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Elementary School Students' Mental Health During the Corona Virus Pandemic (COVID-19)

Mayasari, E. D.¹, Evanjeli, L. A.², Tri Anggadewi, B. E.³, Purnomo, P.⁴

^{1,2,3,4} Sanata Dharma University, Yogyakarta, Indonesia

✉ elisabethmayasari@gmail.com

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ABSTRACT

During the Coronavirus (COVID-19) pandemic, changes in routine have affected students' psychological development. This study aims to determine elementary school students' mental health during the Corona Pandemic. The benefit of this research is as a basis for efforts to prevent and overcome unexpected psychological conditions in students. This research is a descriptive quantitative study using a survey method. The population in this study were 148 students aged 9-14 years. The data collection technique used was a questionnaire. This study used the Indonesian version of Strength and Difficulty Questionnaire for Children (SDQC) arranged by Robert Goodman. The result showed that the condition of the students was in the "abnormal" category which was indicated by a condition that was less good than the condition in general. There were 17 (11.49%) students in the abnormal category on the disruptive behaviour subscale, 11 (7.43%) students on the hyperactive-inattention subscale, 10 (7%) students on the emotional subscale, 5 (3%) students on the indifference subscale, and 2 (1%) students on the relation problems subscale. Overall aspects of measurement show that the students show a state of "abnormal" status in one or two aspects and it means that students have good mental health.

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1. Introduction

The world's attention is now focused on steps to reduce the transmission and economic effects of the Corona Virus (COVID-19) pandemic. In this rapidly changing situation, conversations on social media are dominated by information about the outbreak. In that situation, children especially students are exposed to a large amount of information and high levels of stress and anxiety from the adults around them. At the same time, children experience major changes to their daily routine and social infrastructure (Danese, Smith, Chitsabesan, & Dubicka, 2019; Dalton, Rapa, & Stein, 2020). It is needed for parents to listen to children's beliefs about the transmission of COVID-19 and provide an accurate and meaningful explanation to children due to the effects of the uncertain situation regarding COVID-19, namely the psychological effects during the quarantine period (Dalton, Rapa, & Stein, 2020).

Children's ability to understand develops throughout childhood and adolescence. This implies that when adults are giving information to children, the child's age and level of understanding should be taken into account. Good and effective communication about the Corona (Covid-19) pandemic has great benefits for children especially students as well as their long-term psychological well-being (Danese, Smith, Chitsabesan, Dubicka, 2019; Dalton, Rapa, Stein, 2020). This long-term psychological well-being is closely related to mental health.

People need to maintain mental health, especially in emergencies and plague including psychological attention. During this pandemic, an action that focuses on psychoeducation on normative reactions and strategies to overcome an urgent situation is needed (Danese, Smith, Chitsabesan, Dubicka, 2020; Dalton, Rapa, Stein, 2020). Urgent circumstances include providing clear information (UNICEF, 2020) and prioritizing good communication with children regarding the COVID-19 outbreak. This is important since it can have good psychological effects in the short and long term situation, especially for children and adolescents who are 42% of the world's population (WHO, 2020).

Children's mental health is not only defined as the mental condition of children who do not experience mental illness, but also defined as the ability to think clearly, control emotions, and socialize with children their age. Children whose mental health is good, will have several positive characteristics, such as being able to adapt to circumstances, deal with stress, maintain good relationships and rise from difficult situations. Conversely, poor mental health during childhood can lead to more serious behavioural disorders due to mental and emotional imbalances, as well as poor social life. One of the causes could be due to excessive use of gadgets (Hasanah, 2017).

Prawitasari (2011) states that positive mental health is the psychological condition of a person who is mentally healthy and has adaptation and flexibility in dealing with life's problems. A mentally healthy person does not mean that he has never experienced problems, but that he is able to return to a psychological condition before experiencing severe stress in his life. The concept of health and illness physically and psychologically is part of human adaptation to the environment and human recognition of their condition. The Mental Health Movement tries to understand mental disorders and intervenes in various fields of science to overcome them and how the community's role in helping optimize individual mental functions (Dewi, 2012).

When WHO declared the Corona (Covid-19) outbreak in January 2020 (WHO, 2020), the Ministry of Education then made a policy to move learning from school to home during the Corona Pandemic (Covid-19) which had not yet been known when it would end. All students' activities are carried out online. Teachers provide assignments and tests online with a purpose to accompany children while studying at home. However, the assignment given by the teacher does not fully help students learn, instead it makes both students and parents feel overwhelmed. The following is data taken on April 15, 2020 in a conversation with parents in a social media group.

The several conversations were obtained from a short message from a parent from one of the Private Elementary Schools in East Sleman Region who felt overwhelmed by online learning. Similar data were obtained from interviews with 5 other elementary school students. The five students were afraid of being exposed to the Corona virus (COVID-19). Besides, they also felt that the duties from the teacher were relatively many and they knew that parents felt burdened because they had to record and report assignments every day. The pressure received by the parents was then passed on to the children. Therefore, this can affect the mental health of the child.

It is important to maintain the mental health of children with prevention efforts and ways to deal with emotional and behavioral problems in elementary school age as early as possible. This is done so that the problem is resolved and does not interfere with students' academic achievement and their development in society. In this case, the community and schools need to collaborate with parents in providing psychological assistance to children so that emotional and behavioral problems can be handled immediately (Ediati, 2018: 4), especially during this Corona pandemic. Good mental health is the basis for an individual to function optimally as a human being and carry out his role in the family, working environment, and community. The definition of mental health has been extended to the psychological function of humans across a wide spectrum of life. Mental health is reinterpreted as a balance between physical, social, cultural, psychological and other personal factors such as understanding oneself (Kurniawan & Sulistyarini, 2016).

Literature that discusses pandemics that have occurred in the world reports that psychosocial stressors often arise during pandemic and many changes occur such as routines, distance of family and friends, lack of food and medicine, decreased income, social isolation due to the implementation of quarantine or other distancing programs, and cessation of teaching and learning activities (Shultz, Espinel, Flynn, Hoffmann, & Cohen in Taylor, 2019). Similar events also occur during the Corona virus pandemic, namely routine changes, physical distance between people, decreased income and layoffs, social isolation, and temporary suspension of teaching and learning activities. The similarity of the Corona virus pandemic situation with previous pandemics enable the same psychological problems to occur. The Corona virus case is a new case that requires in-depth research, as well as its impact on children's mental health.

Pandemic situation is a kind of disaster event and this situation may differ with other events so it is important to identify factors that affect children's mental health and support to promote their mental health may vary depending on the context. Screening to identify children's mental health should engage children to report their psychological responses (Danese, Smith, Chitsabesan, & Dubicka, 2020). Understanding children's mental health can help parents and teachers to provide a suitable intervention according to their psychological responses.

The involvement of the community is proven to be effective in helping professional performance in the mental health sector and increasing collective awareness of the importance of mental health (Kurniawan & Sulistyarini, 2016). In a study conducted by Kurniawan and Sulistyarini (2016), the community quite understands that mental health problems cannot be resolved unilaterally, but requires integration between the patient's family and the community. In addition, mental health needs to be viewed

not only in terms of mental illness or disorders.

Based on the urgency of problems in elementary school, the pandemic situation and mental health, it is necessary to screen students' mental health during the Corona Pandemic (Covid-19). This is useful for determining the mental health condition of the students and taking long-term psychological preventions. Therefore, this research aims to know the mental health of elementary students during the Corona Pandemic (Covid-19).

1.1 Children's Mental Health

Mental health is a universal term to define psychological health that is indicated by positive symptoms, such as positive emotion and positive functioning. A person can be called having mental health that is indicated by the following symptoms: positive feelings, satisfied with life, social contribution, social relation, social adaptation, social acceptance, social interest, self-acceptance, environmental adaptation, positive relations, personal growth, independence, and having life purpose. The World Mental Health Organization pointed that having positive wellbeing are equal with having mental health (Sirgy, 2021).

Ariadi (2013) defines mental health as the avoidance of a person from complaints and mental disorders in the form of neurosis and psychosis (adjustment to the social environment). A mentally healthy person will always feel safe and happy in any condition, he will also introspect on everything he does so that he will be able to control and control himself.

The definition of mental health that has been described emphasizes an individual's ability to adapt to situations and the environment, including the ability to have the self-regulation. A person is said to be mentally healthy if he is able to manage himself to face various situations at hand. Therefore, based on the explanation from the experts above, the researchers concluded that mental health is a person's ability to control and overcome all feelings that can cause mental disorders, neurosis and psychosis and can achieve psychological well-being as an effort to adapt.

Children especially students who have good mental health will have several positive characteristics, for example being able to adapt to circumstances, deal with stress, maintain good relationships and rise from difficult situations. Conversely, poor mental health during childhood can lead to more serious behavioral disorders due to mental and emotional imbalances, as well as poor social life for children (Hasanah 2017).

A literature study conducted by Saputra (2017) found that Indonesian children who are at school age experience emotional problems compared to other problems. One of the reasons for the mental health problems of these children is family factors, such as relationships with family members, parenting stress experienced by mothers, parenting behavior by mothers, and depression experienced by mothers. This literature review shows that parenting styles or parenting styles can have an impact on children's mental health.

Research conducted by Kumara, Wimbari, Susetyo, and Kisriyani (2017) also found the same findings as the literature review conducted by Saputra. The problems experienced by elementary to high school aged children ($n = 237$) in Yogyakarta are generally emotional problems, such as anger, irritation, unruly fear, rapid mood changes, and excessive anxiety. These emotional problems cause the students to feel difficult to be themselves and sometimes lead to the urge to do activities that hurt themselves, feel anxious, and have difficulty controlling themselves. The results of this study indicate that children to adolescents have a need for appropriate assistance in order to manage emotions and behavior properly.

Emotional problems often occur as a form of mental health problems for children. A literature review conducted by Saputra shows that one of the factors causing mental health problems is the relationship within the family, but on the other hand, the family can also be the supporting system to help children be mentally healthy. Dewi (2012) explains that the family is the main way for children to realize children's self-defence in facing social situations. The role of the family in realizing self-defence in children in the form of positive care and education in the family such as division of tasks in completing household chores and other social roles will provide emotional support to children. Families can provide emotional support to children with a willingness to be closer and communicate, understand children's feelings, listen to children's stories about feelings that are being experienced, and pay attention to needs or problems experienced by children.

In catastrophic situation, Dewi (2012) describes ways that can be done to help children understand the situation at hand. The ways that can be done: (1) avoid thinking that the child does not know the situation that is happening, (2) invite the child to tell what is known about the disaster so that the family can know the child's understanding and provide appropriate explanation and support, (3) invite children to describe their feelings through activities, such as drawing, playing music, movement, dancing, or other activities that help children show their feelings, and (4) give support to children so that children feel safe by accompanying and caring for children.

Therefore, a child's mental health is that the child's condition is able to think clearly, control emotions, and socialize with other children their age so as to allow optimal development both physically, intellectually, and emotionally. Family can be a carrying capacity as well as a risk factor for children's mental health

1.2 Pandemic Psychology

A pandemic is an epidemic that occurs on a large scale and affects many people in various countries, and even spreads throughout the world (WHO in Taylor, 2019). Pandemics are caused by viruses or bacteria, generally humans, do not have immunity against these viruses or bacteria so they easily spread between humans and cause severe disease (Kilbourne in Taylor, 2019). Diseases that cause pandemics are part of a group of conditions that cause infectious diseases (Lederberg, Shope, & Oakes in Taylor, 2019) which can be categorized as new pathogens. WHO (Taylor, 2019) explains that the influenza pandemic is one of the biggest threats all the time.

During a pandemic, there are several stages of the situation. In the early days there will be a lot of uncertainty about the chances of the community for being infected, the existence of misinformation, the best way to prevent transmission and prevention arrangements (Kanadiya & Sallar in Taylor, 2019). The case that has occurred since the end of 2019 is the Corona virus. This period can be said to be the beginning of a pandemic because the researchers in the health sector are still trying to find treatment and prevention or a vaccine to limit the spread of the virus

These health problems can have an impact on many aspects and they are complex. Psychological factors can affect the way a person adapts or reacts to the infectious problems faced or threatens (Taylor, 2019). During a pandemic there are frequent causes of psychosocial stress and many changes occur due to the implementation of quarantine or other distancing programs, and cessation of teaching and learning activities. (Shultz, Espinel, Flynn, Hoffmann, & Cohen in Taylor, 2019). Prevention of the spread of the Corona virus is also in the same way as the pandemic that has occurred, namely maintaining distance between people and self-isolation. Then, teaching and learning activities at schools are temporarily stopped and replaced by studying at home, and working from home. The case of the Corona virus has also had an economic impact which has led to layoffs by various business sectors, as well as the closure of micro and tourism businesses.

Psychological problems often arise during a pandemic. Pandemic prevention methods are generally in the form of behavioral prevention or educational management, such as affirming the importance of vaccination, implementing hygiene, and social restrictions or maintaining distance. Psychological factors have an important role in implementing these methods (Taylor, 2019). Psychological factors during a pandemic require in-depth study because there are many changes that occur in social relations, behavior and other psychological aspects.

The psychological problems experienced by society are quite diverse and caused by many factors. People who have resistance to stress or are able to withstand previous stressful events have a tendency to easily survive psychologically (Shultz, et al., 2008; Taylor, 2017 in Taylor, 2019). The psychological condition that often arises during a pandemic is fear. Psychological problems can be said to tend to be bigger than medical problems (Shultz, et al in Taylor, 2019). During pandemic times, the psychological impact is more studied in the next pandemic, more cases appear and last longer than health problems (Taylor, 2019). Fear and anxiety are common reactions during a pandemic. However, mental disorders or mental health problems can also be caused by stress factors during a pandemic, such as mood disorders, anxiety disorders, and posttraumatic stress disorder or PTSD (Shultz, et al, 2015; Wu, Chan, & Ma, 2005 in Taylor, 2019).

One of the pandemic cases that was reported to have a psychological impact was SARS. SARS cases cause stress because (1) the cause and treatment of this disease is unknown, (2) infection prevention can be handled through social isolation or limiting the distance between people, and (3) there is a fear of spreading infection to other people because of the lack of understanding of the disease (Maunder, et al in Taylor, 2019). Previous pandemic experiences have shown that psychological problems are common with a variety of cases and have a considerable impact on society. Thus, the mental health of the community, including children of primary school age, can also be affected during the Corona pandemic.

Previous pandemic experience states that psychological problems often arise and have a considerable impact on society. In 2020, the world community, including Indonesia, will experience a pandemic period of the Corona virus which has an impact on various aspects of life. Taylor (2019) explains the psychology of a pandemic based on psychological problems that arise during a pandemic in several pandemic cases that occur in the world.

During the Corona virus pandemic, teaching and learning activities are temporarily stopped and replaced with online learning at home. Changes in routine and restrictions on activities outside the home that involve large numbers are often difficult for elementary school age children to understand, including

understanding the Corona virus. If parents provide a scientific explanation, it will be difficult for children to understand changes in their routine and restrictions on activities outside the home.

The COVID-19 pandemic is an ongoing case in various countries. In Indonesia, cases of positive COVID-19 patients are still increasing. The uncertainty over the end of the COVID-19 pandemic period causes uncertainty about normal routines that can be carried out by the community, as well as teaching and learning activities in schools. This situation can usually cause a psychological impact on elementary-aged children. Researches that examine the impact of the COVID-19 epidemic are still being carried out to help the affected communities. Therefore, this study is intended to determine the mental health of children during the COVID-19 pandemic.

2. Methods

This research was a descriptive quantitative study using a survey method. Yusuf (2014) argues that quantitative descriptive research is a type of research that aims to describe phenomena by providing systematic, factual, and accurate descriptions. Meanwhile, Sudaryono (2016) states that descriptive quantitative research is research aimed at describing a phenomenon as it is. In this descriptive quantitative research, researchers used a survey method. Effendi and Tukiran (2012) reveal that a survey is a study using a questionnaire as a primary data collection tool from a population. Asra, et al (2015) explains that the survey method is an organized collection of information by following the scientific method in compiling information for both part and all of the population. In this study, researchers collected data from respondents through questionnaires. This study then aims to provide a detailed description according to the mental health realities of children during the Corona Pandemic (Covid-19).

2.1 Research Setting

This research was carried out in all Private Elementary Schools in East Sleman Region, namely (initial) SDKB, SDKS, SDKKa, SDKK, SDKDB, SDKT, and SDKC from May to June 2020. The selection of research locations can support the description of the characteristics of the data population. In addition, at the Private Elementary School, East Sleman Region, there has never been any survey research on students' mental health during the Corona pandemic (Covid-19). Therefore, researchers wanted to know the mental health conditions of the students during the Corona Pandemic (Covid-19).

2.2 Population

Sukardi (2019) argues that population is all elements of research that live together and become the target of theoretical research results. Researchers conclude that the population is all objects that become variations in research to achieve the target. The population in this study were students of Private Elementary School, East Sleman Region. The total population in this study were 267 students.

2.3 Sampling

Martono (2014) explains that the sample is representative of members of the population who are selected using certain procedures. This opinion is in line with Sarwono (2011) that the sample is part of the number and characteristics that represent the entire population.

Sampling in this study was calculated using the determination of the minimum sample size according to Krejcie and Morgan with a randomly selected sample size from a finite population for case N with the sample proportion in the range of 0.05 in the population proportion with a 95% confidence level. Sugiyono (Effendi & Tukiran, 2012) describes the determination of the minimum sample size according to Krejcie and Morgan with a confidence level of 95% and an error rate of 5%. It can be seen in Table 1:

Table 1. Determination of the minimum number of samples according to Krejcie and Morgan			
Population (N)	Sample (S)	Population (N)	Sample (S)
80	66	250	152
85	70	260	155
90	73	270	159
95	76	280	162

What is in Table 1 is a guide in providing information to determine the number of samples that should be taken based on the number of the study population. The population of this research is 265

students. The population size is closer to 270, so the minimum sample that must be taken according to the Krejcie and Morgan table is 159 students. The researcher calculated the number of research samples using the formula:

Table 2. The formula for calculating the research sample

$SP = \frac{n}{Jp} \times \text{Number of sample}$	
Note	
SP	: Required sample size
N	: The number of students for each school
Jp	: Total population of teachers in East Sleman Region
Number of sample	: The number of samples according to the Krejcie and Morgan tables

The following is how to calculate the minimum sample size according to Krejcie and Morgan in each elementary school in East Sleman Region:

Table 3. Population and sample of each school

No	School Name (initial)	Coding	Number of Population (Grade 5 Students)	Research sample according to Krejcie and Morgan		Sample
				Calculation	Rounding	
1	SDKB	A	25	$\frac{25}{265} \times 159 = 15$	15	15
2	SDKS	B	60	$\frac{60}{265} \times 159 = 36$	36	36
3	SDKKa	C	28	$\frac{28}{265} \times 159 = 16,8$	17	17
4	SDKK	D	27	$\frac{27}{265} \times 159 = 16,2$	16	16
5	SDKDB	E	70	$\frac{70}{265} \times 159 = 42$	42	42
6	SDKT	F	29	$\frac{29}{265} \times 159 = 17,4$	17	17
7	SDKC	G	26	$\frac{26}{265} \times 159 = 15,6$	16	16
Total			265		159	159

Table 3 shows the minimum sample according to Krejcie and Morgan. Sampling in this study was using simple random sampling technique. Asra, et al (2005) states that simple random sampling is a sampling method in which each population unit has the same probability of being selected into the sample.

In this study, the minimum number of samples was 159 samples. The simple random sampling method was used to complete the sample draw by making rolls of paper in the form of the letters A, C, D, E, F, G, and H. These codes are code names for each school. In the data collection process, the research respondents involved in this study were 154 people. From the collected data, the data from six respondents had to be eliminated due to incompleteness of filling out the questionnaire. The number of samples analysed became 148 people.

2.4 Research variable

Sugiyono (2012) states that research variables are all forms of attributes determined by researchers to be studied so that they get information to draw a conclusion. The identification of variables is important to convey in quantitative research. In this study, the variable studied was students' mental health.

2.5 Data collection technique

Asra, et al (2015) state that data collection techniques are the ways to obtain real and correct evidence for analysis. This study used questionnaire as the data collection technique. Arikunto (Nugroho, 2018) reveals that the questionnaire is a set of lists of questions used to obtain information from respondents related to research topics. Asra, et al (2015) explained that questionnaires are generally used to obtain data from variables that can be measured directly.

This study used a questionnaire in the form of a closed question. Effendi and Tukiran (2012) reveal that questionnaires with closed questions limit respondents from giving questions because the answer choices have been determined by the researcher. In this study, researchers used questionnaires in order to obtain relevant data from respondents. The questionnaire was distributed by researchers to 7 Elementary Schools in East Sleman Region.

The questionnaire used by the researcher was the Strength and Difficulty Questionnaire in Children (SDQ) which was used to measure behavior problems in children. The psychometric quality in Strength and Difficulty Questionnaire Indonesia Version has been analysed, including the self-report version (Istiqomah, 2017; Wiguna & Hestyanti, 2012) and the teacher report version (Oktaviana & Wimbari, 2014; Siregar & Wimbari, 2018). SDQ has been adapted in various languages and it is used in many countries, including Arabic (Hariz et al., 2013), Australia (Hawes & Dadds, 2004), the Netherlands (Mieloo et al., 2012), China (Mellor et al., 2016), Japan (Tanabe et al., 2013), Germany (Petermann, Petermann, & Schreyer, 2010), Spain (Ortuño -Sierra, Aritio-Solana, & Fonseca-Pedrero, 2018), Sweden (Smedje, Broman, Hetta, & von Knorring, 1999), Taiwan (Liu et al., 2013).

The SDQ instrument is intended for children aged 4-16 years and can be used as a detection tool for students' mental health (Goodman, 1997). Although this instrument is quite old, it is widely used to detect psychological problems in children. Aspects measured using SDQ are: 1) emotional symptoms or emotional problems; 2) behavior problems; 3) hyperactivity; 4) peer problems; and 5) prosocial behavior (Istiqomah, 2017; Wiguna, Manengkei, Pamela, Rheza, & Hapsari, 2010). Each aspect consists of 5 statements with a total of 25 questions. This questionnaire uses three choices of answer: "Not True" (score 0), "Somewhat True" (score 1), and "True" (score 2) for statement items that are favourable. Statement items 7, 11, 14, 21, 25 were given a reverse scoring because the statement was unfavourable. The maximum total score that can be obtained is 50 and the minimum score is zero. The SDQ questionnaire was distributed in an online form through the Elementary School teachers in East Sleman Region. Data collection was carried out with parental consent to be involved in this study.

3. Findings and Discussion

3.1 Result

Children's Mental Health during the Corona Pandemic (Covid-19)

There were 148 children aged between 9-14 years old involved in this study. Based on gender, male respondents were 76 students and female respondents were 72 female students. The details can be seen in Table 5.

Table 4. Number of respondents based on age and gender

No	Age	Number of Respondent	
		Female	Male
1	9	4	4
2	10	22	19
3	11	42	42
4	12	4	5
5	13		5
6	14		1
Total		72	76
Total Respondent		148	

The research focused on students who attend Private Primary School, East Sleman Region (7 schools), which consisted of (initial) SDKB, SDKS, SDKKa, SDKK, SDKDB, SDKT, and SDKC. The distribution of respondents in each school can be seen in table 8.

Table 8. Number of respondents each school

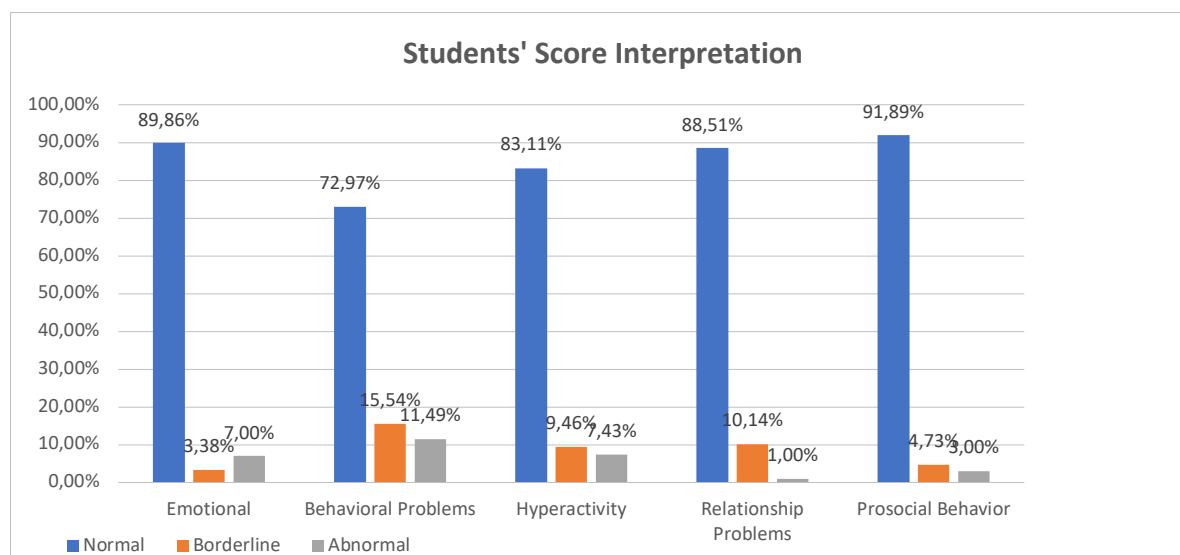
School Names (initial)	Total Respondent
SDKB	11

SDKS	65
SDKKa	19
SDKK	20
SDKDB	10
SDKT	8
SDKC	14
Schools' name is not mentioned	1
Total	148

Students' mental health was measured using the Student's Strength and Difficulty Questionnaire (SDQ). There was a guideline to categorize the total score of the whole statement items in order to find out the mental health status of students. The categories used were normal, borderline, and abnormal. The mental health condition of students can be determined based on five measurement aspects or subscales. Emotionally, there were 133 students in the "normal" category (89.86%), 5 students (3.38%) "borderline", and 10 students (7%) "abnormal". On the behavioral problem subscale, 23 students (15.54%) were in the "borderline" category, and 17 students (11.49%) were "abnormal". Students who showed hyperactivity in the "borderline" category were 14 students (9.46%) and 11 students (7.43%) were "abnormal". Relationship problems with peers experienced by students in the "borderline" category were 15 students (10.14%) and "abnormal" were 2 students (1%). Students who show prosocial behavior in the "borderline" category are 7 students (4.73%) and "abnormal" are 5 students (3%). Student mental health status data based on SDQ aspects or subscales can be seen in table 6 and graph 1.

Table 6. Scores of the Strength and Difficulty Questionnaire subscales in Students (SDQ)

Subsclae Score	Normal	%	Borderline	%	Abnormal	%
Emotional symptoms	133	89.86%	5	3.38%	10	7.00%
Behavioral problems	108	72.97%	23	15.54%	17	11.49%
Hyperactivity	123	83.11%	14	9.46%	11	7.43%
Peer relationship problems	131	88.51%	15	10.14%	2	1.00%
Prosocial behavior	136	91.89%	7	4.73%	5	3.00%



Graph 1. Score of the Strength and Difficulty Questionnaire subscales in Students (SDQ)

From the five SDQ subscales, the condition of students who were in the highest "normal" category was shown on the prosocial behavior subscale (136 students, 91.89%) and the lowest was on the behavioral problems subscale (108 students, 72.97%). Students who are in the "borderline" category tend to be on the threshold between good and unfavourable conditions. The highest number of students in the "borderline" category was on the behavioral problems subscale (23 students, 15.54%) and the lowest was on the emotional symptoms subscale (5 students, 3.38%). The "abnormal" category indicates that students are

experiencing poor conditions. Students who experienced "abnormal" or unfavourable conditions were the highest on the behavioral problems subscale (17 students, 11.49%) and the lowest on the peer relations problems subscale (2 students, 1%).

3.2 Discussion

The situation and learning methods during the Corona (Covid-19) pandemic require students to be able to adjust to all changes in accordance with health protocols. Learning activities that are usually carried out face-to-face in class must turn into online learning. Teachers, parents and children must immediately adjust to this situation since it is possible for children to be unprepared for the changes. The mental health condition of the children in this study was expressed through the SDQ instrument.

The five subscales on the SDQ instrument show unexpected behaviors, especially in education (Goodman, 1997). This instrument can also identify problems that exist in these five aspects (Goodman, Ford, Simmons, Gatward, & Meltzer, 2003). The calculation results using the SDQ are divided into three categories: normal, borderline and abnormal. The terms "normal" and "abnormal" are used in this instrument to identify the characteristics of a student who has a certain disorder or obstacle. The "abnormal" category can indicate students who have less good condition than the condition in general. There were 17 students in the abnormal category on the behavioral problems subscale (11.49%), 11 students on the hyperactive sub-scale (7.43%), 10 students (7%) on the emotional symptom subscale. On the prosocial behavior subscale, there are as many as 5 students (3%), and on the relationship problems subscale with peers, there are as many as 2 students (1%). The statements used in the SDQ instrument were universal so that they could be used in the context of behavior at school and outside of school such as online learning.

Of the five subscales, the students mostly tend to have behavior problems. In the context of learning in schools, behavioral problems can be in the form of disruptive classroom behavior or Disruptive Classroom Behaviors (DCB) which are defined as visible behaviors that occur in the classroom that disturb teachers and / or other students, for example, refusing to participate or cooperate in class activities, disregarding the rights of others, not paying attention to lessons, making noise and leaving seats without permission (Bidell & Deacon, 2010). The characteristics of behavioral problems may differ at each level of age. Arbuckle and Little (2004) mention behavioral problems that often arise in elementary school students which include demanding that requests be met immediately and so on. Behavioral problems shown by students during the online learning period can be addressed to learning companions at home, such as parents or people entrusted with learning at home.

Flicker and Hoffman (2006) mention several factors that cause students to show behavioral problems, namely emotional factors which include temperamental personality, anger, opposition, assertiveness, frustration, anxiety, fear, boredom, overstimulation, need for attention, jealousy, and low self-esteem. Second, physiological factors which include malnutrition, hunger, fatigue, illness, and allergies. Learning activities during the Corona pandemic (Covid-19) require adjustment from students to be able to take part in online learning while following health protocols. Emotionally, students can feel frustrated with changing conditions, both in learning and in daily activities. Research conducted by Dina (2020) shows that 50% (n = 58) of parents report that their children do not feel bored with online learning. This data shows that some children experience boredom in participating in online learning which can lead to behavioral problems.

On the hyperactive behavior subscale, there were 11 students (7.43%) in the "abnormal" category. In hyperactivity symptoms, students can experience activities in the form of excessive motor movements above the average motoric activity of normal students in their age. Hyperactive children feel tireless and have clear goals and they are even very difficult to calm. This also occurs in the symptoms of inattention, students often seem to have difficulty to focus. The presence of a spontaneous stimulus from their respective senses greatly affects their concentration. Their concentration endurance is very limited, thus inhibiting information receiving from the environment (Paternotte & Buitelaar, 2010). To identify hyperactive children, experts need at least six months to determine the consistency of the appearance of hyperactive behavior (American Psychiatric Association, 2013). The hyperactive behavior shown in children in this study did not reveal the time span of appearance so it was difficult to identify as hyperactive behavior that consistently appeared or was caused by changes in learning activities carried out at home.

On the emotional symptom subscale, there were 10 students (7%) in the "abnormal" category. At the stages of students' development, emotions have a very important role, both at preschool and at later stages of development, because they have an influence on students' behavior. Woolfson (Sukatin, Chofifah, Turiyana, Paradise, Azkia, Ummah, 2020) states that students have emotional needs, such as wanting to be loved, valued, secure, feeling competent and optimizing their competence. During online learning, students' emotional needs can be met through parent-child interactions. Research conducted by Keliat, Triana, and

Sulistiowati (2019) shows a relationship between family relationships and mental health in adolescents. The results of this study indicate that positive relationships in the family can contribute to the condition of a mentally healthy children.

Nurmalitasari (2015) argues that students understand more complex emotional concepts, such as jealousy, pride, sadness and loss, but students still have difficulty in interpreting the emotions of others in their school age. At this stage students need to experience emotional regulation, which includes the capacity to control and direct emotional expression, as well as maintain organized behavior when strong emotions arise and to be guided by emotional experiences and students' ability to tolerate frustration. This ability aims to avoid anger in a frustrating situation that makes emotions uncontrollable and behavior becomes disorganized. Students seem to improve their ability to tolerate frustration when they are asked to do something against their will. They also began to learn how to negotiate the conflict. In some situations students are expected to be able to restrain themselves, but in other situations, students can behave impulsively and expressively as they wish. Students are expected to express their emotions well and without harming others, and can also start learning to regulate emotions.

There were 5 students (3%) in the "abnormal" category on the prosocial behavior subscale. At the stage of ignorance, a human being is a creature that cannot possibly separate his life from other humans. Every human being must have an interest between one another, so that interactions will be created between the two and require the help of other humans in several ways. Prosocial behavior is defined as the willingness to help others without giving benefits to those who help or maybe giving risks to those who help (Baron & Byrne in Istiqomah, 2017). Prosocial behavior can appear from early childhood. Prosocial behavior displayed by children is perceived as the influence of cognitive abilities and parent-child relationships regarding learning helpful behavior or feelings of empathy for others (Chernyak, Harvey, Tarullo, Rockers, & Blake, 2018).

On the peer relationship problems subscale, there were 2 students (1%) in the "abnormal" category. The research data show that in general, children do not have problems related to peer relationships. This may occur due to the limited interaction between students and their peers at school. However, interactions with peers can still be established in the neighbourhood. Mc Dougall (Walgito, 2003) explains that instinctively humans will relate to one another. The need for interaction with peers must still be met to develop social interaction skills in children even though interactions have become more limited during the Corona pandemic (Covid-19). Setiawati and Suparno (2010) state that social interaction with peers in students' learning activity at home is less developed when it is compared to social interactions in class. Students who study at home will experience needs in terms of openness, cooperation, and expressing opinions to others. These needs are less fulfilled during learning at home due to limited relationships with peers and teacher. Desmita (2007) states that school has an important influence on children's development, especially in their social development. Interaction with teachers and peers at school provides great opportunities for children to develop cognitive abilities and social skills, acquire knowledge about the world and develop self-concepts throughout middle and late childhood.

Mental health conditions measured by the SDQ are shown to measure the condition of children based on aspects or subscales. Based on the description of the condition of children who are in the "abnormal" category above, behavioral problems are most commonly displayed by the students. There are many factors that contribute to students' behavior problems, both changes in situations, relationships with family, relationships with peers, and other factors. Overall, the measurement aspect shows that the respondents show the "abnormal" category in one to two aspects so it means that in general, the students are in a mentally healthy condition.

This study was limited to using the SDQ instrument to explore the factors causing the problems faced by children. Further research can add qualitative instruments to explore further the problem factors faced by children. Participants of this focus in private schools, therefore, children's mental health in other educational settings may show differently.

4. Conclusion

The conclusion obtained from this study is that the condition of the students is in the "abnormal" category which is indicated by a condition that is less good than the condition in general. There were 17 (11.49%) students in the abnormal category on the disruptive behavior subscale, 11 (7.43%) students on the hyperactive-inattention subscale, 10 (7%) students on the emotional subscale, 5 students (3%) on the indifference subscale, and 2 (1%) students on the peer relationship problems subscale. Overall, the measurement aspect shows that the students show an "abnormal" condition in one to two aspects so that it can be concluded that the students have good mental health. This research was limited to using the SDQ instrument so that it did not explore the factors causing the problems faced by the students. Therefore,

future research can add other qualitative instruments to further study in exploring the factors that cause the problems faced by the students.

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