



PARENTAL PERCEPTION AND ANXIETY FACING REOPENING SCHOOL IN INDONESIA DURING THE PANDEMIC COVID-19

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Article history:	Abstract:
<p>Received: 1st October 2021 Accepted: 1st November 2021 Published: 4th December 2021</p>	<p>As the pandemic slows, Indonesian Government has issued a policy about reopening school from last August 2021. A decision that has a big impact on education. A meaningful decision after two years of struggling with the COVID-19 pandemic. Despite, there's still a big question and doubt "is it safe to go back to school while the pandemic exists? Our Research focused on exploring the impact of facing the re-opening school to parental perception and anxiety. We use Parental Perception Survey (PPS) for identified Parental perception and Parental Anxiety Assessment (PAA) to measure Parental anxieties. Our respondents are 326 parents. Results of this study describe reopening school during pandemic covid 19 has impact perception and anxiety at parents. Conclusions will be able to consider the continuous policy and take solutions for any problems occurring in reopening school in Indonesia. Impact of research</p>

Keywords: Parental anxiety, parental perceptions, reopening school in pandemics

INTRODUCTION

In August 2021, The Indonesian Ministry of Education and Culture, issued a policy to reopen schools in Indonesia. This policy related with the pandemic situation in Indonesia that slopes, well-controlled and decreasing number of people infected by covid 19. According to data provided by Indonesian Task Force of Covid 19, on 23 October 2021, there's more than 633 new cases in Indonesia decreasing from 56,757 new cases, equal to 97%, compared to data on 15 July 2021 (covid19.go.id, 2021). However, the pandemic doesn't end yet. According to the Indonesian Paediatrician Association (IDAI), the fatality rate is 3-5% among children covid patients (Hutasoit, 2021). This fact might be impact parents' perception about guard and protect children when they go back to school, also surge parent's anxiety when un-handled.

Previous researchers describe parents are one of the most impactful, besides children as students, teachers, and school staff. For almost two years they handled and accompanied children learning from home. Social background seems to play a bigger role for support (Tomasik, 2020). For parents who have an adequate level of education and good socioeconomic conditions, online learning seen like disadvantages. High costs, lack of gadgets and limited time to accompany children to study because they must work are some of the biggest obstacles. All these problems and inconvenience makes parents overwhelmed and wants their child back to school.

Then, when pandemic slopes, and schools are reopened, we interest on parent's perception and anxiety. Are parents less anxious after school reopen? Our research purpose to describe parental perception of reopening school during pandemic and show the impact to parental anxiety. Hypothesis of this research is Parental perception about COVID19, pandemic, school readiness, child awareness and environment safety will impact parent's anxiety. Positive perception correlates with lower anxiety and negative perception correlates with higher anxiety in parents. Hypothesis of this research describe with this chart:

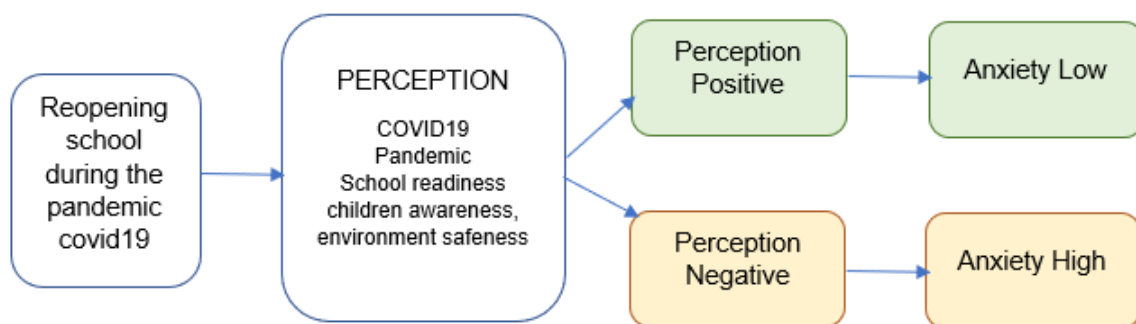


Figure 1. Hypothesis of Research

The uncertainty situation is threatening and stressful prevents a person’s perception of control and leads to maladaptive psychological reactions such as anxiety (Özmete, 2020). Pandemic related with crisis, that defined as a period of psychological imbalance caused a threat or stressful event which cannot be solved by common coping strategies. Crisis might be impact and damage for people within, also a line with negative reactions such as confusion, denial, anger, fear, anxiety, withdrawal (Mirabito, 2017).

Parents are importance key person to taking responsibly of child’s decision. Parents absorb and filter information as parental perception then forward to their child. Effective and trusted source kept important roles to build perception. Rapid information disclosure is a top priority for disease control and prevention (Wang, 2020). A study in Pandemic flu in Australia mentioned that a user-centre orientation is vital for pandemic communication. Trusted sources maintain to share tailored information provision and suit to provide any information are needed (king, 2018).

Related to reopen schools in pandemic COVID19 nowadays, parents are reasonably concerned about whether any large-scale reopening plan can be safe for students, teachers, school staff and household members. Contagion is a particular concern in school (Levinson, 2020) where a crowded situation might be. On the other hand, Children miss out on essential academic and social–emotional learning, formative relationships with peers and adults, opportunities for play, and other developmental necessities when they are kept at home.

A user- centred orientation is vital for pandemic communications in- In a study in the Netherlands on 350,000 school students, comparing results of the national exams before and current the pandemic, results reveal learning loss of about 3 percentile points. The effect is equivalent to one-fifth of a school year the same period that schools remained closed. The biggest loss learning impact is about 60% experienced by students from less-educated homes. (Engzell, 2020). In Pakistan, a study found that there was a decrease in Learning Adjusted Years of Schooling (LAYS) with worsening effect for girls than boys (Khan, 2021).

Meanwhile, a study in Canada reported during April and June 2020, most children increased television watching (58.8%), computing or gaming (56.4%), and use of screen-based devices (75.9%). Also reported approximately one-half of children decreased playing at the park (52.7%) and in public spaces (53.7%). Children’s physical activity at home increased (48.8%). Approximately one-third of parents reported being extremely or very anxious about COVID-19 (McCormack, 2020).

According to Spielberg, Anxiety is an emotional state characterized by feelings of tension and worry, increases in blood pressure, and the anticipation of future threat or danger conceptualized as either state or trait anxiety (McCleskey, 2021). Studies have demonstrated that abnormal levels of anxiety were experienced during the COVID19 outbreak in approximately two-thirds of Chinese adults (Huang, 2020). The Canadian Perspectives Survey Series examined family stress and perceived risk for domestic violence due to the COVID19 pandemic (Calvano, 2021).

All of problems seems complicated and dilemma for parents. While parents seem overwhelmed and worried about the loss of schooling from home, But still not sure on safety of reopening schools. Parents must have confidence that good hygiene practices are fully implemented. Schools must assure parents of the hygiene measures that and reiterating the social distancing guidance (Smith, 2020). The emergence of new Covid cases in schools increased, so some schools were temporarily closed again (Nugraheny, 2021). Parents reported high media usage and reliance throughout the pandemic, due to the rapidly changing situation. Parents were very concerned about the virulence of the virus and its possible adverse impact on their family (King, 2018).

Understanding what the key issues are that determine a parent’s willingness to send their children back to school and ensuring that communications address these issues should help parents feel more comfortable with school reopening (Woodland, 2020). Meanwhile, when parents feel uncomfortable and have negative perceptions, it will increase parental anxiety and stress.

METHODS

Data Instruments

The research methodology is a quantitative method. We use two instruments for this research:

1. PPS (Parental Perception Survey)

The survey consists of 23 item statements and answered using Likert scales. Respondents respond to the statements with five chosen answers (strongly agree / agree / neutral / disagree / strongly disagree), which are relevant and appropriate to them. Possible score is 23 to 115. Example statements include "covid 19 is infectious and easily transmitted", "the pandemic still going on", "opening school during the pandemic it's appropriate." The Reliability scores of PPS is 0,873.

Table 1. Construct of PPS

Section	COVID 19	Pandemic	School Readiness	Children Awareness	Environment safety
Total Item = 23	5	4	5	5	4

2. PAA (Parental Anxiety Assessment)

The Assessment consists of 34 item statements. Respondents respond to the statements with four chosen answers (always / often / rare / never), which are relevant and appropriate to them. Possible score is 34 to 136. Example statements include "I thought who's watching my child at school?", "I feel worried when my child is at school", "I sweat when my child is at school", "I spray disinfectant on my child's school uniform and shoes." The Reliability scores of PPA is 0,911.

Table 2. Construct of PAA

Aspects	Cognitive	Affective	Physiology	Behavior
Total Item	8	8	8	10

Data Collections

Data collection was carried out in October 2021. This study uses a snowball sampling technique in recruiting respondents. First, we identified schools with different levels of education to ensure they met our criteria. Of the ten schools we identified, nine were eligible. Only one school did not meet the requirements, because the school was in the process of reopening schools during the pandemic. Then contact and apply for permits to schools. Only four schools answered and were willing to be involved in the research. Meanwhile, two schools stated that they were not willing to be involved and three schools did not respond.

Second stage, we distributed the instruments to schools involved, through the principal. All school levels are represented: Kindergarten, Elementary School, Junior High School, and Higher school. Instrument of research is an online form. We do not provide a manual form, to avoid transmission and spread of virus. Our concern is the instrument reaches right respondent. Then, the principal sends instrument to the homeroom teacher, where the homeroom teacher will distribute it to the homeroom group. There are about 1430 parents from four different schools. However, only 335 parents responded. Then, only 326 parents (N=326) were willing to be involved (as stated in the informed consent) and answered completely all the research instruments.

Respondents

There are 326 respondents in this research. Criteria of respondents for this study were recruited from database of parents who have children with range age 4 to 18 years, attend formal school in Indonesia (not home-schooling programs), live in area suffered by covid 19 and get priority vaccinated by Indonesian government, and also areas that are included in the category of reopening school during the pandemic, refers to Joint decision Minister of Education and Culture, Minister of Religion, Minister of Health, and Minister of International Affairs Republic of Indonesia.

Our respondents are cross gender, various of domicile, age, having number of children, level of education, profession / job. We also asked are they have been vaccinated to look up awareness, responsibility, and participation of parents in government programs to overcome the pandemic. In our opinion, this is very important, because it is an indication of readiness to enter a new transition when the pandemic subsides but is not yet fully over.

We also asked whether parents had allowed their children to return to school as an initial sign of anxiety. We believe that parents who have children who have not been allowed to return to school have a high level of anxiety, consciously or unconsciously. There were no preliminary clinical interventions before the survey and assessment. We're trying to avoid every step that might increase anxiety or unpleasant feelings at respondents.

There are 335 respondents involved in the study. 326 respondents met the requirements, while 9 respondents did not meet the requirements because they did not answer completely (P182, P234) and were not willing to become respondents (P101, P118, P192, P228, P241, P311, P321) stated in the informed consent.

Table 3. Demographic of Respondents

Gender	Male = 47 (14,40%) Female = 279 (85,60%)
Domicile	Urban = 135 (41,41%) Sub Urban = 186 (57,06%) Rural = 5 (1,53%)
Age	Under 20 = 4 (1,22%) 20-29 = 7 (2,15%) 30-39 = 155 (47,55%) 40-49 = 145 (44,48%) 50-59 = 15 (4,60%)
Number of Children	1 Child = 89 (27,30%) 2 Childs = 136 (41,72%) 3 Childs = 81 (24,85%) 4 Childs = 13 (3,99%) 5 Childs = 5 (1,53%) Other = 2 (0,61%)
Level of education	Not completed in Primary School = 2 (0,61%) Primary School = 3 (0,93%) Junior School = 10 (3,07%) High School = 60 (18,40%) Diploma = 51 (15,64%) Undergraduate = 166 (50,92%) Postgraduate = 34 (10,43%)
Occupation	Civil servants = 39 (11,96%) Private = 61 (20,56%) Professional = 10 (3,07%) Lectures, Teachers = 18 (5,52%) Businessman = 11 (3,37%) Seller = 16 (4,91%) Housewife = 161 (49,39%) Unemployed = 4 (1,22%)
Vaccination Program	Have been vaccinated = 289 (88,66%) Will be vaccinated = 33 (10,12%) Not vaccinated = 4 (1,22%)
Has your child been allowed to go back to school?	Yes = 279 (85,58%) No = 47 (14,42%)

Data Analysis

To verify the instruments, we tested using Cronbach’s Alpha while the validity test of indicator was performed using confirmatory factor analysis. To analyse correlation between parental perception and anxiety, we use Pearson Correlation, two tail with 0.01 of significancy level. After collect all submission data, then we verified for completeness. The descriptive data is processed into raw scores, then added up to become a complete score. Each respondent has two complete scores, namely the complete PPS score and the full PAA score. This data is then correlated, the PPS score as the X variable and the PAA score as the Y variable. In total there are 326 PPS scores and 326 PAA scores.

RESULTS and DISCUSSIONS

Demographic data showed that the respondents of this study were women (about 85.5%), while the rest were men (14.5%). This is in accordance with the characteristics of parents in Indonesia, that mothers handle school activities and routines, while fathers handle school fees. Based on the division of roles, the wife serves as an educator and caretaker of the children, meanwhile, the husband also contributes regularly and actively through ideas and

attention, because generally he is responsible as the breadwinner of the family. The husband's income will be used to finance the needs of his family (Puspitawati, 2013).

Most respondents (98.5%) live in urban and sub urban. The age of the respondents is between 30-39 years and 40-49 years (almost 92%), a small proportion are under 20 years old, 20-29 years old, and 50-59 years old. There were no respondents over the age of 59 years. Demographic age describes those respondents are in productive age and estimated the age of their children. Respondents with 2 children were the largest study respondents (41.7%), followed by respondents with 1 child (27.3%), with 3 children (24.8%), with 4 children (3.99%), with 5 children (1.5%) and 2 respondents (0.61%) had more than 5 children.

The education level of the respondents varied. Most respondents at the education level were undergraduate (50.9%), followed by high school graduates (18.4%), diploma (15.6%), postgraduate (10.4%), junior school (3.07%), Primary school (0.9%) and 2 respondents did not finish primary school (0.6%). Meanwhile, occupations of the respondents varied greatly. Most are housewives (49.39%), private sectors (20.56%), civil servants (11.96%), Lectures and teachers (5.52%), Sellers (4.91%), Businessman (3.37%), professional (3.07%) and employed (1.22%). There are no respondents from bureaucrats and labour. Because most respondents are women, job descriptions are related, such as housewives being the most preferred.

A study found that a vaccination program will be successful if people assess the threat level of a pandemic outbreak that occurs, have a perception that vaccines are an effective coping strategy, there is social pressure, and accurate vaccine information from reliable sources (Bish, 2011). Vaccine hesitancy is major threats also the biggest challenge that directly impact global health (Dhama, 2021). Data shows that 88.66% of the respondents had been vaccinated. 10.12% of respondents have not been vaccinated and will soon be vaccinated, the remaining 1.22% of respondents do not want to be vaccinated. This data is in accordance with data released by the DKI Jakarta Provincial Government, on October 31, 2021, that DKI Jakarta residents have received 81% of the first dose of vaccine and 65% of the second vaccine (JSCLab, 2021).

Most of the respondents had allowed their children to return to school (85.58%). Meanwhile, 14.42% of respondents have not allowed their children to return to school and continue to study online. This data is consistent with previous research that most parents want their children to return to school, some are still hesitant and only a few parents have not allowed their children to return to school. The reasons for agreeing are that learning is more effective, online learning is not optimal, children are bored, parents are confused, schools are in accordance with health protocols, now is the time for adaptation, children already miss school and put their trust in Allah as God (Sabiq, 2020).

Result of Parental Perception Survey (PPS)

Table 4. Result of PPS

Score PPS	Category	Number of Respondents	Percentage
91 - 115	Strongly negative perception	1	0,31%
65 - 90	Negative perception	114	34,97%
51 - 64	Neutral	191	58,59%
25 - 50	Positive Perception	20	6,13%
1 - 24	Strongly Positive Perception	0	0

Highest score is 110 and the lowest score is 40. Average score 82,79 (negative perception).

Most respondents have neutral perception toward reopening school during the pandemic (58,59%). Meanwhile 34,97% respondents have negative perception and 1 respondent (0,31%) has strongly negative perception. There are 6,13% respondents who have positive perception. So, even most respondent's scores are in category neutral perceptions, but in average score is in category negative perception. This can be explained that the neutral perception score obtained is close to the lower limit of the negative perception score. In addition, the respondents' negative perception scores were around the upper limit of the category.

Spielberger et al. (1970) argue that an increase in state anxiety is expected after a threatening experience perception. Negative life events with potential threats such as pandemic diseases often cause of anxiety disorders (Özmete, 2020). We think that the neutral perception is caused by parents still being worried about the spread of COVID-19 and the unfinished pandemic. But the government's success in handling the pandemic, enforcing health protocols in schools, as well as prevention efforts by parents such as the use of masks, face shields, sanitizers and disinfectants are considered an advantage.

We also look further into the scores of each part of the overall score. Perceptions of what things have the highest contribution, and perceptions of what things are the lowest. The following shows the score contribution for each section. In the PPS instrument, we asked parents' perceptions of 5 things that are: the COVID19 (5 items), the

pandemic (4 items), school readiness (5 items), child awareness (4 items) and environment safety (5 items). The result showed that COVID19 contributed the highest score (27,7%), followed by environment safeness (20,3%), the pandemic (19,3%) and school readiness (16,9%) and child awareness (15,8%). Even child awareness has the lowest score, but it only consists of 4 items. The score might be higher if it has a 5-item statement.

COVID19 is the most serious scourge and threat in parents' perceptions of the planned reopening of schools. Then respondents perceived environmental safety as a concern that causes negative perceptions. Some respondents think that the environment is not safe and there are still many people who do not comply with the rules of health protocols.

The Pandemic, even not the highest score, it seems the pandemic is considered worrying by some respondents. Moreover, it's only represented by 4 statements, while perception of COVID-19 and environment safety, consists of 5 statements. Perceptions of school readiness and children's awareness contributed the least but should not be underestimated. We estimate that the school's efforts to prepare for school reopening run well and increases positive perceptions. In addition, the pandemic, which has lasted for more than two years, has developed children's awareness and knowledge about the dangers of COVID19, compared to children's awareness in the beginning of pandemic.

Parental Perception about

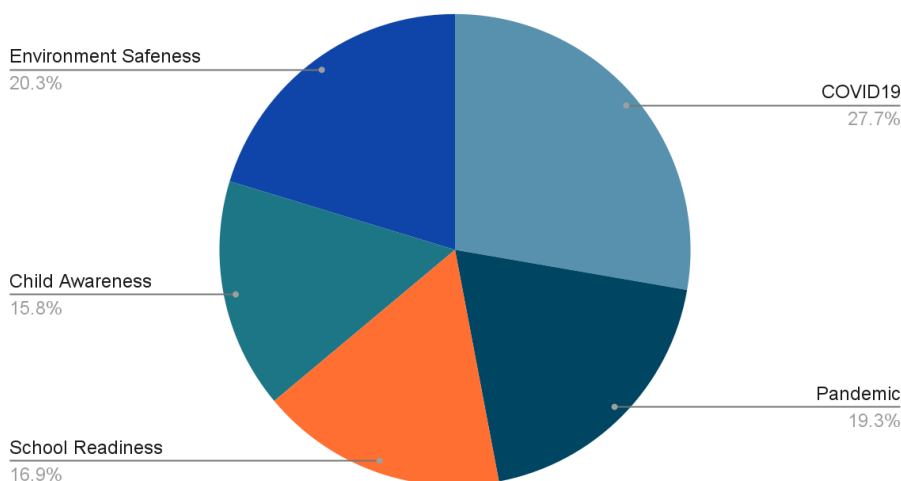


Figure 2. Score Contribution of Perception about something

Result of Parental Anxiety Assessment (PAA)

Table 5. Result of PAA

Score PPS	Category	Number of Respondents	Percentage
114 - 144	Very High Anxiety	37	11,35%
83 - 113	High Anxiety	187	57,37%
62 - 82	Moderate	91	27,91%
31 - 61	Low Anxiety	11	3,37%
1 - 30	Very Low Anxiety	0	0

Highest score is 138 and lowest score is 47. The average score is 91,22 (High anxiety).

Most respondents have high anxiety (57,37%) and very high anxiety (11,35%). There are 27,91% respondents with moderate levels of anxiety. Only 3,37% respondents have low anxiety and none of respondents has very low anxiety. This result is quite surprising. Because when this research was conducted, the pandemic conditions were under control and dropped very significantly (Nugraheny, 2021). Parents are the most worried and anxious about safety and security of their children. It is a natural part of reasonability of parental roles.

We look further into the contribution of each aspect of anxiety to the overall anxiety score. In the PAA instrument, there are 4 factors that contribute to parental anxiety: cognitive, affective, physiological, and behavioural. Each factor is represented by 8 statement items, only behaviour is represented by 10 statement items. Based on the contribution of each factor to the overall score, behaviour contributed the most (39.3%), followed by cognitive (26.5%), while almost balanced, affective (17.2%) and physiological (17%).

In this study, the physiological and affective aspects were not biggest contributors to whole scores. The biggest contribution is from the behavioural and cognitive aspects. It seems that parents' anxiety is more reflected in their behaviour, such as making sure children use masks and complete personal protective equipment, being responsible for picking up children to school, communicating actively with homeroom teachers, ensuring that school uniforms, shoes and school equipment used by children are sprayed with disinfectant, and do not allow children to leave the house other than going to school.

Parents are known to often think about the safety of their children at school. Think about whether the children are safe in school, how are the interactions between students and students, students, and teachers and so on. Parents also think there are other children who are currently sick and contracting the disease. The COVID-19 pandemic raises concerns and fears of losing loved ones, as parents worry about the safety and security of their children. According to Boals (2020), people who have a lot of worries, concerns about their own safety and concerns about the safety of those around them, are prone to experiencing anxiety and mind wandering.

Aspects of Anxiety

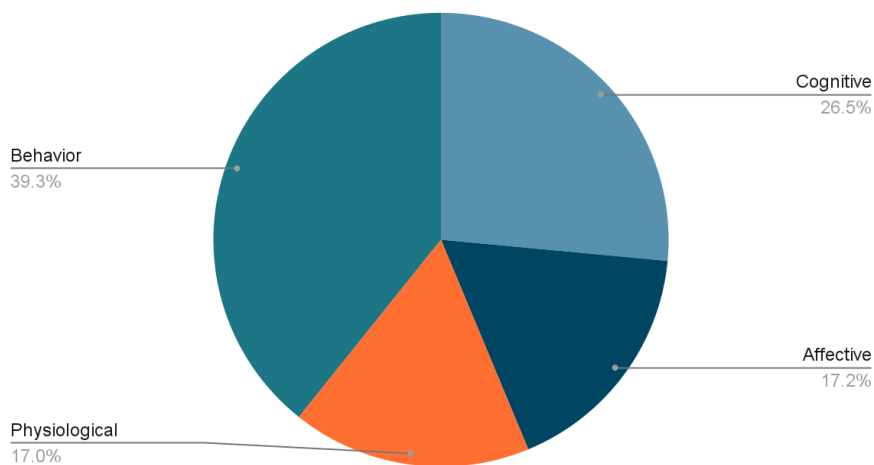


Figure 3. Score Contribution of Anxiety Aspects

Result of Correlation between Parental Perception and Anxiety

The correlation coefficient between parental perception and anxiety in this study is -0.412. Means, there is a negative correlation between parental perception and parental anxiety. Positive parental perception related to lower parental anxiety score, and negative parental perception related to higher parental anxiety. The result is in suit with research hypothesis. In other words, the hypothesis is accepted. However, score correlation is indicate moderate correlation, means parental perception only contributes slightly to parental anxiety. There are still other factors that cause parental anxiety.

Parenting during the COVID-19 pandemic is highly challenging, with parents having to meet various demands simultaneously (Calvano, 2021). COVID-19 may be producing a stressful environment for parents in several ways: Parents may worry about the economic and physical health of their family; they may be concerned about their children's social isolation from peers and teachers; they may be preoccupied with the management, duration, and outcomes of home-schooling (Fontanesi, 2020). Many parents are attempting to work remotely from home while caring for children. Parents with school-going children also face new demands of home-based schooling (Chung, 2020).

According to data by Pew research centre 2020a, In America, for parents who do continue to work, over one-third (35%) report that they are struggling to handle childcare responsibilities. Many must deal with a new balance of full-time parenting and home-schooling while simultaneously working from home. For all families, these factors are likely to contribute to high levels of stress in the home environment (Griffith, 2020). The pandemic has confronted many parents with tough choices. Parents have had to deal with the stress of going to work and housework (Tolan, 2020). Based on previous studies, parents show a tendency to be anxious and stressed in dealing with work, household tasks as well as assisting children from school at home. Therefore, the government's policy in reopening schools during the pandemic is highly expected.

Increased anxiety is not only the domination of parents, but also felt by children as students at school. Constantly at home without opportunities for outdoor activities, reduced interaction with peers, boredom, massive misinformation and hoaxes, stressful situations at home due to deteriorating financial conditions, and so on become stressors for children. Students complain about situations that burden them in learning. Lack of social support makes students experience emotional disturbances. (Irawan, 2020).

The sloping pandemic condition correlates with the increasing number of schools implementing offline learning, so that the portion of online learning decreases. However, given that the pandemic is not yet fully over, schools remain vigilant about conducting limited offline learning. Parents are not entirely sure about allowing their children to return to school. The spread of COVID19 is still there, even in neighbouring countries such as Singapore, still struggling to cope with the emergence of new COVID patients. In Indonesia, specifically in the province of West Java, schools had to be closed again due to the emergence of new COVID cases in schools, where there were students, teachers and school staff infected with COVID19. So far there have been 1,296 schools that reported Covid-19 clusters after the reopening of schools for limited offline schooling, a total of 11,615 students positive for COVID-19 (Wibisono, 2021).

Schools must be carefully prepared so that health protocols in preventing and spreading COVID can be fully implemented. Schools' social and physical infrastructure will also need to be modified. Spaces such as halls, fields and parks that are used to gather crowds and do not keep distance must be reduced. Spaces and furniture will need to be retrofitted for younger children; kindergartners will need easy access to appropriate bathroom facilities; and schedules may need to be redesigned to accommodate special-education providers and specialty teachers so they can access children and classrooms at appropriate times (Levinson, 2020). All these things are not easy to do.

Supervision of interactions between students, students and teachers, students, and school staff, etc. must be clear and full time. During recess, do students have to stay in class and sit in their seats? Or students can leave the class? How to arrange for students to eat lunch brought from home? Or eat in the school canteen? Interaction is one of the main problems of the spread of the COVID19 virus. Limiting interactions is in line with the government's quarantine principle. Quarantine is the separation and restriction of movement of people who have potentially been exposed to a contagious disease to ascertain if they become unwell, so reducing the risk of them infecting others (Brooks, 2020).

In accordance with the results of the PPS survey in research, environmental safety is an issue and the main concern of parents in making decisions. Especially for working parents, the responsibility of picking up children from school is a hassle. When parents are busy with work, so that children must use public transportation, security and safety really become a big concern. People's awareness of the school environment is also very important. Shops, restaurants, and fuel stations, which children may visit on their way to school, can comply with health protocols.

Parents also spent extra costs to buy masks, sanitizers, and face shields (in some schools it is mandatory). For low-income parents, this is certainly a problem and burdensome. The depression, anxiety, and stress of parents with medium or high family economic level were significantly lower than those with low family economic level (Wu, 2020). The International Labour Organization (ILO) estimated that the COVID-19 pandemic could lead to 24.7 million jobs lost world-wide—a worst-case scenario for global unemployment (Chung, 2020). Lock down or enforced closure of all but essential services has left many at risk of unemployment and facing economic uncertainty. Many have lost their primary source of income, which raises the unwelcome prospect of inability to afford basic costs of living including housing and food (Hagger, 2019). Another study mentioned that anxiety is higher in rural communities compared to urban communities during the COVID-19 outbreak. They live in areas that have limited internet network access, difficulty in earning income, and the high cost of necessities due to limited road access (Shigemura, 2020).

CONCLUSIONS

The shift to the post pandemic school environment will cause dramatic changes to increase the anxiety problems that some parents and their children might experience when school reopens after the COVID-19 lockdown (Pelaez, 2020). Our research found a correlation between parental perception and increasing parental anxiety. However, our research has limitations. The correlation between parental perception and anxiety is only moderate. This means that there are many other causes that increase parental anxiety. We strongly support research into other factors that contribute to increased anxiety.

This dilemma faced by parents should receive attention and handling from the Government and related stakeholders. The policy of reopening schools during the pandemic must meet the health protocol requirements, to avoid the emergence of new cases originating from school clusters. Modification of the school environment, supervision of interaction and direct contact between students, teachers and people in the school environment must be full time, as well as efforts to build awareness of people around the school into an enforced decision.

Intensive attention is given to families who have been severely affected by the COVID pandemic. Parents who have lost their jobs, lost their income and those who have lost loved ones to COVID-19 are getting greater support. Without real support, parents and children in these families can be exposed to stress, anxiety, and serious mental health disorders.

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REFERENCES

1. Bish, A., Yardley, L., Nicoll, A., & Michie, S. (2011). Factors associated with uptake of vaccination against pandemic influenza: A systematic review. *Vaccine*, 29(38), 6472–6484. <https://doi.org/https://doi.org/10.1016/j.vaccine.2011.06.107>
2. Boals, A., & Banks, J. B. (2020). Stress and cognitive functioning during a pandemic: Thoughts from stress researchers. In *Psychological Trauma: Theory, Research, Practice, and Policy* (Vol. 12, Issue S1, pp. S255–S257). Educational Publishing Foundation. <https://doi.org/10.1037/tra0000716>
3. Brooks, S. K., Webster, R. K., Smith, L. E., Woodland, L., Wessely, S., Greenberg, N., & Rubin, G. J. (2020). The psychological impact of quarantine and how to reduce it: rapid review of the evidence. *The Lancet*, 395(10227), 912–920. [https://doi.org/https://doi.org/10.1016/S0140-6736\(20\)30460-8](https://doi.org/https://doi.org/10.1016/S0140-6736(20)30460-8)
4. Calvano, C., Engelke, L., Di Bella, J., Kindermann, J., Renneberg, B., & Winter, S. M. (2021). Families in the COVID-19 pandemic: parental stress, parent mental health and the occurrence of adverse childhood experiences—results of a representative survey in Germany. *European Child & Adolescent Psychiatry*. <https://doi.org/10.1007/s00787-021-01739-0>
5. Chung, G., Lanier, P., & Wong, P. Y. J. (2020). Mediating Effects of Parental Stress on Harsh Parenting and Parent-Child Relationship during Coronavirus (COVID-19) Pandemic in Singapore. *Journal of Family Violence*. <https://doi.org/10.1007/s10896-020-00200-1>
6. Data.Covid19.go.id. <https://data.covid19.go.id/public/index.html>
7. Dhama, K., Sharun, K., Tiwari, R., Dhawan, M., Emran, T. Bin, Rabaan, A. A., & Alhumaid, S. (2021). COVID-19 vaccine hesitancy – reasons and solutions to achieve a successful global vaccination campaign to tackle the ongoing pandemic. *Human Vaccines & Immunotherapeutics*, 17(10), 3495–3499. <https://doi.org/10.1080/21645515.2021.1926183>
8. Engzell, P., Frey, A., & Verhagen, M. D. (2021). Learning loss due to school closures during the COVID-19 pandemic. *Proceedings of the National Academy of Sciences*, 118(17), e2022376118. <https://doi.org/10.1073/pnas.2022376118>
9. Fontanesi, L., Marchetti, D., Mazza, C., Di Giandomenico, S., Roma, P., & Verrocchio, M. C. (2020). The effect of the COVID-19 lockdown on parents: A call to adopt urgent measures. In *Psychological Trauma: Theory, Research, Practice, and Policy* (Vol. 12, Issue S1, pp. S79–S81). Educational Publishing Foundation. <https://doi.org/10.1037/tra0000672>
10. Griffith, A. K. (2020). Parental Burnout and Child Maltreatment During the COVID-19 Pandemic. *Journal of Family Violence*. <https://doi.org/10.1007/s10896-020-00172-2>
11. Hagger, M. S., Keech, J. J., & Hamilton, K. (2020). Managing stress during the coronavirus disease 2019 pandemic and beyond: Reappraisal and mindset approaches. *Stress and Health: Journal of the International Society for the Investigation of Stress*, 36(3), 396–401. <https://doi.org/10.1002/smi.2969>
12. Huang, Y., & Zhao, N. (2020). Generalized anxiety disorder, depressive symptoms and sleep quality during COVID-19 outbreak in China: a web-based cross-sectional survey. *Psychiatry Research*, 288, 112954. <https://doi.org/https://doi.org/10.1016/j.psychres.2020.112954>
13. Hutasoit, L. (2021). IDAI: Kematian Anak Karena COVID1-19 di Indonesia Tertinggi Sedunia. *IDN Times*. <https://www.idntimes.com/news/indonesia/lia-hutasoit-1/idai-kematian-anak-karena-covid-19-di-indonesia-tertinggi-sedunia/3>
14. Irawan, A. W., Dwisona, D., & Lestari, M. (2020). Psychological Impacts of Students on Online Learning During the Pandemic COVID-19. *KONSELI: Jurnal Bimbingan Dan Konseling (E-Journal)*, 7(1), 53–60. <https://doi.org/10.24042/kons.v7i1.6389>
15. Jdih.kemendikbud.go.id. <https://jdih.kemendikbud.go.id/arsip/PERMENDIKBUD%20NOMOR%201%20TAHUN%202021.pdf>
16. JSclab Instagram (2021). https://www.instagram.com/p/CVsRkpQJOjf/?utm_medium=copy_link
17. Khan, M. J., & Ahmed, J. (2021). Child education in the time of pandemic: Learning loss and dropout. *Children and Youth Services Review*, 127, 106065. <https://doi.org/https://doi.org/10.1016/j.childyouth.2021.106065>
18. King, C. L., Chow, M. Y. K., Wiley, K. E., & Leask, J. (2018). Much ado about flu: A mixed methods study of parental perceptions, trust and information seeking in a pandemic. *Influenza and Other Respiratory Viruses*, 12(4), 514–521. <https://doi.org/https://doi.org/10.1111/irv.12547>
19. Levinson, M., Cevik, M., & Lipsitch, M. (2020). Reopening Primary Schools during the Pandemic. *New England Journal of Medicine*, 383(10), 981–985. <https://doi.org/10.1056/NEJMms2024920>

20. Liu, C.-Y., Yang, Y., Zhang, X.-M., Xu, X., Dou, Q.-L., Zhang, W.-W., & Cheng, A. S. K. (2020). The prevalence and influencing factors in anxiety in medical workers fighting COVID-19 in China: a cross-sectional survey. *Epidemiology and Infection*, *148*, e98. <https://doi.org/DOI: 10.1017/S0950268820001107>
21. McCleskey, J., & Gruda, D. (2021). Risk-taking, resilience, and state anxiety during the COVID-19 pandemic: A coming of (old) age story. *Personality and Individual Differences*, *170*, 110485. <https://doi.org/https://doi.org/10.1016/j.paid.2020.110485>
22. McCormack, G. R., Doyle-Baker, P. K., Petersen, J. A., & Ghoneim, D. (2020). Parent anxiety and perceptions of their child's physical activity and sedentary behaviour during the COVID-19 pandemic in Canada. *Preventive Medicine Reports*, *20*, 101275. <https://doi.org/10.1016/j.pmedr.2020.101275>
23. Mirabito, D. (2017). Social work theory and practise for crisis, disaster, and trauma. In Francis J. Turner (ed). *P.117-121*. New York University Press.
24. Nugraheny, D. E., (2021). Satgas: Saat ini Pandemi COVID-19 di Indonesia Terkendali. *Kompas*, Sep 21.
25. Özmete, E., & Pak, M. (2020). The Relationship between Anxiety Levels and Perceived Social Support during the Pandemic of COVID-19 in Turkey. *Social Work in Public Health*, *35*(7), 603–616. <https://doi.org/10.1080/19371918.2020.1808144>
26. Pelaez, M., & Novak, G. (2020). Returning to School: Separation Problems and Anxiety in the Age of Pandemics. *Behaviour Analysis in Practice*, *13*(3), 521–526. <https://doi.org/10.1007/s40617-020-00467-2>
27. Puspitawati, H. (2013). Fungsi Keluarga, Pembagian Peran dan Kemitraan Gender dalam Keluarga. *Jurnal Penelitian Humaniora ums*
28. Sabiq, A. F. (2020). Persepsi Orangtua Siswa tentang Pembelajaran Tatap Muka pada era New Normal Pandemi COVID-19. *Journal of Islamic Education Research* *1*(3). <https://doi.org/10.35719/jier.v1i3.41>
29. Shigemura, J., Ursano, R. J., Morganstein, J. C., Kurosawa, M., & Benedek, D. M. (2020). Public responses to the novel 2019 coronavirus (2019-nCoV) in Japan: Mental health consequences and target populations. *Psychiatry and Clinical Neurosciences*, *74*(4), 281–282. <https://doi.org/10.1111/pcn.12988>
30. Smith, L. E., Woodland, L., Amlôt, R., Rubin, A., & Rubin, G. J. (2020). A cross-sectional survey of parental perceptions of COVID-19 related hygiene measures within schools and adherence to social distancing in journeys to and from school. *BMJ Paediatrics Open*, *4*(1), e000825–e000825. <https://doi.org/10.1136/bmjpo-2020-000825>
31. Tolan, P. (2020). Commentary: Enabling efficient and full application of prevention strategies for population mental health — reflections on Dodge (2020). *Journal of Child Psychology and Psychiatry*, *61*(3), 268–271. <https://doi.org/https://doi.org/10.1111/jcpp.13196>
32. Tomasik, M. J., Helbling, L. A., & Moser, U. (2021). Educational gains of in-person vs. distance learning in primary and secondary schools: A natural experiment during the COVID-19 pandemic school closures in Switzerland. *International Journal of Psychology*, *56*(4), 566–576. <https://doi.org/https://doi.org/10.1002/ijop.12728>
33. Wang, C., Horby, P. W., Hayden, F. G., & Gao, G. F. (2020). A novel coronavirus outbreak of global health concern. *The Lancet*, *395*(10223), 470–473. [https://doi.org/10.1016/S0140-6736\(20\)30185-9](https://doi.org/10.1016/S0140-6736(20)30185-9)
34. Wibisono, G. (2021). Terjadi 1296 Kasus Klaster Sekolah, Nadiem: PTM Tidak akan dihentikan. *Jawa Pos*. <https://www.jawapos.com/nasional/pendidikan/23/09/2021/terjadi-1-296-kasus-klaster-sekolah-nadiem-ptm-tidak-akan-dihentikan/>
35. Woodland, L., Smith, L. E., Amlot, R., Rubin, A., Webster, R. K., Wessely, S., & Rubin, G. J. (2020). Parents' Willingness to Send Children Back to School during the COVID-19 Pandemic: A Cross Sectional. *SRRN*. <https://dx.doi.org/10.2139/ssrn.3675426>
36. Wu, M., Xu, W., Yao, Y., Zhang, L., Guo, L., Fan, J., & Chen, J. (2020). Mental health status of students' parents during COVID-19 pandemic and its influence factors. *General Psychiatry*, *33*(4). <https://doi.org/10.1136/gpsych-2020-100250>