

# The Analysis of Adult Female Anxiety in Facing the Future

Vidi Posdo A. Simarmata<sup>1</sup>, Luana N. Achmad<sup>2</sup>

<sup>1</sup>Department of Medical Community, Medical Faculty, Universitas Kristen Indonesia, Jakarta, Indonesia

<sup>2</sup>Department of Psychiatry, Faculty of Medicine – Universitas Kristen Indonesia, Jakarta

Corresponding Author: Vidi Posdo A. Simarmata

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## ABSTRACT

Anxiety is the overgrowth worried or discomfort in anticipation of internal or external danger. Anxiety is stated as pathological if the condition stays long-term and causes physical disabilities and distress that causes difficulties in daily life activities such as working or socializing. Anxiety disorder has a bigger chance of developing in women than in men. Throughout the detention period, if anxiety is ignored, it could weaken or even eliminate self-capacity and capability in prisoners. This study is prepared to seek anxiety and assess the severity in prisoners at *Lembaga Pemasyarakatan Perempuan Kelas II A Kota Tangerang* from August to October 2019. This study is published with a descriptive quantitative with cross-sectional approach, and the data is collected using accidental sampling, where the research population is 78 female prisoners. Data is collected by using Hamilton Anxiety Rating Scale (HAR-S) questionnaire. The result shows that the level of anxiety is divided into four stages; average (67,9%), low (15,4%), middle (11,5%), and high (5,1%) level of anxiety. The highest anxiety level shows in the 20 – 30s year category, married category, and has never been prisoned category.

**Keywords:** anxiety, prisoner, female, *Lembaga Pemasyarakatan*

## INTRODUCTION

Based on Article 1 paragraph (6) of Law Number 12 of 1995 on Imprisonment, a convict is a person convicted based on a court decision that has acquired permanent legal force [1]. The convicts who underwent the verdict were then referred to as Penitentiaries, entitled to be treated humanely in an integrated system. An institution was formed to fulfill these needs, namely, the Penitentiary Institution, which is obliged to build and help convicts improve themselves, find out their mistakes, and develop themselves to be accepted back by society and live responsibly after serving time. home [1; 2].

According to data obtained through the Correctional Database System in August 2019, in the Regional Office (Kanwil) Banten, there are 7 Prisons with a total of

8,191 male inmates, 906 female inmates, and a total 9,097 adult inmates. The number of prisoners for men was 51 people, and for women were three people, so the total number of child prisoners was as many as 54 people [3]. Furthermore, based on the report of the Technical Implementation Unit (UPT) in August 2019 in the Women's Prison Class II A Tangerang City, there are 364 prisoners with a capacity of the Prison of 250 [4].

The training given to convicts is based on protection, equal treatment, service, education, guidance, respect for human dignity, and worth. Loss of independence is the only suffering for which they still gain the right to relate to families and certain people [1]. Training of convicts is expected to be carried out in a peaceful and secure situation to reduce the emergence of anxiety

that can be experienced by inmates [5].

Anxiety is a condition in which a person experiences a change of attitude to be irritable, restless, afraid, restless, impaired concentration, and even withdraw from society [6]. A person with anxiety can also experience somatic disorders such as palpitations, rapid breathing, dry mouth, stomach complaints, hands and feet feeling cold, and muscle tension [6; 7]. Such conditions can occur or accompany the conditions of life situations and various health disorders [6; 7].

In Indonesia, based on the results of Basic Health Research (RISKESDAS) in 2018 showed that 9.8% of the Indonesian population aged 15 years and older have emotional and mental disorders and some anxiety symptoms [8]. The province with the highest prevalence of Central Sulawesi is 19.8%, and the lowest in Jambi Province is 3.6%. The prevalence rate in Banten Province is 5%. The National Comorbidity Survey states that a higher prevalence of anxiety is found in women, 4.3%, and 2% in men [6].

Anxiety in a person can be caused by several biological, social, psychological, and environmental factors [6]. The anxiety experienced by everyone is experienced by post-detention inmates, who are influenced by pressures from themselves and the environment. It is easier for a person to become a perpetrator or a victim of bullying based only on the person's past. Fear of not being accepted by society, not getting a decent job and life, and being excluded from the surrounding environment is a condition that is not desired to happen by prisoners.

Women have a three times higher susceptibility to anxiety disorders than men. It is associated with severe stressors such as sexual, physical, mental, or social violence experienced by women [9]. Based on the National Comorbidity Survey, the anxiety disorders that most often strike women are panic disorder, agoraphobia, and post-traumatic stress [6; 9].

According to Andriawati (2012), inmates serving their sentences can experience

anxiety due to the inability of inmates to adapt to the environment of the Penitentiary [10]. This anxiety can reduce and even negate the prisoner's self-potential because, for the prisoner, this anxiety is a response to threats from the soul or psychic such as feeling a bleak future to feel useless [10].

Based on the problem description above, the author is interested in researching the anxiety experienced by prisoners undergoing detention in the face of the future. Based on this background, the author is interested in raising the following issues "what is the level and influence of anxiety on prisoners in facing the future?" with the aim of research to determine the level and influence of anxiety on adult female prisoners in facing the future in Class II A Prison of Tangerang City.

## LITERATURE REVIEW

Anxiety, or anxious, comes from the Latin word "angere," which means choked or choked [11]. A person's condition can be called anxiety, when an unpleasant feeling is a psychological response to the anticipation of unreal or imagined danger [12]. This anxious response often causes patients to prefer to withdraw from the surrounding environment.

Anxiety or anxiety is a normal feeling found in daily life. A person who does not have feelings of fear or anxiety will not be able to survive for a long time [9]. Anxiety causes confusion and perceptual distortion and can interfere with a person's ability to concentrate or associate [6]. Anxiety is a flight or fight response, where the body of a living being prepared to take action between fighting or fleeing from the threat. The purpose of feeling anxious in a living being is to face a threat [13]. Anxiety is a disturbing mental tension as a general reaction to the inability to deal with a problem whose source is unknown or vague, but the tension is apparent [14].

Anxiety, often known as restlessness, is anxiety or discomfort from the anticipation of danger of internal or external origin. This anxiety is often associated with a person's

physical condition. It is because when a person is in a state of anxiety, their state of mind tends to be contradictory. This conflict between thoughts and emotions is generally a person's defensive mechanism in the form of repression. When this defensive mechanism does not work, the person has difficulty maintaining consciousness [14].

In the state of anxiety that is natural in living beings, anxiety is used as an adaptive ability to prevent changes that will occur or are taking place. Anxiety is declared pathological when the condition persists for a long enough period and causes physical disturbances in a person, distress that results in obstruction of daily activities, both working and socializing [11].

Based on research conducted in developed countries by Borwin Bandelow, MD, Ph.D., Sophie Michaelis, MD, in one year found that 33.7% of the total population suffers from anxiety [9]. The prevalence of anxiety was more common in women, 30.5%, than in men, 19.2% [6]. It is influenced by various stressors, such as sexual violence, bullying, and social inequality. According to a study conducted by the National Comorbidity Survey -Replication, every three women must have experienced anxiety disorders [9].

The prevalence of this anxiety continues to increase every year. It is due to the lack of willingness of patients to get appropriate treatment. This prevalence increases with the development of time and technology, where the pressure experienced by a person is not commensurate with his ability to cope with the pressure. The prevalence of anxiety can decrease if offset by the increasing socio-economic status of a person [6].

The most common types of anxiety disorders are specific phobia and Generalized Anxiety Disorder [9]. This condition occurs because people with anxiety disorders generally receive outpatient care that allows them to receive less attention from medical personnel such as psychiatrists than patients who receive inpatient treatment, for example, in patients with schizophrenia or bipolar affective

disorder. However, it is still difficult to distinguish the symptoms that a person experiences are anxiety disorders or just normal fear of living beings.

Three theories discuss the causes of anxiety: psychoanalytic theory, behavior-cognitive theory, and existential theory [15; 16]. The factors that can affect anxiety are age, gender, and marital status [6; 10]. A person suffering from anxiety has various signs and symptoms such as excessive fear, irritability, sensitivity to sound, and anxious thoughts [17]. Common autonomic symptoms include dry mouth, difficulty swallowing, stomach discomfort/pain, difficulty breathing, palpitations, erectile failure, and menstrual cycle disruption. Other symptoms that can appear in a person with anxiety are tremors, muscle pain, dizziness, inability to breathe, insomnia, and night terror [7; 18].

Anxiety levels are divided into four levels with different characteristics depending on how a person copes and adapts to his environment. Anxiety levels include normal anxiety, mild anxiety, moderate anxiety, and severe anxiety. Anxiety disorders are divided into two major subgroups, namely phobic anxiety disorder (F40) and other anxiety disorders (F41), which include panic disorder and generalized anxiety disorder (GAD) [7]. According to PPDGJ-III and DSM-5, anxiety disorders are divided into several groups, namely phobic anxiety disorders (agoraphobia, specific phobia, social phobia) and other anxiety disorders (generalized anxiety disorder, panic disorder) [7; 19].

Comprehensive anxiety disorder has persistent symptoms that do not depend on the situation the patient is experiencing or can appear at any time. The symptoms described can be found in this type of anxiety disorder. The difference between phobic anxiety disorder and generalized anxiety disorder is that the symptoms appear only in certain situations. Phobic anxiety disorder has several types: specific phobias, social phobias, and agoraphobia. The onset of panic disorder is sudden and

accompanied by several severe symptoms, including palpitations, choking sensations, chest pain, dizziness, fainting, depersonalization, realization, fear of death, and uncontrollable emotions [7; 19].

The self-concept is each individual's mental picture of all that is thought, self-desire, and self-assessment [20; 21]. The concept of self is not innate from birth; it is the formation of the individual thought process influenced by various factors, including knowledge about oneself and others, one's expectations of oneself and one's future, and individual self-assessment [20]. The concept of self is influenced by several things, namely the family, society, and environment [21]. The types of self-concept are positive and negative self-concept [22; 23].

Based on the above statement, it can be concluded that self-concept is one of the essential factors in the formation of behavior [20]. If an individual has a lousy self-concept or contains an opposing view, focusing on the shortcomings rather than the strengths can lead to poor behavior. Conversely, if an individual has a good self-concept, there will be good behavior and appropriate between expectations and actual conditions [10].

In prisoners, there is a tendency to have a negative self-concept where the prisoner feels that he is not valuable, especially when facing the future after completing his sentence in the Penitentiary. Anxiety is experienced in the form of fear of living his life as a former prisoner in the future. Prisoners are afraid of the uncertain future, unable to have a job or a happy family life, to the point of lack of acceptance from the surrounding environment [10].

## RESEARCH METHOD

The type of research used is quantitative descriptive research with a Cross-Sectional approach to conducting measurements or observations in time. This study uses the scores of the Hamilton Anxiety Rating Scale (HAR-S) questionnaire, which consists of 14 statements. This research was conducted in the Women's Prison Class II A Tangerang

City, for three months, from August to October 2019. The population in this study is the inmates of the Women's Prison Class II A Tangerang City. The sample in this study is the prisoners of the Women's Prison Class II A Tangerang City. To determine the number of samples, the population of prisoners of the Class II A Women's Prison of Tangerang City was taken, a total of 364 people. Then, the number of samples will be determined with the Slovin formula.

$$n = \frac{N}{1 + (e)^2 \times N}$$

n = number of samples

N = total population

e = precision (10% because the confidence limit is 90%)

If the total population is 364 and the precision is 10%, then:

$$n = \frac{N}{1 + (e)^2 \times N}$$

$$n = \frac{364}{1 + (0,01 \times 364)}$$

$$n = \frac{364}{4,64}$$

$$n = 78,44$$

The number of samples was rounded to 78 people.

The instrument used in this study is the Hamilton Anxiety Rating Scale (HAR-S) questionnaire. The Hamilton Anxiety Rating Scale is an anxiety rating and was developed by Hamilton in 1959. This questionnaire was developed based on the Diagnostic and Statistical Manual of Mental Health Disorders (DSM-III) regarding anxiety symptoms. There are 14 statements with a scale of 0-4 (0: none, 1: light, 2: medium, 3: heavy, 4: cumbersome). The total score of the 14 statements was 56 with a scale of <14: no anxious, 14 - 20: mild anxiety, 21 - 27: moderate anxiety, 28 - 41: severe anxiety, and 42 - 56: severe anxiety. Thus, the researcher did not conduct a validity test because the questionnaire was adapted from a standard questionnaire with internal consistency (Cronbach's  $\alpha$  0.86) and a total reliability coefficient of 0.92. The data obtained in the research will be

processed using the SPSS program with stages: editing, coding, data entry, cleaning, and data analysis. Research permission is done by submitting a letter of consent (inform consent) for inmates who meet the inclusion criteria to become respondents.

**RESULT AND DISCUSSION**

**Table 1. Frequency Distribution of Female Inmate Respondents Based on Respondent Age**

Characteristics	Frequency	%
Age of Respondent		
20 - 30 years	35	44.9
31 - 40 years old	26	33.3
41 - 50 years old	10	12.8
>50 years	7	9
Amount	78	100

Table 1 above describes the characteristics of female inmate respondents based on age. Of the 78 inmates, it was found that 35 inmates (44.9%) were in the age range of 20 - 30 years, 26 inmates (33.3%) in the age range of 31 - 40 years, ten inmates (12.8%) in the age range of 41 - 50 years, and seven inmates (9%) were in the age range of >50 years.

**Table 2. Frequency Distribution of Female Inmate Respondents Based on Respondents' Marital Status**

Characteristics	Frequency	%
Marital Status of Respondents		
Get married	48	61.5
Not married	30	38.5
Total	78	100

Table 2 above describes the characteristics of female inmate respondents based on marital status. Of the 78 inmates, it was found that 48 inmates (61.5%) were

married, and 30 inmates (38.5%) were unmarried.

**Table 3. Frequency Distribution of Respondents of Female Inmates Based on the Experience of Entering the Prison**

Characteristics	Frequency	%
Experience of Entering the Prison		
One time	54	69.2
More than once	24	30.8
Total	78	100

Table 3 above describes the characteristics of female inmate respondents based on the number of admissions to the Penitentiary Institution. Of the 78 prisoners, 54 prisoners (69.2%) entered the Penitentiary 1 (one) time, and 24 prisoners (30.8%) entered the Penitentiary more than 1 (one) time.

**Table 4. Frequency Distribution of Anxiety Levels of Female Inmates in Class II A Women's Prison Institutions in Tangerang City**

Characteristics	Frequency	%
Respondents' Anxiety Level		
Normal	53	67.9
Mild anxiety	12	15.4
Moderate Anxious	9	11.5
Severe anxiety	4	5.1
Very anxious	0	0
Total	78	100

Table 4 above describes the level of anxiety among female inmates in the Class II A Women's Prison in Tangerang City. Of the 78 inmates, it was found that 53 inmates (67.9%) had an anxiety condition that was still within normal limits, 12 inmates (15.4%) had mild anxiety, nine inmates (11.5%) had moderate anxiety, four inmates (5.1%) had severe anxiety, and no inmates were found to be severely anxious.

**Table 5. Frequency Distribution of Anxiety Levels of Female Inmates in Class II A Women's Prisons Institutions in Tangerang City by Age**

Anxiety Level	Age of Respondent								Total	
	20 – 30 Years		31 – 40 Years		41 – 50 Years		>50 Years			
	n	%	n	%	n	%	n	%	n	%
Normal	21	26.9	20	25.6	7	9.0	5	6.4	53	67.9%
Mild	5	5.4	3	3.8	2	2.6	2	2.6	12	15.4%
Moderate	7	4	2	2.6	0	0	0	0	9	11.5%
Severe	2	2.6	1	1.3	1	1.3	0	0	4	5.2%
Very	0	0	0	0	0	0	0	0	0	0
Sub-total	35	44.9%	26	33.3%	10	12.9%	7	9.0%	78	100%
Total	78				100%					

Table 5 above describes the level of anxiety among female inmates in the Class II A Women's Prison of Tangerang City based on

age. Of the 78 inmates, it was found: a) Age range 20 - 30 years: 21 inmates (26.9%) experienced anxiety within normal limits,

five inmates (5.4%) experienced mild anxiety, seven inmates (4%) experienced moderate anxiety, and two inmates (2.6%) experienced severe anxiety. The total overall anxiety level of inmates in the age range of 20 - 30 years was 35 inmates (44.9%); b) Age range 31 - 40 years: 20 inmates (25.6%) experienced anxiety within normal limits, three inmates (3.8%) experienced mild anxiety, two inmates (2.6%) experienced moderate anxiety, and one inmate (1.3%) experienced anxiety heavy. The total overall anxiety level of inmates in the age range of 31 - 40 years

was 26 inmates (33.3%); c) Age range 41 - 50 years: 7 inmates (9%) experienced anxiety within normal limits, two inmates (2.6%) experienced mild anxiety, and one inmate (1.3%) experienced severe anxiety. The total overall anxiety level of inmates in the age range of 41 - 50 years was ten inmates (12.9%); d) Age range >50 years: 5 inmates (6.4%) experienced anxiety within normal limits, and two inmates (2.6%) experienced mild anxiety. The total overall anxiety level of inmates in the age range >50 years was seven (9%).

**Table 6. Frequency Distribution of Anxiety Levels of Female Prisoners in Class II A Women's Prisons Institution of Tangerang City Based on Marital Status**

Anxiety Level	Marital Status				Total	
	Married		Not Married		n	%
	n	%	n	%		
Normal	34	43.6	19	24.4	53	68%
Mild	9	11.5	3	3.8	12	15.3%
Moderate	4	5.1	5	6.4	9	11.5%
Severe	1	1.3	3	3.8	4	5.1%
Very	0	0	0	0	0	0%
Sub-total	48	61.5%	30	38.5%	78	100%
Total	78		100%			

Table 6 above describes the level of anxiety among female inmates in the Class II A Women's Prison of Tangerang City based on marital status. Of the 78 inmates, it was found that: a) 48 inmates who were married to 34 inmates (43.6%) experienced anxiety within normal limits, nine inmates (11.5%) experienced mild anxiety, four inmates (5.1%) experienced moderate anxiety, and

one inmate (1.3%) experienced severe anxiety; b) There were 30 unmarried inmates with 19 inmates (24.4%) experiencing anxiety within normal limits, three inmates (3.8%) experiencing mild anxiety, five inmates (6.4%) experiencing moderate anxiety, and three inmates (3.8%) experiencing heavy anxiety.

**Table 7. Frequency Distribution of Anxiety Levels of Female Inmates in Class II A Women's Prison Institutions in Tangerang City Based on Prison Admission Experience**

Anxiety Level	Experience in Entering Prison				Total	
	Once		More than Once		n	%
	n	%	n	%		
Normal	31	39.7	22	28.2	53	67.9%
Mild	11	14.1	1	1.3	12	15.4%
Moderate	9	11.5	0	0	9	11.5%
Severe	3	3.8	1	1.3	4	5.1%
Very	0	0	0	0	0	0%
Sub-total	54	69.2%	24	30.8%	78	100%
Total	78		100%			

Table 7 above describes the level of anxiety among female inmates in the Class II A Women's Prison in Tangerang City based on inmates' experience of entering LAPAS. Of the 78 inmates, it was found that: a) 34 new inmates entered LAPAS once with details of

31 inmates (39.7%) experienced anxiety within normal limits, 11 inmates (14.1%) experienced mild anxiety, nine inmates (11.5%) experienced moderate anxiety, and three inmates (3.8%) experienced severe anxiety; b) 24 inmates have had the

experience of entering LAPAS more than once with details 22 inmates (28.2%) experienced anxiety within normal limits, one inmate (1.3%) experienced mild anxiety, and one inmate (1.3%) experienced severe anxiety.

Anxiety is a psychological response to the anticipation of unreal or imagined danger. Anxiety is pathological when the feeling is permanent (maladaptive) and causes physical disturbances in a person, as well as distress that results in obstruction of daily activities. This feeling of anxiety is called anxiety disorder.

The study results in Table 4 show that the anxiety level in female prisoners in the Women's Prison Class II A Tangerang City, which consists of 78 respondents, is still within normal limits, with as many as 53 people (67.9%). The results align with a study by Utari (2012) [24], which found that most female prisoners had anxiety within normal limits or did not have anxiety disorders. Anxiety within this normal range indicates increased respondents' alertness to various threats. This situation makes the respondents more productive in self-improvement and increases self-potential.

This level of anxiety also shows that the self-concept of female prisoners in the Class II A Women's Prison in Tangerang City is positive. Inmates can accept the advantages and disadvantages of their own. It can help the inmate live his future after completing his sentence in the Penitentiary.

Researchers also looked at the distribution of anxiety frequencies based on age, marital status, and experience of incarceration. The study's results in Table 5 show inmates' anxiety levels based on age. It was found that the 20 - 30 years have the highest anxiety levels in the normal range and moderate anxiety levels, namely 21 inmates (26.9%) and seven inmates (4%). The results are in line with research by Hadi (2016), who found that young age has a higher level of anxiety than old age [25]. It may be because younger inmates tend to have more unstable moods, more significant stressors, more negative thoughts, and a

greater fear of not being able to have a better future than older inmates. An individual's maturity affects the coping ability, so people with older age or adulthood do not easily fall into anxiety.

The result of the study in Table 6 shows that the level of anxiety affected by marital status obtained a significant effect that is in prisoners who are married 39 inmates (43.6%) are in a state of anxiety within normal limits. Compared with 19 inmates (24.4%), this can be influenced by the presence of other supports outside the core family, namely the spouse, so married inmates are less likely to become anxious.

The results of the study in Table 7 show that the level of anxiety affected by the experience of entering the Penitentiary is still within normal limits. As many as 31 (39.7%) inmates who had just entered the Penitentiary once experienced anxiety within the normal range, and 22 inmates (28.2%) who had entered the Penalty Institution more than once experienced anxiety within the normal range. This study's results align with Utari's (2012) research, where the level of anxiety was higher in inmates who had just entered the Penitentiary [28].

The level of anxiety affected by the experience of entering the Penitentiary is still within normal limits as the adaptation of the inmates influences the coaching and protection activities carried out in the Penitentiary. The sense of security and comfort created by the Penitentiary allows inmates to adapt well and reduce anxiety.

## CONCLUSION

Based on the results of research conducted at the Class II A Women's Prison Institution in Tangerang City in 2019, it was found that the level of anxiety experienced by 53 of 78 inmates was still within normal limits. Twelve inmates had mild anxiety, nine had moderate anxiety, and four had severe anxiety. The criteria used are age, marital status, and experience of entering a Penitentiary. Thus, it is expected that the Penitentiary continue to carry out coaching

as best as possible to reduce the amount of anxiety beyond the normal limits experienced by prisoners and as an evaluation to increase the potential of prisoners.

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