perceived stigma and the performance of the covid-19 task force, with a correlation coefficient value of  $t = 2.891$  with  $p = 0.0004$  ( $p < 0.01$ ). There is no relationship between anxiety and performance, however with a coefficient value of  $F = 8.763$  with  $p = 0.000$  ( $p < 0.01$ ) means perceived stigma and knowledge of the coronavirus with anxiety as an intervening variable together has a significant influence on performance on the covid-19 task force in the era of the Covid-19 pandemic.

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## INTRODUCTION

The Corona virus Disease 2019 (Covid-19) pandemic in Indonesia has caused obedience for most people, including the Covid Task Force (Satgas). The risk of the Covid Task Force contracting the virus is very high because it is in a crowd every day and interacts with people who may have been exposed to the Covid-19 virus (comorbid). Covid-19 cases updated case data in Indonesia until January 2021 are 4,280,248 positive cases, 144,201 cases have died (source: [covid19.go.id](http://covid19.go.id)).

Based on the consideration that the handling of Covid-19 and the recovery of the national economy should be carried out in a unified strategic, integrated and inseparable policy, President Joko Widodo established regulation Number 82 of 2020 concerning the committee for handling

covid-19 and national economic recovery. In article 1 of the Presidential Regulation, the committee consists of a policy committee, a task force for handling COVID-19 (Satgas) and a task force (Satgas) for the recovery and transformation of the national economy.

The covid-19 task force deserves appreciation because of their enormous job responsibility, which is to ensure that people comply with health protocols to prevent transmission. Work related to covid-19 creates a feeling of stigma attached to a person or group receiving stigma receiving discriminatory treatment from the majority group, their environment rejects it. The covid-19 Task Force [1] must have experienced experiences of avoiding families or the environment due to stigma or fear. Rejection from the environment caused the COVID-19 Task Force to experience negative assessments and perceptions of oneself (perceived stigma). Anxiety is a condition of fear [2], difficulty maintaining physical and mental health conditions for the covid-19 Task Force because it is a subject who is prone to feeling anxiety, stress reactions arise including changes in concentration, quick temper, insomnia, decreased productivity, conflict, and increased exposure and fear of transmitting covid-19. The covid-19 task force is worried about transmitting the infection to family and relatives, this condition causes the appearance of negative emotions.

The anxiety in the Covid-19 Task Force occurred due to high job demands including long working hours, crowded people exposed, decreased social support, lack of knowledge and fear of being a carrier in the family. The requirement for good performance for the covid task force is competence one of which is adequate knowledge [3]. Knowledge of health protocols, prevention, handling and transmission of covid-19 is very important to reduce the risk of exposure to covid-19. However, the emergence of the Omicron variant, low public awareness in complying with health protocols has increased the risk of anxiety and transmission of covid-19 in the covid-19 Task Force. This phenomenon is feared to affect the performance of the Covid-19 Task Force. Based on this phenomenon, this research becomes urgent and has a feasibility study (feasibility). In addition, there has been no similar research on the performance of the Covid Task Force and the anxiety of contracting it before. So the problem studied is how the performance of the Covid-19 Task Force is viewed from perceived stigma with anxiety of contracting it as an intervening variable. The specific purpose of this study is to determine the performance of the Covid-19 Task Force in a state of fear and anxiety of contracting it.

Covid-19 Task Force, The covid-19 officer unit or known as the covid-19 task force was formed because it considered the handling and recovery of the economy that must be carried out in an integrated strategic policy unit. The duties of the Covid-19 Task Force according to Presidential Regulation number 82 of 2020 are: Implement and control the implementation of strategic policies related to handling COVID-19. Resolve the problem of implementing strategic policies related to covid-19 appropriately and appropriately Supervise the implementation of strategic policies related to handling Covid-19. Establish and implement policies and other steps needed in order to accelerate the covid-19 response.

Performance depends on ability, help, capacity, material and non-material incentives, environment and evaluation [4]. Performance is the result of quality and quantity work achieved by employees in carrying out tasks in accordance with the responsibilities given, as well as a combination of abilities, efforts and opportunities assessed from the results of work. Indicators for measuring the performance of individual employees are five indicators, namely [4]: Quality: quality measurement is assessed from the employee's perception of the quality of the work produced and the task ability to the employee's skills and abilities. Quantity: the amount expressed in the number of units, the cycle of completed activities. Timing: the level of activity completed at the beginning of the declared time that is viewed from the point of coordination with the output results as well as maximizing the time available for other activities. Effectiveness: the level of use of organizational resources with the intention of increasing the results in the use of resources. Independence: the level of an employee who can carry out his work functions according to work commitments.

Knowledge is a characteristic of mental wealth that enriches human life, each knowledge has specific characteristics of what (ontology), how (epistemology), and for what (axiology) [5]. According to Ragil [6], the level of knowledge within the cognitive domain consists of 6 levels: Know ( Know), Understanding ( Comprehension ), Application ( Application ), Analysis ( analysis ), Synthesis ( Synthesis ), Evaluation

Perceived Stigma, Stigma is a social construct that includes negatives, beliefs, feelings and behaviors that are configured as prejudices and become negative consequences for the stigmatized person [7]. Perceived stigma is felt by the individual himself, feeling that he is experiencing stigma from society because he is part of a stigmatized group that causes a negative reaction of the individual towards themselves [8]. There are two forms of perceived stigma, namely felt stigma refers to feelings of shame, guilt, anxiety, perception of fear and feelings of giving oneself due to the negative effects of stigmatization felt by individuals [8] for example shame will spread the covid-19 disease to the family [9]. The second form, anticipated stigma, is the feeling of a person who is treated negatively by family, agency and society due to their attributes.

The perceived components of stigma according to Francisco [7] include : Labelling : the giving of stamps, nicknames, labenama that a person gives because of certain differences. Every profession related to medical, since the spread of covid-19 has been identified with people who are infected and easily infect others, dangerous and incurable [10]. Stereotype : beliefs or beliefs regarding the characteristics of the members of a particular group, or the giving of negative attributes to differences and undesirables. The provision of stereotypes cannot be separated from the work of all its equipment that is prone to contact with other people who may be exposed. Separation: the separation carried out between the stigmatizing party and the group receiving the stigma. The relationship of label with negative attributes will be a justification when a person is labeled as believing that he is different so that it becomes an indicator of successful stereotype giving.

Contracted Anxiety, Anxiety is an erratic feeling of fear accompanied by feelings of uncertainty, discomfort, helplessness and isolation [11]. Anxiety will occur due to the anticipation of danger which is a signal for the individual in taking action to face the threat [12]. Symptoms of anxiety can be identified through 3 components, namely: Cognitive component : the way individuals perceive, they think that there is a bad possibility that always lurks in them so as to generate excessive worry, fear and doubt and feel that they are incapable and insecure and feel a threat to them. Physical component/physiological sensation: symptoms that can be felt directly such as shortness of breath, headache, tremors, rapid heartbeat, abdominal pain, and muscle tension. Behavioral component : involves the actions of someone who is overcontrolling.

There are 4 (four) levels of anxiety, namely [4] : Mild anxiety, this anxiety occurs due to disappointments associated with the presence of tension in everyday life. Moderate anxiety, anxiety that focuses on the things that matter, Severe anxiety, greatly affecting the airy perception of the individual. Panic anxiety, anxiety or fear are related to terror, flabbergasted, afraid and prone to experience loss of control, loss of rational thinking, this level of anxiety is not in line with life.

## RESEARCH METHOD

Based on pre-research, it was found that there was a perceived stigma and anxiety of contracting it in some medical workers including the Covid Task Force while on duty. The feasibility study of the product developed is to map the relationship between perceived stigma, knowledge and anxiety of contracting to performance. This research is feasible to be carried out to assist the covid-19 task force in educating dealing with perceived stigma and improving officer performance. This research consists of 2 stages, namely stage 1 mapping perceived stigma and knowledge of the Task Force. Stage 2 is a partial and simultaneous analysis of influences and their relationships. The

variables in this study are perceived stigma, knowledge and anxiety of contracting as intervening variables. The population of this study is the covid task force on duty at Sun Plaza Mall and Centre Point Mall Medan. The sample in this study was the Covid Task Force, which was detected to have the anxiety of contracting it, which was 32 people. Purposive sampling, with the following conditions, carries out the sampling technique:

- a. Inclusion criteria: Covid task force detected anxiety was infected and willing to be a respondent
- b. Exclusion criteria: Covid task force that is not detected anxiety is infected and is not willing to be a respondent.

The research was conducted at Sun Plaza Mall Medan and Centre Point Mall Medan. Data collection was carried out with the dissemination of perceived stigma questionnaires, questionnaires on knowledge of covid-19, anxiety of contracting on a likert scale. The assessment of the Hamilton Rating Scale for Anxiety (HRS-A) anxiety level assessment consisted of 14 groups of symptoms, each of which was detailed again with specific symptoms. Each symptom group is given a number assessment between 0-4.

Value 0 = no symptoms

Value 1 = mild symptoms

Value 2 = moderate symptoms

Value 3 = severe symptoms

Value 4 = severe symptoms once

Each of the 14 symptom groups is added up and from the results of the summation; it can be known that a person's anxiety is drajat, namely:

Total value :

<6 = no anxiety

7 - 14 = mild anxiety

15 - 27 = moderate anxiety

28 - 41 = severe denouement

>41 = severe anxiety onc.

## RESULTS AND DISCUSSIONS

The data collection process was carried out to samples of the COVID-19 task force at Sun Plaza Medan and Centre Point Mall Medan. The results of the performance scales validity test are recorded in the following table 1.

**Table 1.** Validity Test Results of Performance Scale items

NO	ASPECTS	STATEMENT		TOTAL ITEMS
		F	UF	
1	WORKING QUALITIES	1,2,3,4	5,6,7,8	8
2	WORKING QUANTITY	9,10,11,12	13,14,15,16	8
3	TIMELINESS	17,18,19,20	21,22,23,24	8
4	EFFECTIVENESS	25,26,27,28	29,30,31,32	8
5	INDEPENDENCE	33,34,35,36	37,38,39,40	8
	TOTAL ITEMS	20	20	40

The reliability test using the value of Cronbach's Alpha obtained a value of  $t = 0.879$  which means that all items are reliable. Performance reliability test results in table 2.

**Table 2.** Performance Scale Reliability Test

CRONBACH'S ALPHA	N OF ITEM
<b>0,879</b>	40

Based on the results of the discrimination test, the perceived stigma scale originally had 30 items, when the item description test was carried out through two rounds, 22 valid algorithms were obtained. The first round there were 8 fallen aitems. The coefficient of discrimination of the item moves from -0. 168 to 0.629. The second round, there are all items declared valid. The coefficient of discrimination of the item moves from 0.353 to 0.719. The following are the results of the perceived stigma scale items discrimination test can be seen in table 3.

**Table 3.** Perceived Stigma Scale Item Discrimination Test Results

Round Analysis	Total Items	α Cronbach	Fall Item Number	Information
I	30	0,692	4,5,10,11,16,17,24,25	Corrected Item Total Correlation moves from -0.168 to 0.629
II	22	0,828	-	Corrected Item Total Correlation moves from 0.353 to 0.719

The reliability test result on the perceived stigma variable using Cronbach's alpha is 0.828, which means all items are reliable. The results are listed in table 4.

**Table 4.** Perceived Stigma Scale Reliability Test

CRONBACH'S ALPHA	N OF ITEM
0,828	22

Based on the results of the item discrimination test, the knowledge scale originally had 30 items, when the item description test was carried out through two rounds, 24 valid items were obtained. The first round there were 6 fallen aitems. The coefficient of discrimination of the item moves from -0. 179 to 0. 579. The second round, there are all items declared valid. The coefficient of discrimination of the item moves from 0.391 to 0.753. The following results of the knowledge scale items discrimination test can be seen in table 5

**Table 5.** Knowledge Scale Item Discrimination Test Results

Round Analysis	Total Items	α Cronbach	Fallen Item Number	Information
I	30	0,579	7,8,9,14,15,16	Corrected Item Total Correlation moves from -0.179 to 0.579
II	24	0,879	-	Corrected Item Total Correlation moves from 0.391 to 0.879

The reliability test result on the knowledge variable using cronbach's alpha is 0.879, which means all items are reliable. The results are in table 6

**Table 6.** Knowledge Scale Reliability Test

CRONBACH'S ALPHA	N OF ITEM
0,879	24

Based on the results of the item discrimination test, the anxiety scale originally had 30 items, when the item description test was carried out through two rounds, 28 valid items were obtained. The first round had 2 fallen aitems. The coefficient of discrimination of the item moves from -0. 135 to 0. 481. The second round, there are all items declared valid. The coefficient of discrimination of the item moves from 0. 502 to 0. 891. The following results of the anxiety scale items discrimination test can be seen in table 7.

**Table 7.** Anxiety Scale Item Discrimination Test Results

Round Analysis	Total Items	$\alpha$ Cronbach	Fallen Item Number	Information
I	30	0,481	26,27	Corrected Item Total Correlation moves from -0.135 to 0.481
II	28	0,891	-	Corrected Item Total Correlation moves from 0.502 to 0.891

The reliability test result on the anxiety variable using Cronbach's alpha was 0.891, which means all items are reliable. The results are in table 8.

**Table 8.** Anxiety Scale Reliability Test

CRONBACH'S ALPHA	N OF ITEM
0,891	28

The results of data analysis in this study using multiple linear regression analysis with the help of SPSS ver.22.0 showed the following results.

#### Partial Correlation

The results of data analysis on the perceived stigma variable obtained a coefficient of  $t = 3.679$  at  $p = 0.001$  ( $p < 0.01$ ). These results show that perceived stigma has a very significant relationship with the performance of the Covid-19 task force. Hypotheses that state a positive relationship between perceived stigma and performance can be accepted or proven. The higher the perceived stigma, the higher the performance of the Covid-19 task force. The results of data analysis on knowledge, coefficient  $t = 2.891$  at  $p = 0.001$  ( $p < 0.01$ ). These results show that knowledge has a very significant relationship with performance on the Covid-19 task force. Hypotheses that state the existence of a positive relationship between knowledge and performance are acceptable or proven. The higher the knowledge, the higher the performance of the Covid-19 task force. Meanwhile, the results of data analysis on anxiety, a coefficient of  $t = -1.976$  at  $p = 0.08$  ( $p > 0.01$ ). The results showed that anxiety had an insignificant relationship with performance on the Covid-19 task force. Hypothesis that states the existence of a negative relationship between anxiety and performance. The higher the anxiety, the lower the performance of the Covid-19 task force.

#### Simultaneous Correlation

The results of data analysis obtained the price coefficient  $F = 8.763$  at  $p = 0.000$  ( $p < 0.05$ ). These results mean that perceived stigma, knowledge of Covid-19, and anxiety together can have a very significant influence on the performance of the Covid-19 task force in the era of the Covid-19 pandemic. The hypothesis that states the relationship between perceived stigma, knowledge about Covid-19, and anxiety in the performance of the Covid-19 task force in the era of the Covid-19 pandemic is proven.

#### Regressi Line Equation

Based on the results of data analysis using SPSS version 22.0 obtained the regression line equation  $Y = \beta_0 + \beta_1 X_1 + \beta_2 X_2 + \beta_3 X_3$  at a price of  $\beta_0 = 69.731$ ,  $\beta_1 = 0.256$ ,  $\beta_2 = 0.471$  and  $\beta_3 = -0.461$ . The results of the regression line equation show the meaning that, if there are no perceived stigma variables, knowledge about Covid-19 and anxiety, the performance on the Covid-19 Task Force in the era of the Covid-19 pandemic is 69,731. The value of the regression coefficient is 0.256 indicates that each addition of one perceived stigma score will increase the performance by 0.256. Regression coefficient 0.471 indicates that each addition of one knowledge score about corona virus will

increase performance by 0.471, Regression coefficient -0.461 indicates that each addition of one anxiety score will decrease performance by -0.461.

### R2 and the effective contribution of each variable

Based on the results of data analysis using SPSS version 22.0, information on the effective contribution of perceived stigma variables, knowledge about Covid-19, and anxiety on the performance of the covid-19 task force was obtained by  $R^2 = 0.179$  (17.9%).

### Test Path Analysis

Hypothesis testing is carried out by path analysis. The description of the results of data processing is explained as follows:

- a. Test the Perceived Stigma hypothesis and Knowledge about Covid-19 with anxiety.  
The coefficient of the model I path refers to the regression output of model I in the Coefficients table section, it can be seen that the significance value of the two variables, namely the perceived stigma variable of 0.006 and the knowledge variable about the corona virus of 0.01 is smaller than 0.05. This result concludes that in model I regression, namely the perceived stigma variable and the knowledge variable about the corona virus have a significant effect on the anxiety variable. The value of  $R^2$  contained in the summary model table is 0.098, this shows that the contribution or contribution of the influence of the perceived stigma variable and the variable of knowledge about the corona virus on the anxiety variable was 9.8% while the remaining 90.2% was a contribution from other variables that were not included in the study. Meanwhile, the value of  $E_1$  is 0.891.
- b. The hypothesis test  
The hypothesis test of the Performance of the Covid-19 Task Force was reviewed from Perceived Stigma and Knowledge about Corona Virus with Anxiety as an intervening variable. The coefficient of the model II path, based on the regression output of model II in the Coefficients table section, it can be seen that the significance value of the three variables, namely in the perceived stigma variable of 0.000, the knowledge variable about the corona virus of 0.002 and in the anxiety variable of 0.042 is less than 0.05. These results conclude that model II regression, namely perceived stigma, knowledge of the corona virus and anxiety have a significant effect on the performance of the covid-19 task force. The magnitude of the value of  $R^2$  or R square contained in the summary model table is 0.191, this indicates that the contribution or contribution of the influence of  $X_1$ ,  $X_2$ , and  $X_3$  against  $Y$  were 19.1% while the remaining 80.9% were contributions from other variables that were not studied. Meanwhile, for the value of  $e_2$  is 0,7695 (Figure 1).

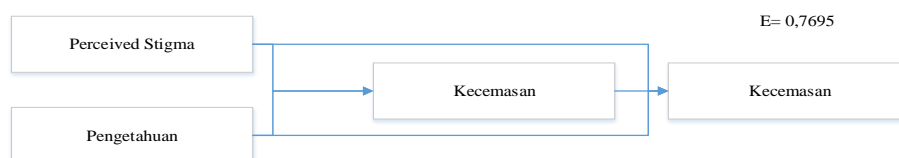


Figure 1. Hypothesis Analysis

Based on the research results that have been described previously, this study shows a positive and very significant relationship between perceived stigma and performance on the COVID-19 task force in the Covid-19 pandemic era. The results of this study also show that there is a positive and very significant relationship between knowledge and performance in the covid-18 task force of the covid-19 pandemic era. However, on the anxiety variable, the results showed that there was no positive relationship with the performance of the COVID-19 task force of the COVID-19 pandemic era. The perceived stigma variable and knowledge about Covid-19 together can improve the performance of the COVID-19 task force of the Covid-19 pandemic era and only

the anxiety variable can reduce the performance of the Covid-19 task force during the Covid-19 pandemic era [14] [15].

## CONCLUSION

Based on the results, a correlation coefficient value of  $t = 3.679$  with  $p = 0.001$  ( $p < 0.01$ ) means that there is a positive relationship between perceived stigma and the performance of the Covid-19 task force, knowledge about the coronavirus with performance. However, there is no relationship (correlation coefficient value of  $t = -1.976$  with  $p = 0.09$  ( $p < 0.01$ )) between anxiety and performance. It can be concluded that perceived stigma and knowledge about the coronavirus with anxiety as an intervening variable together have a significant influence on the performance of the COVID-19 task force in the pandemic era.

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