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Relationship Between Mother's Anxiety Level and Children's Coronavirus (Covid-19) Vaccination Status School Age in Public Elementary School Cipageran Mandiri 2

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In this study, there is no conflict of interest.

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Abstract

Background: Anxiety is the psychological state of a person who is worried and afraid of something that has not happened yet and is a sign that helps the individual to prepare to take action in the face of a threat. The level of anxiety in mothers can affect vaccination status and contribute to the uneven distribution of children getting the COVID-19 vaccine. The COVID-19 vaccine target for older children's schools is 26.5 million, and the current COVID-19 vaccine achievement rate for school-age children is 15 million (56.6%) with complete vaccination status. This shows that 11.5 million children (43%) are still not fully vaccinated against COVID-19. One of the causes is maternal anxiety about the COVID-19 vaccine.

Objectives: This study was to identify the relationship between anxiety levels Mothers with COVID-19 vaccination status for school-age children at Public Elementary School Cipageran Mandiri 2.

Methods: analytical survey research methodology with cross sectional design, research sample a total of 237 respondents with simple stratified random sampling. Data collection techniques use questionnaires in the form of google forms. Data analysis with chi-square test statistical application.

Results:

The results showed that 65% of mothers did not experience anxiety about Covid-19 vaccination. The covid-19 vaccination status was obtained, and most had a complete covid-19 vaccination status of 73%. The results of statistical analysis showed that there was a relationship between the level of maternal anxiety and the status of Covid-19 vaccination in school-age children at Public Elementary School Cipageran Mandiri 2 with a value of $p = 0.000$.

Conclusion: COVID-19 vaccination status in children is related to maternal anxiety in responding to the importance or absence of the COVID-19 vaccine. This is because 27% of children still have not been vaccinated, where vaccination is mandatory to reduce COVID-19 morbidity and mortality.

Keywords: anxiety, school age, vaccination covid-19

Introduction

Children are the dream of the family and the successor of the nation. Mothers expect their children to grow and develop physically, mentally, and socially optimally. Children must receive attention and protection from all possibilities that can harm children. The age range for growth and development of children is the prenatal period (conception to birth), infancy-infancy (0-12 months old), early childhood toddlerhood (age 1-3 years), preschool period (age 3-6 years), and school period (6-18 years).¹

School-age children are an age that is vulnerable to experiencing various health problems.² School-age children are still dependent on their parents, and parents still fundamentally influence children.³ Children generally have a normal development pattern resulting from the interaction of many factors that influence child development. These factors are genetic factors and environmental factors including biophysical-psychosocial, which can inhibit and optimize child development.⁴ Children's health must receive attention by the Regulation of the Minister of Health of the Republic of Indonesia Number 25 of 2014 every child has the right to survival, growth, and development and is entitled to protection from violence and discrimination, so it is necessary to carry out child health efforts in an integrated, comprehensive and sustainable manner.⁵

Healthy children will generally grow according to their age, in contrast to children who are often sick, which will usually affect their growth and development. HL Bloom's classic theory put Forward by Henrik L. Blum states that 4 factors affect the degree of health in general successively, namely lifestyle (lifestyle), environment (social, economic, political, cultural), health services, and genetic (hereditary) factors. The cause of health problems in children is often the disease experienced by the child. Health problems that often occur in school-age children are generally related to individual and environmental health behaviors. These health problems that often occur are gastrointestinal infections such as diarrhea, and intestinal worms and acute respiratory infections (ARI) such as coughs, colds, sore throats, and shortness of breath respiratory tract infections which are currently of concern are COVID-19 respiratory tract infections that can threaten children's health.⁶

COVID-19 in Indonesia first appeared in March 2020 after it was found that 2 Depok residents were infected after interacting with Japanese citizens.⁷ COVID-19 disease is an infectious disease caused by a virus severe acute respiratory syndrome (SARS-CoV) COVID-19 is transmitted via droplets, namely water particles that are very small and usually come out when coughing or sneezing.⁶ WHO recorded confirmed cases of COVID-19 as of March 21 2022 in a total of 229 countries, namely 464,809,377, 12.8 million children have tested positive for COVID-19 since the start of the pandemic. Reports of total cases of COVID-19 in children as of March 17 reached 12,784,627, children representing 19.0% of all cases (12,784,627/67,233,212). The overall figure is 16,986 cases per 100,000 children in the population. During 3-17 March 2022, there was a <1% increase in the number of accumulated cases of COVID-19 children (73,621 cases added (12,711,006 becomes 12,784,627).⁸

The Indonesian Ministry of Health noted that as of March 21, 2022, confirmed cases of COVID-19 in Indonesia had increased to 5,967,182 since the first announcement in March 2020. Cases of COVID-19 infection in children in Indonesia are also increasing. The Indonesian Ministry of Health noted as of March 21, 2022, cases of COVID-19 in children aged 6-18 years were at 650,422 cases. The COVID-19 virus spread rapidly to various regions in Indonesia and even continues to mutate to form new variants as a form of survival. The newest variant that has been detected is an omicron variant known as variant B.1.1.529. WHO has classified the omicron variant as a VOC. Viruses are categorized as VOCs if they have the following conditions, have an increase in epidemiological transmission faster, have higher virulence, and reduce the effectiveness of health protocols, diagnostic tools, vaccines, and therapies.⁶

Vaccination is carried out not only for adults but on December 14 2021 the COVID-19 vaccine will begin to be given to children aged 6-11 years. Children of all ages are at risk for COVID-19 infection and severe disease manifestations. Children are also vulnerable to the downstream effects of COVID-19, including social isolation and disruption in education.⁶ The total target for childhood vaccines is 26.5 million children. Vaccination achievements for children aged 6-11 years from formal elementary school or madrasah education as well as non-formal education such as Islamic boarding schools or children with special needs as of March 25, 2022, reached 75.49% (19,928,370 children) primary COVID-19 vaccine dose 1, 56,52 % (14,920,202 children) primary COVID-19 vaccine dose 2, and 0.00% further dose (booster) COVID-19 vaccine. The vaccination rate for children in Indonesia has not reached 100% and is vaccination with a lower percentage than the percentage of vaccination for other groups (health workers, the elderly, public officials, vulnerable people, and the general public, and ages 12-17 years).⁶ Obstacles to the COVID-19 vaccination program are the level of knowledge and misinformation regarding COVID-19 and the COVID-19 vaccine which makes the community and mothers anxious and in the end, there is a negative response and refusal to vaccinate.⁷ One of the most common types of hoaxes and misinformation is related to the COVID-19 vaccine. The theory is circulating on many social media platforms, including vaccines containing microchips which will cause death, stroke, paralysis, and encephalitis or inflammation of the brain. The COVID-19 vaccine reportedly contains tracers, hazardous materials such as MSG, phenoxyethanol, aluminum, formalin, polysorbate, thimerosal, or mercury, as well as animal tissue and human diploid cells from the fetus. Several other hoaxes, such as news of injecting empty vaccines into children and vaccines that are harmful to children's organs, are caused by spikes in toxic proteins.

Anxiety and fear increased when the public received information about AEFI (Post-Immunization Follow-up Events) thereby reducing the motivation of mothers to vaccinate their children. Other causes such as the age factor where young people have better knowledge regarding COVID-19 and it is easy to find information from various sources⁹ and possible side effects after the vaccine.¹⁰ Anxiety condition psychological is someone who is worried and afraid of something that has not happened and is a signal that helps individuals to prepare to take action against threats.¹¹ Anxiety is an unpleasant emotional experience that comes from threatening situations, which is characterized by feelings of fear, worry, tension, nervousness, or other feelings that are not clear that are not necessarily happening.¹² Signs and symptoms when mothers experience anxiety in vaccinated children are usually characterized by increased perception and attention, alertness, tension, anxiety, focusing on important things, and setting aside other things, so that individuals experience selective attention, but can do something different. more focused. Mothers who cannot properly control and deal with the anxiety they experience can experience severe anxiety.¹³

The study regarding the relationship between anxiety and the availability of the COVID-19 vaccine shows that there is a relationship between anxiety and worry about co-19 vaccinations with a willingness to vaccinate. The vaccine availability rate reached 81.2%, but 48.1% still felt worried and were not ready to be vaccinated. Respondents felt anxious even though they already knew the program, benefits, and purpose of vaccination.¹⁴ Mothers' support plays a very important role in the successful implementation of child vaccination. Communities and mothers still need to vaccinate children to transition to a productive society that is safe from COVID-19. The role of health workers is also needed to help overcome the anxiety felt by mothers, such as by socializing and educating children about the co-19 vaccine. Health education can increase knowledge, and change attitudes and behavior.¹⁵ The role of the nurse is to be a motivator, advocate, communicator, and agent of change very necessary in producing the COVID-19 vaccination in this child. Preventing the emergence of negative stigma for COVID-19 patients motivates mothers and the community to vaccinate their children. The role of a good communicator is also needed in carrying out their role, nurses must be able to provide education and

communicate to the public regarding government health programs and invite them to be involved in these programs.

Preliminary studies were carried out in several elementary schools (SD) in northern Cimahi, namely Public Elementary School Cipageran Mandiri 1, Public Elementary School Cipageran Mandiri 2, and Public Elementary School Cipageran Mandiri 3. The results of the preliminary study regarding the achievement of COVID-19 vaccination for school-age children at Public Elementary School Cipageran Mandiri 1 namely 200 students had incomplete COVID-19 vaccination status out of a total of 1158 students, at Public Elementary School Cipageran Mandiri 2 with a population of 773 children, some students have incomplete COVID-19 vaccination status, namely 145 students and at Public Elementary School Cipageran Mandiri 3 there are 48 students who have incomplete COVID-19 vaccination status out of a total of 484 students. The vaccination status of the 3 elementary schools is data collected until March 2022. Based on the preliminary study above, the researcher chose to conduct the research at Public Elementary School Cipageran Mandiri 2 because these schools have the highest percentage of incomplete COVID-19 vaccination status, which allows for obstacles. the COVID-19 vaccination process, namely the level of anxiety felt by the mother.

Then a preliminary study was carried out on 10 mothers who had students at Public Elementary School Cipageran Mandiri 2 who had not been vaccinated 1 or 2 on March 28 2022 using the interview method. 10 out of 10 mothers don't take their toys out to be vaccinated, and 7 of them don't take them out because they are worried about the side effects of vaccination. The mother's anxiety is also marked by tense and anxious facial expressions. One of them, the mother did not allow it because of her co-morbidities. Two of them said their children were sick and could not attend the vaccination program and were reluctant to do follow-up programs because they were afraid of the side effects of COVID-19. Ten mothers said they knew the purpose of the vaccination program and understood that the program aimed to make their children immune to the COVID-19 virus. The mother obtained information about the COVID-19 vaccination through the Internet and television. The COVID-19 vaccination program in Indonesia has elicited various responses and obstacles, one of which is the anxiety felt by mothers so that mothers do not activate their children to be vaccinated. Based on the background above, researchers are interested in researching the relationship between maternal anxiety levels and the vaccination status of COVID-19 school-age children at Public Elementary School Cipageran Mandiri 2.

Methods

The research was conducted using a cross-sectional design with a quantitative approach. The population in this study were all mothers who had school-age children at Public Elementary School Cipageran Mandiri 2, totaling 581 people. The total sample of 237 respondents who had children with COVID-19 vaccination status was incomplete and complete. The selection of respondents uses a simple stratified random sampling technique from each class whose representatives are taken as samples. The instrument used in the anxiety level variable is a questionnaire Hamilton anxiety rating scale (HARS) which consists of 14 groups of anxiety symptoms that are described more specifically with the level of validity and reliability of 0.93 and 0.97. The instrument used to measure the COVID-19 vaccination status variable is a questionnaire based on the classification of the vaccination status of the Ministry of Health of the Republic of Indonesia. Data collection was carried out by researchers on 8-10 June 2022. This research was carried out online by filling out a questionnaire via Google form at Public Elementary School Cipageran Mandiri 2. Univariate analysis using frequency distribution and bivariate analysis with chi-square test. This research was approved by the Faculty of Health Science and Technology, University of Jenderal Achmad Yani Cimahi with number: ND/032/FITBes-Unjani/Kep-

Relationship Between Mother's Anxiety Level and Children's Coronavirus (Covid-19)
Vaccination Status School Age in Public Elementary School Cipageran Mandiri 2

S1/ V/2022. Researchers obtain the informed consent of respondents who are willing to participate in this study.

Results

This research was conducted on mothers who had school-age children on June 8-10 2022 by filling out the Google form at Public Elementary School Cipageran Mandiri 2. The number of samples in this study was 237 mothers. The results of this study are presented in the form of a frequency distribution table based on univariate analysis which aims to describe the character of the mother's anxiety level and the COVID-19 vaccination status of school-age children as well as bivariate analysis to see the relationship between the mother's anxiety level and the COVID-19 vaccination status of school-age children.

Table 1. Frequency Distribution of Mothers' Anxiety Levels About COVID-19 Vaccination for School-age Children at Public Elementary School Cipageran Mandiri 2

Anxiety level	Frequency (n)	Percentage (%)
No worries	154	65
Mild anxiety	43	18
Moderate anxiety	19	8
Severe anxiety	21	9
Total	237	100

Source: Primary data (2022)

Based on [Table 1](#), shows that out of 237 respondents, 154 respondents (65%) did not experience anxiety, and 21 respondents (9%) experienced severe anxiety.

Table 2. Distribution of the Frequency of the COVID-19 Vaccination Status of School-age children at Public Elementary School Cipageran Mandiri 2

Vaccination status	Frequency (n)	Percentage (%)
Incomplete	65	27
Complete	172	73
Total	237	100

Source: Primary data (2022)

Based on [Table 2](#), shows that out of 237 respondents, 172 respondents (73%) had complete COVID-19 vaccination status.

Table 3. Relationship between Mother's Anxiety Level and COVID-19 Vaccination Status for School-age Children at Public Elementary School Cipageran Mandiri 2

Anxiety Level	COVID-19 Vaccination Status				Total		P-Value
	Incomplete		Complete		N	%	
	N	%	N	%			
No worries	19	12%	135	88%	154	100%	0.001
Mild anxiety	21	49%	22	51%	43	100%	
Moderate anxiety	10	53%	9	47%	19	100%	
Severe anxiety	15	71%	6	29%	21	100%	
Total	65	27%	172	73%	237	100%	

Source: Primary data (2022)

Based on [Table 3](#) shows that out of 154 respondents, there were 135 respondents (88%) did not experience anxiety with complete COVID-19 vaccination status, and of 21

respondents there were 15 respondents (71%) experienced severe anxiety with incomplete COVID-19 vaccination status. The results of statistical tests using chi-square obtained p-value $(0.000) < \alpha (0.05)$. This means that H_0 is rejected and there is a relationship between the mother's anxiety level and the status of the COVID-19 vaccination of school-age children at Public Elementary School Cipageran Mandiri 2 in 2022.

Discussion

Researchers analyzed several factors that might support mothers not experiencing anxiety, including that respondents had received a lot of information through various media related to the COVID-19 vaccination including programs, benefits, and objectives of giving the COVID-19 vaccine. In addition to information from the media and the task force, efforts to clarify hoaxes have also been intensively carried out by the government, this has an impact on the mother's level of anxiety so that wrong information can be neutralized, and the mother does not feel guilty, anxious to get vaccinated, their child. The information obtained has increased mothers' awareness that the COVID-19 vaccination is important to increase children's immune systems, especially during the COVID-19 pandemic. This is by the theory of Lin, et al. (2020) where health education can increase knowledge and change attitudes and behavior. fear of own thoughts, irritability, or irritability), feelings of tension, respiratory symptoms (shortness of breath/chest pressure, feeling of shortness of breath, frequent deep breathing, shortness of breath/shortness of breath), feelings of fear, anxiety, and experiencing autonomic symptoms (dry mouth, flushed face, pale face, frequent sweating, dizziness, head feels heavy, feels tense, hair feels tense).¹⁵

According to the researcher's analysis, this happened because there was still a lack of information obtained by respondents, either from health workers or the mass media, as well as the lack of effective coping strategies. According to Miranda (2013), a coping strategy is a way or method used by everyone to overcome and control situations and problems experienced and seen as obstacles, or challenges that are painful, and which are detrimental threats. It can be concluded that coping strategies are efforts carried out by individuals to change cognition and behavior that threaten them both physically and psychologically. This shows that the higher the mother's level of anxiety, the lower or worse the coping mechanism will be.¹⁶

It can be concluded by researchers that anxiety in mothers can be influenced by several factors including information owned by mothers, level of knowledge, efforts to clarify hoaxes carried out by the government, level of education, and efforts to adjust (coping strategies) of mothers.

COVID-19 Vaccination Status For School-Age Children At Public Elementary School Cipageran Mandiri 2

The COVID-19 vaccination itself is the process of introducing the inactivated Coronavirus (SARS-CoV-2) into the body as an effort to stimulate antibodies so that it is hoped that it will be immune to COVID-19. COVID-19 vaccination aims to reduce transmission/ transmission from COVID-19, reduce morbidity and mortality due to COVID-19, increase people's immunity, and protect people from COVID-19 so that people can be socially and economically productive. The recommended COVID-19 vaccination for school-age children includes the primary COVID-19 vaccination which is the primary vaccination dose 1 and the primary vaccination dose 2. The status of the COVID-19 vaccination for school-age children according to the Ministry of Health (2022) is the status of the complete COVID-19 vaccination, Vaccination status is said to be complete if you have received the primary vaccination dose 1 and dose 2 and the status of the COVID-19 vaccination is incomplete if you have not received the vaccination or only received the primary vaccination dose 1.¹⁶

According to the researcher's analysis, the high percentage of school-age children who have complete COVID-19 vaccination status is probably due to the low level of

anxiety experienced by mothers so that motivation arises to vaccinate children against COVID-19 and mother's knowledge is getting better regarding information about COVID-19. The decreasing level of maternal anxiety is caused by more and more information related to the COVID-19 vaccination, as well as the government's increasingly intensive efforts to clarify hoaxes that are being spread. Government regulations requiring children to have complete COVID-19 vaccination status so they can carry out offline and travel learning as well as experiences shared by others can also increase mothers' motivation to vaccinate school-age children. The results of the research related to the COVID-19 vaccination status of school-age children at Public Elementary School Cipageran Mandiri 2 which have been carried out by researchers are by the vaccination status data owned by the school,

These results are in line with research conducted by (Lazarus et al., 2021), concerning the potential for receiving the COVID-19 vaccine in 13,426 individuals randomly selected in 19 countries, as many as 71.5% answered that they were willing to vaccinate the COVID-19 vaccine if proven safe and effective.¹⁷ According to Lazarus et al., (2021), individuals will have a high level of confidence in vaccines, after they obtain information from the government.¹⁷ Accurate information received by the public from reliable sources such as information from the government will increase the willingness to get vaccines carried out by the community, therefore it is necessary to continue to improve health education in the community to increase knowledge, attitudes, and behavior so that the community shows concrete action to immediately complete COVID-19 vaccination status in children. This is reinforced by the theory of Lin, et al. (2020) which states that health education can increase knowledge, and change attitudes and behavior (good knowledge will change the behavior of respondents so that they are willing to be vaccinated and have complete COVID-19 vaccination status.¹⁵

The results of this study are also supported by research conducted by Putri et al., (2021) regarding public anxiety about co-19 vaccination.¹³ This study discusses the relationship between willingness to vaccinate and respondents' anxiety. In this study using bivariate analysis, it was found that almost all of the respondents (81.2%) were willing to receive the COVID-19 vaccine. Achievement of incomplete COVID-19 vaccination status needs to be pursued by maximizing health education and approaches regarding the COVID-19 vaccination program for school-age children so that children have a good immune system against the COVID-19 virus.

The Relationship Between The Mother's Anxiety Level And The COVID-19 Vaccination Status Of School-Age Children At Public Elementary School Cipageran Mandiri 2

Based on the results of statistical tests using the Chi-Square test by looking at the Pearson Chi-Square, the results obtained were Asymptotic Significance (2- sided) 0.000 <(0.05), which indicated a significant relationship between the mother's anxiety level and the status of COVID-19 vaccination in children aged school with a degree of relationship that is moderate correlation and the relationship is negative. The results were obtained because based on the analysis that has been carried out, the increasing anxiety in a mother will affect the decrease in the number of children with vaccination status.

The results of this study are in line with research conducted by Moccia et al., (2021) where anxiety influences perceptions of health and factors related to vaccination, this may be related to the wealth of information received. Such anxiety is associated with a lower intention to be vaccinated. Complete and comprehensive information can lead to positive perceptions, relieve anxiety and motivate to receive the vaccine; conversely, inaccurate information that appears in the community creates negative perceptions so that people feel anxious and afraid to vaccinate against COVID-19.¹⁸ These results are also in line with research conducted by Putri et al., (2021) this study discussed concerns/anxiety and willingness to get the COVID-19 vaccine with a p-value of 0.001. The study stated that

respondents who were willing to be vaccinated came from a group that did not experience worry/anxiety and had good knowledge about the co-19 vaccine compared to those who experienced concern/anxiety about the co-19 vaccine.¹³

According to Kaplan and Sadock (2010), one of the factors causing anxiety is experience where a person's experience greatly influences knowledge, the more one's experience regarding something, the more one's knowledge of it will increase. The knowledge factor also influences the respondent's anxiety level. Respondents who do not know about the program, benefits, and goals of the COVID-19 vaccine may experience anxiety and are not willing to vaccinate against COVID-19. Education and information also affect where when a mother has a higher education it will be easier to identify stressors within herself and from outside herself and form opinions based on something she knows.¹⁹

Sumarni, S (2019) shows that there is a relationship between a mother's anxiety and giving vaccines to children Mothers are considered as one of the parties who are responsible for making decisions to vaccinate children with COVID-19.²⁰ The existence of awareness, information, and effective coping will motivate mothers to do vaccines so that children are protected from the virus, one of the efforts that can be made is by carrying out a complete COVID-19 vaccination as recommended by the Ministry of Health. The status of the COVID-19 vaccination is declared complete when the child gets dose 1 and dose 2 of the COVID-19 vaccination. This shows that there is a significant relationship between the mother's level of anxiety about co-19 vaccination and behavior and attitudes in carrying out co-19 vaccinations for her child. The higher the mother's anxiety level, the lower the school-age children's COVID-19 vaccination status, and the lower the mother's anxiety level, the higher the school-age children's COVID-19 vaccination status.

Research Limitations

Data collection in this study used a Google Form questionnaire so that it could not directly observe respondents' behavior when filling out questionnaires such as facial expressions, gestures, and others, so researchers did not know which respondents were still confused or not about each item of the questionnaire question asked. Thus the correctness of filling out this questionnaire is greatly influenced by the honesty and understanding of respondents to each question item. At Data collection of children's Covid-19 vaccination status does not provide physical evidence

Conclusion

The results of the research data analysis it w, as concluded that maternal anxiety has a reasonably strong relationship with the status of COVID-19 vaccination in school-age children at Public Elementary School Cipageran Mandiri 2. The mother's anxiety is influenced by the mother's lack of knowledge about COVID-19 vaccination and also many hoax news circulating in the community. Mothers play an important role in taking preventive measures against children's health by vaccinating so that children have sound immune systems during the co-19 pandemic.

COVID-19 vaccination status in children is related to maternal anxiety in responding to the importance or absence of the COVID-19 vaccine. This is because 27% of children still have not been vaccinated, where vaccination is mandatory to reduce COVID-19 morbidity and mortality. To improve children's vaccine status, it is necessary to analyze factors causing parents who do not understand the importance of the COVID-19 vaccine given to children.

Conflict of Interest Declaration

In this study, there is no conflict of interest.

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Relationship Between Mother's Anxiety Level and Children's Coronavirus (Covid-19)
Vaccination Status School Age in Public Elementary School Cipageran Mandiri 2

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