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How People Deal With Covid-19: In Terms Of Coping And Moral Panic

Uswatun Hasanah[1]* , Elmanora[1] , Vania Zulfa[1] , Mirdat Silitonga[2]

[1]Family Science, Universitas Negeri Jakarta, Indonesia

[2]National population and family planning board, Indonesia

uswatun-hasanah@unj.ac.id (UswatunHasanah)

elmanora@unj.ac.id (Elmanora)

vaniazulfa@unj.ac.id (Vania zulfa)

mirdat.silitonga@bkkbn.go.id (MirdatSilitonga)

ABSTRACT:

This study's goal is to see how the community copes with the Pandemic's effects. 1038 people in the COVID-91 red zone filled out the online survey questionnaire. Both the modified coping and moral panic questionnaires (Folkman & Lazarus, 1988) were completed by all participants. According to the findings of this study, eight coping mechanisms were discovered, including problem-solving plans, seeking social support, and isolating yourself from the situation. Planful problem solving (r: -0291; p: 0000), social support (r: -0215; p: 0000), distancing (r: -0270); self-control (r: -0327; p: 0000), positive reassurance (r: -0211; p: 0000) and self-control (r: 0327) are six coping styles that are negatively correlated with moral panic (r: -0,408; p: 0,000). Confrontive coping (r: 0,122; p: 0,000) and escape-avoidance coping are two coping styles that correlate with moral panic (r: 0,122; p: 0,000). (r: 0,196; p: 000) Not reacting aggressively and excessively is the best way to avoid panic. Be wary, but not terrified.

Keywords: COVID-19; moral panic, strategy coping

INTRODUCTION

W.H.O. declared a public health emergency on 30 January 2020 after 34 Chinese regions reported illness and total cases exceeded 2003's SARS (Severe Acute Respiratory Syndrome) cases (SARS). Wuhan City (Hubei Province) seafood market is where the outbreak is believed to have started at the end of December 2019. Within and outside Wuhan, the number of reported cases has risen precipitously, with the disease now being found in countries all over the world. The WHO has classified COVID-19 as a global epidemic. (Cucinotta&Vanelli, 2020).

Pandemics are large-scale outbreaks of a new disease that affect a large number of people all over the world at once (WHO, 2010). Indonesian scientists discovered COVID-19 in the beginning of March 2019. Because of this, COVID-19 received a lot of press coverage and drew both positive and negative reactions from the general public. One response to the community is for there to be a moral panic to occur. in Cohen's 1972 book "As he states in "Folk Devils and Moral Panic: The Creation of the Mods and Rockers," "a moral panic resulted from the mass media misrepresenting British youth culture in the 1960s., leading to a generalised fear of rebelliousness and anti-authoritarianism (Parker, 2014). Moral panic occurs when a large number of people are concerned that crime poses a threat to public order (Cohen, 1972). Whenever a scenario looks to pose a danger to society's ideals or interests, it might cause a moral panic in the people around you. For instance, fear of predatory paedophiles abducting children, or the kidnapping of neighbourhood children, are all examples of moral panic. Other examples include the threat of health problems. Several centuries have passed since people first became concerned about public health and panic spread. When they first emerged, AIDS and other deadly diseases such as Ebola, Zika, and SARS were dreadful. Cohen's ideas about "people's devils" and epidemics can be compared because of their similar roles in the spread of panic and mass fear. WHO has classified COVID-19 as a pandemic., which sparked a wave of moral panic. The radical spread of information and the apathy of policymakers are the parameters of moral panic, according to David et al. (2011). The media can contribute to the spread of moral panic (2010).

Because of the presence of COVID-19, the community may experience moral panic if the situation is not handled correctly and no vaccine has been discovered (The Guardian, 2020). COVID-19 has an effect on the patient's physical as well as psychological well-being. Because of the increasing number of cases being reported everyday from various nations, COVID-19 is receiving more and more media attention on a global scale.Depression, anxiety, and panic disorder are among the psychological issues associated with the public health crisis. (Wang et al., 2020). According to the President of Indonesia, he intentionally withheld information about COVID-19 to keep the community calm (The Jakarta Post, 2020). With so much media attention being paid to COVID-19, people are even more afraid now.

The public's psychological and physical reaction to infectious disease risks may be influenced by media coverage of a pandemic.(Tang et al. 2018; Rodin et al. 2019). Earlier studies have shown that during an outbreak, a person may experience anxiety and fear, feel helpless, or blame someone else for getting sick and trigger mental disorders (Hall et al. 1995).

When someone is quarantined because they are ill, they may feel guilty or shamed. Studies show that being under a lot of psychological stress while in quarantine can lead to more severe symptoms of stress disorder, including depression (Hawryluck, 2004). A lack of trust in government, disease transmission, and health care systems could contribute to a public health crisis. Many people suffer financial losses and job losses due to the shutdown of government services and the demise of economically destructive industries, which exacerbates the negative emotions already experienced by individuals (Bortel et al. 2016).

A person's fear of contracting the disease can change their behaviour and social interactions with others, especially if they suffer from depression or anxiety disorders. The way in which people's emotions are linked to outbreak prevention behaviour has also been studied. People who have not been infected with SARS, according to Leung et al. (2003)'s findings, have a high level of fear of transmission and therefore take numerous precautions to avoid getting sick. Frustration and a sense of helplessness can lead people to try methods or treatments that aren't supported by research or are harmful to their health in the first place (Leung et al. 2003).

COVID-19 is a global pandemic that has made its way to Indonesia, where it has been found. All Indonesian provinces have been hit by the COVID-19 Pandemic. This worries many people, especially those who are close to their families. Concern is a healthy emotion, but it can cause social problems if it leads to moral panic. When people are in a state of moral panic, they isolate those in their families who have been affected by COVID-19 or who have died as a result, and some refuse to attend the funeral of a victim who died as a result of COVID-19. Examples abound. Concerns have also been raised about the treatment of COVID-19 patients by medical personnel who have been rejected. There are greater rates of sadness and anxiety among health care workers who are on the front lines while an epidemic is occurring., as well as being emotionally affected and traumatised (McAlonan et al. 2007). This is something that bothers almost everyone. Not only in social situations, moral panic can impair one's immune system. According to Ahmed et al. (2018), during the 2009 Swine Flu epidemic and the 2014 Ebola outbreak, Twitter users reported feeling moral panic as a result of the widespread media coverage.

A slew of new issues were raised by the COVID-19 outbreak, including those affecting the community as a whole as well as individual families.A panic-buying frenzy erupted when President Joko Widodo revealed that two Indonesians had tested positive for COVID-19. Because of the widespread fear sparked by COVID-19, supplies were scarce and prices

skyrocketed. People and families can be terrified when problems arise that are difficult to solve.

Each family needs to put more effort into resolving various issues in order to overcome anxiety. This necessitates that a coping strategy be developed by the family (Ostlund& Persson, 2014). Friedman (1998) states that coping with families is a positive behavioural response that families use to solve a problem or reduce stress as a result of a specific event. Effective coping strategies are expected from families as part of their role in problem solving. Having a strong family will have a positive effect on how well everyone functions (Sheidow et al. 2014).

One way to reduce moral panic is to develop a coping strategy. Coping strategies have been shown to be effective in dealing with stress, according to Sharmila (2016). Anxiety and depression are side effects of having too much fear. The coping strategy of an individual has a significant impact on their psychological well-being. A person's quality of life improves when they use a coping strategy. the quality of life of Malaysian entrepreneurs is significantly affected by using the problem focus coping strategy, say Jurji et al. (2018). This shows that the better a coping strategy is, the better the family life will be. Resolving strategies are designed for overcoming difficult or burdensome situations or demands that are perceived as pressing. People's coping resources have an impact on the problem-solving strategies they employ.

Lazarus and Folkman (1984), for example, advocated for the use of a coping method. Coping methods, according to Lazarus and Folkman (1984), may be broken down into two groups: problem-focused and emotion-focused. Using an issue-focused coping strategy, you take steps to address the problem. In situations where people believe they can still control and solve their problem, or believe they have the resources to alter the course of events, they will engage in this behaviour. Rather than addressing stressors head-on, an emotion-focused coping strategy focuses on changing the function of emotions. When people feel helpless to change a dire situation, coping strategies that focus on emotions are employed. As a result, they must accept their current situation because their resources are insufficient to overcome it.

Stress has both physiological and psychological effects, according to Lazarus and Folkman (1984). People are not going to stand by and do nothing when this negative effect is allowed to continue. Coping strategies refer to specific actions taken by an individual. Cultural background, problem-solving experience, environmental factors, personality, self-concept, and other factors all have an impact on a person's ability to solve problems when it comes to

coping strategies. A coping strategy aims to improve one's quality of life by reducing or managing conflicts.

According to the above, the goal of this research is to discover the most effective coping strategy for preventing moral panic. This study's findings should serve as a starting point for developing the best strategy for dealing with COVID-19. Figure 1 depicts the study's conceptual framework.
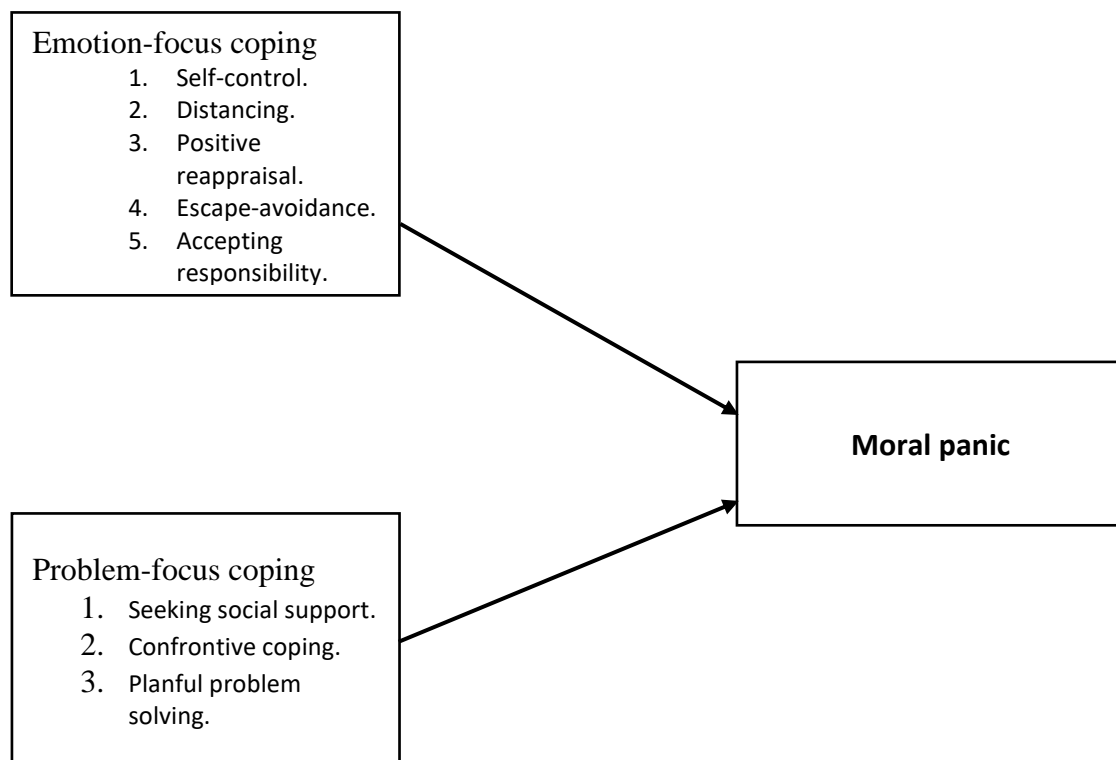
Emotion-focus coping
1. Self-control.
2. Distancing.
3. Positive reappraisal.
4. Escape-avoidance.
5. Accepting responsibility.

Moral panic

Problem-focus coping
1. Seeking social support.
2. Confrontive coping.
3. Planful problem solving.

Fig. 1 Theframework of Study

METHOD

Participants

There were 1038 people in the study's sampleliving in the COVID-19 red zone in Jakarta, Bogor, Depok, Tangerang, and Bekasi-Indonesia, with226 (21.80%) males and 812 (78.20%) females. Participants ranged in age from 24 to 64. (M = 24.80 SD = 9.72). While 657 (63.30%) had only completed high school, only 381 (36.70%) had earned graduate degrees. 4.31 people is the average family size. (Table 1).

Data Collection Tools

Moral Panic

Cohen's theory sparked the development of instruments of moral panic (1972). In this study, moral panic is defined as a widespread fear caused by the presence of COVID-19. There are 19 items in the moral panic category. This is converted to a five-point Likert scale. (the distance between strong disagreement and strong agreement is measured on a scale of one to five).

Table 1. Participant characteristics as described in descriptive statistics

characteristics	Category	N	%	M	SD
Gender	Female	812	78.20		
	Male	226	21.80		
Education Level	Undergraduate	657	63.30		
	Graduate	381	36.70		
Age (years)	18-40	929	89.50		
	41-60	107	10.30	24.76	9.72
	> 60	2	0.20		
Number of family members (person)	≤ 4	606	58.40		
	5-7	406	39.10	4.31	1.44
	≥8	26	2,50		

Coping strategy

Instruments for coping strategies were developed by modifying Lazarus and Folkman methods (1984). In this study, a coping strategy is defined as a response or action taken by an individual when exposed to COVID-19 in order to overcome the negative physiological or psychological effects. There are up to twenty statement items for coping methods, each with a distinct component, namely: emotion-focused coping andproblem-focused coping. This data is transformed to a 5-point Likert scale. (ranging from 1 (strongly disagree) to 5 (strongly agree).

The Personal Information Form

Participants were asked to fill out the form with demographic data. To collect data, participants were given questions about their gender, education level, age, and the number of family members they had..

Collecting and Analyzing Data

The study's data collection instrument was an online questionnaire distributed to volunteers (From March through April 2020, Google form). The questionnaire took an average of 10 to 15 minutes to complete. The collected coping strategy and moral panic are then processed. Each variable's data is put together to get a total score. In addition, the total score is transformed into an index. Following that, the research variables are divided into three categories: low (index 50.00), moderate (index 50.01-75.00), and high (index > 75.01). The categorization results based on this index will be analyzed to get a picture of the coping strategy and moral panic in the face of Pandemic COVID-19. The descriptive and inferential statistics were used to analyze the research data. Each research variable's minimum, maximum, average, and standard deviation values were calculated using descriptive statistics. We investigated the relationship between coping strategies and moral panic using inferential statistics in SPSS.

RESULT

Descriptive statistics of coping strategy

Problem-focus coping

Problem-focus Coping is an action taken by an individual to resolve a problem. Individuals will engage in this behaviour if they believe the problem is still manageable and solvable, or if they believe their personal resources can alter the situation. Three indicators serve as a guide for coping strategies:seeking social support, planned problem solving, andconfrontive coping. According to the detailed test results, the average for planful problem solving was 73.57, with only 13.50 percent falling into the low category and 86.70 percent falling into the moderate or high categories.

While the average for confrontive coping was 21.11, the majority of participants scored in the low range (92.30 percent). As a result, quite a few participants encountered difficulties coping with COVID-19. The final indicator of the problem-focused coping dimension is the desire for social support. The detailed test results indicated that the average number of people seeking social assistance was 82.61, with more than half falling into the high category (68.80 percent). Many COVID-19 participants seek genuine and/or emotional support when interacting with them (Table 2).

Table 2. Distribution of dimension categories of coping strategy, average, standard deviation, and minimum-maximum.

Category	Problem-focus coping					
	Playful Problem Solving		Confrontive Coping		Seeking Social Support	
	n	%	n	%	n	%
Low (0.00-50.00)	140	13.50	958	92.30	121	11.70
Moderate(50.01-75.00)	476	45.90	63	6.10	203	19.60
High (75.01-100.0)	422	40.70	17	1.60	714	68.80
Total	1038	100.0	1038	100.0	1038	100.0
M ± SD	73.57±17.07		21.11±18.95		82.61±20.92	
Min-Max	16.66-100.0		00.00-100.0		00.00-100.0	

Emotion-focus coping

Emotion-focus In order to cope, a person tries to change the way his or her emotions work without attempting to alter the stressor. In situations where people feel helpless to change a pressing situation and must accept the situation because their resources are insufficient to overcome it, coping strategies based on emotions are utilised Emotions are the focus of the coping strategy, which includes five indicators: self-control;distancing;positive reappraisal; not running away; and accepting responsibility. The average distance was found to be 76.01 feet, with more than half of those who took the test (55.70 percent) falling into the "high" category. Most participants in the study had high self-control scores, with the average score being 87.07. (86.10 percent). Participants were able to control their feelings and actions when confronted with COVID-19, according to these findings.

There were 74.27 accepted responsibility on average across all tests, with 52.30 percent scoring in the high range. In dealing with COVID-19, participants can accept responsibility quite well, according to these findings. Over half (67.00 percent) of the test subjects failed to avoid being captured. Using personal development and religious matters as a focus, positive reappraisal tries to infuse life with new meaning. Over half (59.20 percent) of the test subjects had a positive reappraisal, with the average being 51.63. These results show that the participants' positive reappraisal was lacking.

Table3. Distribution of dimension categories of coping strategy, average, standard deviation, and minimum-maximum.

Category	Emotion-focus coping

	Distancing		Self-Control		Accepting Responsibility		Escape-Avoidance		Positive Reappraisal	
	n	%	n	%	n	%	n	%	n	%
Low (0.00-50.00)	216	20.80	16	1.50	222	21.40	695	67.00	614	59.20
Moderate (50.01-75.00)	244	23.50	128	12.30	273	26.30	236	22.70	205	19.70
High (75.01-100.0)	578	55.70	894	86.10	543	52.30	107	10.30	2019	21.10
Total	1038	100.0	1038	100.0	1038	100.0	1038	100.0	1038	100.0
M ± SD	76.01±21.47		87.07±13.99		74.27±19.48		40.22±24.11		51,63±27.72	
Min-Max	00.00-100.0		11.11-100.0		00.00-100.0		00.00-100.0		00.00-100.0	

Descriptive statistics of moral panic

Moral panic is a widespread fear caused by the presence of COVID-19. The moral panic that occurs in participants is panic buying, excessive news dissemination, and fear of doctors, nurses, and families of COVID-19 patients. Detailed test results revealed that the average level of moral panic was 49.01, with more than half (54.70 percent) falling into the low category. While 5.40 percent are in the high category, 39.90 percent are in the medium category.

Table 4 Distribution of moral panic, average, standard deviation, and minimum-maximum.

Category	Moral panic	
	n	%
Low (0.00-50.00)	568	54.70
Moderate (50.01-75.00)	414	39.90
High (75.01-100.0)	56	5.40
Total	1038	100.0
M ± SD	49.01±15.47	
Min-Max	14.03-98.24	

Correlation Analysis

According to the results of a Spearman's rank correlation analysis conducted with SPSS, the eight indicators are strongly linked to moral panic. Between planned issue solutions and moral panic, there is a strong negative relationship(r = -0.291, p = 0.000). As a result, people are less likely to experience moral panic when they have better problem-solving strategies in place. Responding to moral panic in a confrontational way increases your risk of confrontational coping. Moral panic grows in direct proportion to how much confrontive coping an individual uses. Social support was significantly inversely associated with moral panic (p = 0.000) when people turned to each other. As a result, as more people seek out social support, moral panic decreases. To put it another way, distancing oneself from others is significantly associated with moral panic (r=-0.270, p=0.000). As a result, the moral panic grows in direct proportion to an individual's level of distance from the situation.

Table 5. Information about the relationships between dimensions of coping strategy with moral panic

Correlation Coefficient	
Variable	Moral Panic
Problem-focused coping	
Planful Problem Solving	-0,291***
Confrontive Coping	0,122***
Seeking Social Support	-0,215***
Emotion-focused coping	
Distancing	-0,270***
Self-Control	-0,327***
Accepting Responsibility	-0,211***
Escape-Avoidance	0,196***
Positive Reappraisal	-0,408***

Notes **significancep≤ 0,01; ***significancep≤ 0,000

Moral panic was shown to be strongly associated with self-control. (r = -327, p 0.000). This means that moral panic increases with lowered self-control. An important relationship exists between accepting responsibility and moral panic (p = 0.000): the inverse is true. As a result,

the less one accepts responsibility, the greater the sense of moral panic becomes. There was a strong correlation between avoiding escape and moral panic ($r = 0.196$, $p = 0.000$) The more people practise escape-avoidance, the greater the moral panic will become. Positive reappraisal is significantly harmed by moral panic ($r = -0,406$, $p = 0.000$). In other words, the

Table 6. Information about the Determinants of Moral Panic

Determinant of Coefficient

Variable	Moral Panic
Problem-focused coping	
Playful Problem Solving	8,4%
Confrontive Coping	1,4%
Seeking Social Support	4,6%
Emotion-focused coping	
Distancing	7,7%
Self-Control	10,6%
Accepting Responsibility	4,4%
Escape-Avoidance	4%

less one accepts responsibility, the greater the feeling of moral panic (Table 5). Reappraisal accounts for 20%, self-control accounts for 10%, and positive coping accounts for 1% of the factors that determine moral panic.(Table 6).

Positive Reappraisal	20%

DISCUSSION

Coping methods developed by Lazarus and Folkman and utilized in this research include problem-focused coping and emotional-focused coping(1984). Coping strategies that focus on problems help people avoid or lessen the effects of stressors, whereas strategies that focus on emotions help people cope better with stress. Stress may be reduced by using techniques like Emotion-focused coping and Problem-focused coping, according to research. (Thoits 1995; Ek et al. 2008).

Problem-focused coping behaviours include proactive confrontive coping, problem solving, and seeking out social support. According to the findings of this research, deliberate problem solving is the most important determinant of ethical panic. Moral panic has the opposite relationship to planned problem solving. An analytical approach to dealing with a question is part of a plan to solve problems calmly and carefully. These findings suggest that people deal with COVID-19 in a calm and cautious manner, while also employing a reasonable systemic approach. Focusing on planful problem solving means making plans for how you will survive in the event of a pandemic or changing your lifestyle to be more environmentally friendly and healthier.

Seeking help from others is the most reliable indicator of moral panic, even after deliberate problem-solving. Moral panic has the opposite relationship to asking for help from the government. Social support is a way to get help from others. This help can come in the form of information as well as physical and emotional support. In order to cope with COVID-19, people often turn to their friends, family, and coworkers for assistance. Alonso-Tapia et al. (2016) found that people use coping strategies like asking for help to solve problems involving those closest to them. This study's findings support those findings. The most common coping strategy is to turn to friends and family for guidance and support. When it comes to coping with problems, using social supportand community resources has been found to be effective by others (Padalia et al. 2007; Marcias et al. 2013).

The least important determinant factor is Confrontive Coping, which has a positive relationship with moral panic. Responding aggressively to changing circumstances shows hatred and risk-taking and is known as confrontive coping. Numerous people were forced to cope with COVID-19 as a result. The majority of people who use Confrontive Coping do so by blaming others for

their COVID-19-related problems, such as the government's tardiness in handling the crisis, panic buying, and/or stockpiling goods, which leads to shortages and an increase in prices. According to Nicomedes and Avila (2020), anxiety leads to egoism like panic buying and other forms of capitalism.

Indicators of emotional-focused coping come in a wide range of shapes and sizes. Distancing, accepting responsibility,self-control, positive reappraisal, and escape-avoidance are all used in this study as indicators of Emotion-Focused Coping. There is a negative correlation between moral panic and positive reappraisal, according to the findings of this study. The goal of positive reappraisal is to give life new meaning by putting an emphasis on personal growth and religious values.

A positive reappraisal coping strategy helps people approach problems in a more positive way because it changes the way they see things. For Muslims, religious values are used as a strategy to cope with life's stresses, such as forgiveness, prayer and requests, reading the Koran, exercising faith in God and starting one's day with positive ideas. Other ways Muslims use religious values include remembering God's prayer performance, patience, and gratitude. In accordance with Mayordomo-Rodrguez et al. (2015), individuals who were 24 years old had lower Positive Reappraisal scores., who looked at young adults' coping strategies to determine their overall well-being. Researchers found that young adults don't rely on religion to get through tough times or deal with difficult circumstances.

In this study, it was discovered that escape avoidance is a key factor in determining moral panic and that it is associated with it. Attempting to avoid or escape the problem at hand is an example of escape-avoidance. The problem will be avoided, withdrawn from, or even run away from by people with escape-avoidance. It has been demonstrated in previous studies (Pearlin and Schooler 1978; Park and Folkman 1997; Hwang et al. 2007) that people avoid stress by comparing their current situation to that of others who are in worse situations. The majority of participants had a low level of escape-avoidance, according to the results. There is a chance that COVID-19 will endanger the lives of everyone. Those who are close to someone with a problem try their best not to separate themselves from it, as shown by studies.

According to the findings of this study, moral panic is negatively associated with self-control, which is the second most important determinant factor. When faced with a problem, restraint is an attempt to keep one's feelings and actions under control. Even in the face of hardship, individuals with self-control are able to maintain their cool. Resigning or removing yourself from stressful situations may assist you in regaining emotional stability (Pearlin and Schooler

1978).Decreased expectations, according to Porter and Steers (1973), is an effective way to deal with negative emotions and prevent disappointment. Panic can be reduced by exercising personal self-control; however, it also impacts a person's ability to deal with life's challenges (e.g., in the case of Kessler et al. 1988, Thoits 1995, Rodin 1986, Turner and Lloyd 1999, Rosenfield 1989, Pearlin et al. 1981,Mirowsky and Ross 1990). (Turner, 1988). The media has a part to play in instilling fear in the population. Individuals can avoid the stress caused by excessive panic by limiting their exposure to or reading of COVID-19-related news.

This study found that distance has an adverse effect on moral panic. Distancing oneself from a situation is a way to avoid getting involved in it, as well as to create positive views about it. Because the virus spreads immunologically exponentially among populations, speedy response is critical in managing a COVID-19 pandemic, according to Carret (2020). Avoiding direct touch with infectious individuals, washing hands frequently and isolating them from the rest of the population are some of the most important preventative measures. Distance-coping individuals will try to control themselves so that they do not get exposed to the coronavirus by adhering to the government's call to reduce various activities outside the home to slow down the path of COVID-19 spread.

Accepting responsibility, the researchers discovered, was linked to moral panic. Admitting one's mistakes and taking responsibility is a step toward self-awareness and resolution. In the absence of a vaccination, adopting a new, healthier lifestyle is one of the most effective strategies to resist the COVID-19 Pandemic (new normal). New Normal with Mitigation, according to Pragholapati (2020), is a strategy to lessen the severity of COVID-19's consequences. Indonesia is gearing up for a new normal era where people can leave the house during the COVID-19. People were forced to seek wisdom because of crises like the COVID-19 Pandemic, according to Lee (2020). Taking care of COVID-19 calls for social responsibility on the part of the community. Chen (2020) explained that the community must be able to adapt both at work and in public facilities to COVID-19 because the situation with COVID-19 is constantly changing, butImplementing hygiene precautions such as hand washing with soap and running water as suggested by the government, and maintaining at least one metre away from infected people, and wearing a mask when leaving the house must be a part of our strategy. To avoid being swept up in the COVID-19 frenzy, we need a solid plan in place. This study found that self-control and positive reappraisal were the most common determinants of moral panic

LIMITATIONS

Several limitations apply to this study. The vast majority of those who took part in this study were between the ages of 18 and 25, with the remainder falling somewhere in between. As a result, people of all ages are underrepresented. Because the data was gathered voluntarily from participants via an online application, some generalizations would have to be avoided. Because the data is based on participants' individual statements, it is possible that there will be some bias (such as social recognition error). Another limitation of this study is a scarcity of research on moral panic. The researcher suggests that further research be conducted into the role of the media and policymakers in societal moral panic.

CONCLUSION

Individuals' moral panic is determined by their coping strategies, according to this study. Individuals must use coping strategies such as systematic and measured planning, seeking social support from their immediate surroundings, dealing with problems responsibly, and, most importantly, having a positive assessment of the issues that arise when dealing with COVID-19. The response that must be avoided when dealing with COVID-19 is to deal with it aggressively, such as panic buying, excessive news dissemination, and unreasonable fear of medical personnel and COVID-19 patients' families (coronaphobia).

The findings of this study are critical for developing intervention programs and strategies for dealing with COVID-19 in order to protect mental health and keep people from panicking. To avoid panic in a family environment, pay attention to health by eating healthy and nutritious food, exercising regularly, getting enough sleep, and maintaining personal and environmental hygiene; families should spend time together, do fun activities with the family, such as playing board games or cooking together; and maintain the quality of communication. reducing COVID-19-related watching, reading, and hearing information; continuous news can cause panic; strengthening worship with a way to get closer to God.

ACKNOWLEDGMENTS

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