Anxiety Level Survey Before and After the Bina Darma University Athletes' Competition at Pomprov in Palembang

Ria Oktafia[1], Bayu Hardiyono[2], Selvi Atesya Kesumawati[3*]

[1,2,3]Sports Education, Teaching Faculty of Education and Language Sciences, Universitas Bina Darma Palembang, Palembang, Indonesia

Article Info

Abstract

Anxiety is a signal that alerts, warns of an imminent danger and allows a person to take action to overcome the threat. This study aims to determine the level of anxiety of Bina Darma University athletes before and after the POMPROV match in Palembang. The research sample consisted of 89 students (male and female) aged 18-20 years. This research instrument uses a questionnaire on the anxiety level of HARS (Hamilton Anxiety Rating Scale) which is used before and after the match. The data analysis technique uses the percentage formula. The results of the analysis show that the level of anxiety (anxiety) of POMPROV UBD athletes before competing is as follows; no anxiety 14.61%, mild anxiety 22.47%, moderate anxiety 40.45%, severe anxiety 22.47%, and severe anxiety 0%. While the results of the analysis of the level of anxiety after the game are as follows; no anxiety 26.97%, category of mild anxiety 48.31%, moderate anxiety 22.47%, severe anxiety 2.25% and very severe anxiety 0%. based on the analysis of the data obtained, it can be concluded that the level of anxiety of UBD athletes at POMPROV 2022 Palembang has a mild anxiety category.

INTRODUCTION

Sport is one of the physical activities carried out by a person or group of people with the aim of creating physical fitness. The form of government attention in the development of sports achievements in Indonesia has been described in the Law of the Republic of Indonesia No. 3 of 2005 concerning the National Sports System, in article 20 paragraphs 2 and 3 explains that: Sports achievements are carried out by everyone who has talent, ability and potential to achieve achievements. Achievement sports are carried out through planned, tiered and sustainable coaching and development with the support of sports science and technology. It takes talent, ability and potential to achieve achievement.

Appearance in sports and further, of course, the results or achievements in sports are strongly influenced by the presence of psychological factors. This includes how to prepare mental conditions through well-planned exercises (mental training, mental preparation) (Hardiyono, 2020). Mental factors do not automatically become a determining factor for an athlete's success without any other factors. There are several components that can affect the athlete's appearance, namely physical, technical, tactical and psychological (Kumbara et al., 2019).

To achieve maximum performance an athlete requires some readiness, namely physical, technical, and tactical, besides that mental readiness is needed to be able to achieve the best playing ability because mental factors themselves include anxiety, which is a mental factor This can trigger athlete psychology. Symptoms of anxiety and stress in the game such as anxiety, worry, tension, confusion, lack of or loss of concentration, and decreased confidence

in a match. This is one of the failure factors experienced by athletes, namely the lack of mental coaching for the athletes themselves.

Anxiety problems experienced by athletes vary such as problems caused by external factors, namely problems that come from outside the athlete, for example the presence of opponents, referees, spectators, and the environment. The problems that arise due to internal factors are problems that arise from within The athlete himself, for example, has emotional problems, motivation, intelligence, high anxiety, and excessive stress. All of these problems will certainly affect the athlete's achievement, but on this occasion one of the problems caused by internal factors will be taken, namely anxiety (Putratana & Hariyanto, 2022).

States that anxiety is a feeling of fear, anxiety or worry that his personality will be threatened. Meanwhile (Sukirno & Kurniawan, 2017) states that anxiety is a signal that awakens, warns of a threatening danger and allows a person to take action to overcome the threat. (Zulfiani & Sugiyono, 2020) explains that the term Anxiety (anxiety) is a subjective feeling in the form of worry and increases psychological tension. Anxiety arises due to fear of being judged negatively by thousands of spectators which is a threat to athletes' self-esteem, seen from the tendency of society to give positive assessments of athletes who win matches and tend to give negative ratings to athletes who lose. (Indah, 2015) states that the source of anxiety experienced by athletes can come from within the athlete and can also come from outside the athlete or the environment. (Maros & Juniar, 2016)

Anxiety caused by intrinsic factors, among others; bad appearance as a result of fear of failure, personality traits that are indeed anxious and lack of

competitive experience, while due to anxiety caused by extrinsic factors, including: opponents, spectators, friends, administrators, match venues, match facilities, equipment and demands from (Falaahudin & Sugiyanto, 2013). The types of anxiety disorders can be classified into several approaches. (Marsha & Wijaya, 2021) several types of anxiety disorders are described as follows:

1) Panic disorder is a disorder that is triggered by the emergence of one or two attacks or panic that is triggered by things that other people think are not extraordinary events. Agoraphobia is a condition in which a person feels unable or difficult to be either physically or psychologically to escape.
2) Other phobias are statements of feelings of anxiety or fear of something that is unclear, irrational, unrealistic.
3) Obsessive-compulsive is a thought that continuously pathologically arises from within a person, while compulsive is an action that is driven by impulses that are repeatedly carried out.
4) A generalized anxiety disorder characterized by excessive and chronic worry in the old term is called Free Floating Anxiety.

Based on the results of observations on students of the Bina Darma University sports education study program who will take part in the POMPROV (Provincial Student Sports Week) competition, currently there are still many athletes or teams with good physical, technical, and tactical qualities, but still cannot bring out their optimal abilities in the field. competition because of the high level of anxiety in athletes caused by intrinsic and extrinsic factors. Symptoms that arise in anxiety disorders include physical characteristics such as 1) headaches, 2) sweating a lot, 3) difficulty breathing, 4) feeling nervous, 5) restless, and 6) muscle tension. Players who can't handle non-technical things like this can certainly disrupt performance in matches. Players will think a lot about the things they will receive if they fail or experience defeat.

Based on the problems above, the researcher will measure the level of anxiety of athletes before and after the game by using an anxiety measuring instrument called HARS (Hamilton Anxiety Rating Scale). The HARS scale is a measurement of anxiety based on the appearance of symptoms in individuals who experience anxiety.

According to the HARS scale, there are 14 symptoms that appear in individuals who experience anxiety. Each item observed is given 5 levels of score between 0 to 4. The HARS scale was first used in 1959 which was introduced by Max Hamilton. The Hamilton Anxiety Rating Scale (HARS) in the assessment of anxiety consists of 14 items, including:

1) Restlessness, feelings of anxiety, bad feelings, fear of one's own thoughts, irritability.
2) Feeling tense, shaking, easily distracted and lethargic.
3) Fear: fear of the dark, of strangers, of living alone and of big animals.
4) Sleep disturbances, difficulty initiating sleep, awakening at night, restless sleep and nightmares.
5) Intelligence disorders: memory loss, forgetfulness and difficulty concentrating.
6) Depressed feelings: loss of interest, reduced enjoyment of hobbies, sadness, unpleasant feelings throughout the day.
7) Somatic symptoms: muscle pain and stiffness, grinding of teeth,

unstable voice and muscle twitching.

8) Sensory symptoms: prickling feeling, blurred vision, red and pale face and feeling weak.
9) Cardiovascular symptoms: tachycardia, pain in the chest, hardened pulse and sudden loss of heart rate.
10) Respiratory symptoms: feeling of pressure in the chest, feeling of suffocation, frequent deep breathing and feeling of shortness of breath.
11) Gastrointestinal symptoms: difficulty swallowing, constipation, weight loss, nausea and vomiting, stomach pain before and after eating, burning feeling in the stomach.
12) Urogenital symptoms: frequent urination, inability to hold urine, amenorrhea, weak erection or impotence.
13) Vegetative symptoms: dry mouth, easy sweating, red face, standing hair, dizziness or headache.
14) Behavior during the interview: restlessness, shaking fingers, frowning or frowning, tense face, increased muscle tone, short and rapid breathing. (Hardiyono, 2020)

The way to assess anxiety is to provide a value with the following categories:
0 = no symptoms at all
1 = mild / one of the symptoms present
2 = moderate / half of the symptoms present
3 = severe / more than of existing symptoms
4 = very severe / all symptoms present
Determination of the degree of anxiety by adding up the scores and items 1-14 with the following results:
1) score <14 = no anxiety
2) score 14-20 = mild anxiety
3) score 21-27 = moderate anxiety
4) score 28-41 = severe anxiety
5) score 42-56 = very severe panic/anxiety (Wulandari et al., 2019)

METHODS

In general, the research method is defined as a scientific way to obtain data with a specific purpose and use. According to (Aziz, 2016) The research method is basically a scientific way to obtain data with certain purposes and uses. This research method will use a quantitative descriptive method. The purpose of quantitative descriptive is to seek clear information about the certainty of the data obtained based on the data obtained from the number of digits calculated. While the research approach used is a survey. According to (Kumbara et al., 2019) population is a generalization area consisting of: objects/subjects that have certain qualities and characteristics determined by researchers to be studied and then drawn conclusions. The population in this study were athletes from Bina Darma University, totaling 89 people.

(Laka et al., 2018) states that the sample is part or representative of the population being studied. Sampling in this study used a saturated sampling technique. (Haruman, 2013) explains that saturated sampling is a sampling technique when all members of the population are used as samples. Another term for saturated sample is census, where all members of the population are sampled. Then the number of samples to be studied is 89 athletes from Bina Darma University. For more details, see the table below.

Table 1. Research Sample

Bina Darma University Athletes	18-20 Years old
Amount	89 People

The data obtained as individual scores from the results of the anxiety level questionnaire, were processed using statistical procedures to determine whether the hypothesis that had been proposed in this study could be accepted or rejected.

After all the data is collected, the next step is to analyze the data, so that the data can be drawn to a conclusion. The data analysis technique in this study uses the percentage formula (A. Muhajir Nasir, 2016). The calculation method of data analysis is to find the relative frequency of the percentage.

With the following formula:
P = F/n x 100%
Information :
P = Percentage
F = True value
n = Number of Samples

RESULT

The data collection tools and materials used in this study are standardized questionnaires, namely the HARS questionnaire which contains 14 statements that can measure the anxiety experienced by respondents, which is formulated in the Hamilton Anxiety Rating Scale (HARS). Scoring for the answers to each statement is given a value of 0: none (no symptoms at all) 1: mild (one symptom from the choices available) 2: moderate (half of the symptoms present) 3: severe (more than half of the symptoms) present) 4: very severe/panic (all symptoms present). Total score: less than 14 = no anxiety 14 – 20 = mild anxiety 21 – 27 = moderate anxiety 28 – 41 = severe anxiety 42 – 56 = very severe anxiety.

Table 2. Hamilton Anxiety Rating Scale (HARS) Results Before the Game

Scale	Categoty	Amount	Percentage (%)
Less Than 14	No Anxiety	13	14.61
14 – 20	Mild Anxiety	20	22.47
21 – 27	Moderate Anxiety	36	40.45
28 – 41	Severe Anxiety	20	22.47
42 – 56	Very Severe Anxiety	0	0
Total		**89**	**100**

Based on the table above, from the results of the calculation of the anxiety level of Bina Darma University athletes who took part in POMPROV in Palembang City, there were 5 categories, namely the no anxiety category there were 13 athletes (14.61%), the mild anxiety category had 20 athletes (22.47%), the moderate anxiety category was 36 athletes (40.45%), in the category of severe anxiety there are 20 athletes (22.47%) and the category of severe anxiety has 0 athletes (0%). For more details, see the diagram below.
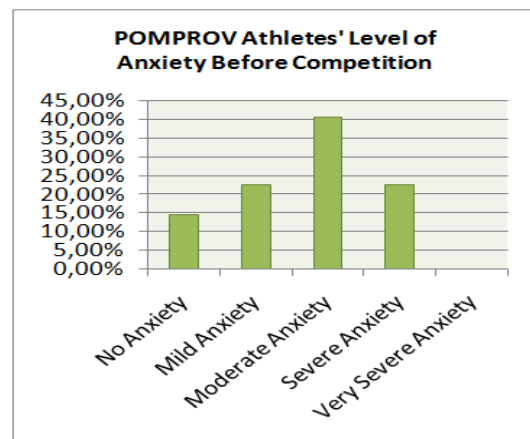

Figure 1. Anxiety Level Diagram

Table 3. Hamilton Anxiety Rating Scale (HARS) Results Before the Game

Skala	Kategori	Jumlah	Persentase (%)
Less Than 14	No Anxiety	24	26.97
14 – 20	Mild Anxiety	43	48.31
21 – 27	Moderate Anxiety	20	22.47
28 – 41	Severe Anxiety	2	2.25
42 – 56	Very Severe Anxiety	0	0
Total		89	100

Based on the table above, from the results of the calculation of the anxiety level of Bina Darma University athletes who took part in POMPROV in Palembang City, there were 5 categories, namely the no anxiety category, there were 24 athletes (26.97%), the mild anxiety category was 43 athletes (48.31%), the moderate anxiety category was 20. athletes (22.47%), the category of severe anxiety has 2 athletes (2.25%) and the category of severe anxiety has 0 athletes (0%). For more details, see the diagram below:
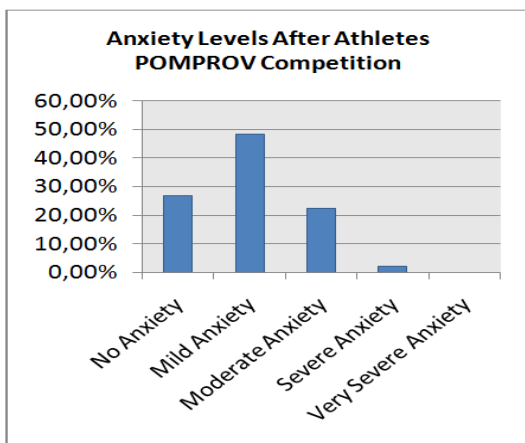

Figure 2. Anxiety Level Diagram

1) No Anxiety

Anxiety is common to everyone. However, anxiety is called a psychological disorder when anxiety prevents a person from living daily life and carrying out productive activities. in dealing with various situations and conditions.

2) Mild Anxiety

Associated with the tension experienced daily. The individual is still alert and his perception broadens, sharpens the senses. Can motivate individuals to learn and be able to solve problems effectively and generate growth and creativity.

3) Moderate Anxiety

Individuals focus only on the mind that is of concern, there is a narrowing of the field of perception, and can still do things with the direction of others.

4) Severe Anxiety

The field of individual perception is very narrow. His attention to detail is small and specific and can't think of anything else. All behaviors are intended to reduce anxiety and require a lot of prompting/direction to focus on other areas.

5) Severe Anxiety

Individuals lose self-control. Due to loss of control, they are unable to do anything even with orders. There is an increase in motor activity, reduced ability to relate to others, perceptual deviations and loss of rational thought, unable to function effectively. Usually accompanied by personality disorganization.

CONCLUSIONS

Based on the results of the study, and the discussion, it can be concluded that the level of anxiety (anxiety) of Bina Darma University athletes at POMPROV in Palembang from 89 athletes before the match who received the no anxiety category there were 13 athletes (14.61%), in the mild anxiety category there were 20 athletes (22.47 %), the category of moderate anxiety has 36 athletes (40.45%), the category of severe anxiety has 20 athletes (22.47%) and the category of severe anxiety has 0 athletes (0%). With these results, it can be concluded that the level of anxiety (anxiety) of Bina Darma University athletes at POMPROV in Palembang has a moderate anxiety category. Meanwhile, of the 89 athletes after the match who received the no anxiety category, there were 24 athletes (26.97%), in the mild anxiety category there were 43 athletes (48.31%), in the moderate anxiety category there were 20 athletes (22.47%), in the severe anxiety category there were 2 athletes (2.25). %) and the category of severe anxiety is 0 athletes (0%). With these results it can be concluded that the level of anxiety (anxiety) of Bina Darma University athletes at POMPROV in Palembang has a Mild anxiety category.

REFERENCES

A. Muhajir Nasir. (2016). Statistik Pendidikan. In Media Akademi (Issue February 2017). https://doi.org/10.31227/osf.io/judwx

Falaahudin, A., & Sugiyanto, F. (2013). Evaluasi Program Pembinaan Renang Di Klub Tirta Serayu, Tcs, Bumi Pala, Dezender, Spectrum Di Provinsi Jawa Tengah. Jurnal Keolahragaan, 1(1), 13–25. https://doi.org/10.21831/jk.v1i1.2342.

Ghorbanzadeh, B., & Bayar, P. A. (2013). Comparison of the Pre-Competition and Post-Competition Anxiety Levels of Taekwondo Athletes. Life Science Journal, 10(2), 5-10.

Hardiyono, B. (2020). Tingkat Kecemasan Sebelum Bertanding Dan Percaya Diri Pada Saat Bertanding Atlet Pelatda Pengprov Fpti Sumatera Selatan. Kinestetik, 4(1), 47–54. https://doi.org/10.33369/jk.v4i1.10399

Haruman, W. (2013). Pengaruh Terapi Musik Klasik Terhadap Penurunan Kecemasan Atlet Sebelum Menghadapi Pertandingan Universitas Pendidikan Indonesia. 7.

Indah, V. (2015). Tingkat Kecemasan (Anxiety) Atlet Dalam Mengikuti Pertandingan Olahraga. Jurnal Pengabdian Kepada Masyarakat, 21(79), 39–44.

Kumbara, H., Metra, Y., & Ilham, Z. (2019). Analisis Tingkat Kecemasan (Anxiety) Dalam Menghadapi Pertandingan Atlet Sepak Bola Kabupaten Banyuasin Pada Porprov 2017. Jurnal Ilmu Keolahragaan, 17(2), 28. https://doi.org/10.24114/jik.v17i2.12299

Laka, O., Widodo, D., & H, W. (2018). Hubungan hipertensi dengan tingkat kecemasan pada lansia di Posyandu Lansia Desa Banjarejo Kecamatan Ngantang Malang. Nursing News, 3(1), 22–32.

Marsha, A., & Wijaya, F. J. M. (2021). Analisis Tingkat Kecemasan Berlatih Di Masa Pandemi Covid 19 Pada Atlet Rugby Kalimantan Timur. Jurnal Prestasi Olahraga, 4(5), 113–118.

Mottaghi, M., Atarodi, A., & Rohani, Z. (2013). The relationship between coaches' and athletes' competitive anxiety, and their performance. Iranian journal of psychiatry and behavioral sciences, 7(2), 68.

Papacosta, E., Nassis, G. P., & Gleeson, M. (2016). Salivary hormones and anxiety in winners and losers of an international judo competition. Journal of sports sciences, 34(13), 1281-1287.

Putratana, B. D., & Hariyanto, E. (2022). Upaya Meningkatkan Keterampilan Teknik Dasar Tolak Peluru Gaya Menyamping dengan Menggunakan

Gaya Mengajar Guided Discovery di SMP Negeri 2 Gandusari Kabupaten Trenggalek. Sport Science and Health, 4(4), 305–312. https://doi.org/10.17977/um062v4i42022p305-312

Sukirno, S., & Kurniawan, M. R. (2017). Hubungan Panjang Lengan dan Kekuatan Otot Lengan Dengan Hasil Shooting Free Throw Pada Atlet Putra Klub Basket "Bangau" Palembang. Multilateral Jurnal Pendidikan Jasmani Dan Olahraga, 16(1), 50–58. https://doi.org/10.20527/multilateral.v16i1.3663

Wulandari, P., Sofitamia, A., & Kustriyani, M. (2019). The Effect of Guided Imagery to The Level of Anxiety of Trimester III Pregnant Woman in The Working Area of Mijen Health Center in Semarang City. Media Keperawatan Indonesia, 2(1), 29. https://doi.org/10.26714/mki.2.1.2019.29-37

Zulfiani, P. C., & Sugiyono, S. (2020).Developing an interactive learning multimedia basic competence for using facial care tools with technology in students of vocational education. Journal of Physics: Conference Series, 1700(1). https://doi.org/10.1088/1742-6596/1700/1/012089