Psychological Security and Future Anxiety of Infected and non-Infected Persons with Covid19

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Abstract

The fact that little is yet known about the possible implications of COVID-19 leads to a greater risk of heightened anxiety and psychological security. In this study, the sought to explore the significant differences and significant relationship between infected and non-infected individuals regarding psychological security and future anxiety in terms of age and gender. A fully quantitative research design was used. The study took place in Jordan, the sample of the study were 1928 infected and 1932 non-infected individuals who answered an online survey questionnaire of psychological security and future anxiety. The data were analysed descriptively and inferentially using SPSS 23.0. independent *t*-test and Pearson correlation were used to analyse the data. The findings showed that there is a significant relationship between infected and non-infected individuals regarding psychological security and future anxiety. However, females have a higher level of future anxiety and psychological security. Furthermore, Age has a statistical significance direct/indirect relationship with future anxiety and psychological security. This research contributes significantly to the limited studies that examine the psychological status of an individual during the Pandemic as this affects the whole lie aspects.

Keywords: Psychological security, future anxiety, infected/non-infected, Covid19, Jordan.

I. Introduction

On March 11, 2020, the World Health Organization announced the Corona pandemic due to its spread around the world, and how this affected the social lifestyle and interactions between individuals, and the organization described it as a public health emergency of international concern (Eurosurveillance Editorial Team, 2020), and attention was drawn to the physical health condition as it is the most important at the beginning, and many neglect the psychological state of individuals and their role in enhancing both psychological and physical immunity (Clemente-Suárez et al., 2020). Attention to mental health in difficult periods is important, as it is necessary to take the necessary measures to preserve the mental health of societies affected by the virus, where concerns about transmission of the virus can Illness from one person to another can have a negative impact on mental Unfortunately, the psychological dimension is often forgotten, as it is not noted for its importance in light of crises, despite the scientists being reminded of the close relationship between mental health and physical health and the extent of their impact on the immune system, and that stress and anxiety may lead to many diseases (Santos, 2020). The Corona crisis has caused many physical, psychological, social and economic health repercussions and has exhausted medical devices in all countries. The crisis witnessed the mobilization of a lot of efforts and energies. Stankovska, Memedi & Dimitrovski (2020) reported that the psychological services had to adapt quickly to respond to the psychological problems and stresses that arose. In addition, there was not enough psychological expertise to deal with the pandemic. As a result, Internet platforms were opened for researchers to share information, and calls for conducting extensive psychological research appeared (Doyumgaç, Tanhan & Kiymaz, 2021; Alakrash et al, 2021).

The World Health Organization published a report on Mental Health in Emergencies on June 11, 2019) stating that "the majority, if not all, of people exposed to emergencies, are likely to experience psychological distress and most of them can improve over time." And that "people with severe mental disorders are particularly at-risk during emergencies and need mental health care and other basic needs, World Health Organization - on-line. However, specialized studies on the coronavirus and its impact on mental health are considered scarce, so there is no data on the matter, and if some potential links between the corona and psychological disorders have been mentioned, as it still requires verification of their validity through conducting scientific studies, which prompted the implementation of the current study to identify the most prominent psychological problems that may appear in individuals with their level (Serrano-Ripoll et al., 2020; Wang et al., 2020; Wind et al., 2020). The foundations that psychological security arises as a result of human interaction with the environment around him through the experiences he goes through and the environmental, social, political and economic factors that affect the individual. Different ages and one's security becomes threatened if he is exposed to psychological and social pressures that he cannot control at any stage of his life these stages, which leads to turbulence. Just as future anxiety is a mainstay in a person's psychological life, Freud (1957) states that anxiety lies in anticipation of danger and considers that birth trauma is the first danger facing the individual and that the following dangerous situations consist of a person's assessment of his strength in relation to the amount of danger. And from his recognition of

physical disability if the danger is objective, and psychological helplessness if the danger is instinctive while he is in this work, it is directed by the real experiences that he went through, and the real experience of the state of disability of this type is called a state of shock, then it refers to anxiety in terms of anticipating the occurrence of the shock, and it is from the task of other humanistic psychologists emphasize the nature of man as a distinct and unique human being with his positive characteristics (Taylor, 2001, Alakrash, 2021), and then they see that anxiety arises either from present or expected events in the future, as these events represent a threat to the existence of man and his humanity, and hinder goals and prevent him from achieving himself.

As mental health is currently considered a catalyst in managing the current crisis by dealing with the spread of the virus, but rather confronting and overcoming it. The Psychology of Youth calls for investing in the future psychological capital of individuals, societies and economies (CNN, on-Line). Based on the foregoing, the importance of the scientific study appears, as it is the first of its kind - within the limits of knowledge and knowledge - that is concerned with psychological security and future anxiety in the Corona crisis, where this study provides a clear view of the aspects of psychological security and future anxiety. Since the end of the year 2019, the world has been facing a global health crisis, as COVID-19 has emerged as a health-threatening epidemic (Raeiszadeh & Adeli, 2020). In addition to the increasing numbers of infected cases and deaths, there are also economic, social, and psychological effects of this epidemic; This is because billions of individuals are subject to home quarantine, and many institutions and facilities have been closed to achieve social distancing as a measure to contain the spread of the virus (Banerjee & Rai, 2020). The Coronavirus pandemic and social distancing have changed the way individuals interact, and studies have reported 1 in 4 adults suffers from mental health problems (Cudjoe & Kotwal,

2020, Alakrash & Razak 2021a). With the great spread of the Coronavirus in all countries and in the absence of any confirmed vaccine or medicine, issues related to the virus and its prevention and treatment are still of interest today. It is necessary to move to the stage of thinking about mental health problems and researching psychological suffering and the risk of depression. There is no doubt that this stone is not an easy thing, because a person is accustomed throughout his life to leave the house, either to work, to meet his needs or to entertain himself, as he is a social being and it is difficult to isolate from others and live in the shadow of social distancing and because it is important that individuals enjoy Society with mental health, as it affects and relates to every human being, focusing on mental health has become a priority. Mental health is a goal that every individual strives for (Ahmed, 2010; Alakrash & Razak, 2021b).

Mental health specialists agree that the home quarantine imposed on more than a billion people around the world due to the pandemic is not an easy matter, nor is it a matter to be underestimated, as it is an exceptional and unprecedented measure that restricts individual freedoms even in democratic countries. This situation causes psychological problems for many people, especially for those who fail to deal positively with this circumstance (Maslach & Jackson, 2013). The chances of these problems and their forms vary with the conditions of domestic isolation and social isolation. It should be noted that there is very little information about the exact impact of this crisis on the mental health of individuals, whether in the short or long term. A systematic review of the literature related to the comparison with other coronaviruses such as Severe Acute Respiratory Syndrome (SARS) and Middle East Respiratory Syndrome (MERS), it was found during the symptoms stages the emergence of disorders of a nature as psychological such anxiety, depression, insomnia and memory confusion.

Based on the above, the current study seeks to study the level of mental health of the Lebanese during the Corona pandemic in light of age, gender, governorate, social and educational status. To achieve this goal, the demographic data form and the modified 90-Symptom Checklist will be applied, where the importance of the study and the justifications for its selection will be randomly selected.

1.1 Psychological Security

Security is a feeling and obsession as old as man himself found with him to face loneliness and fear, so man's obsession was to protect himself. Hence the beginning of the concept of security was a self-concept that depends on man's protection of himself from environmental and human risks that he may be exposed to, which prompted him to move towards domestication and living with others to eliminate unity because of his realization that union is a force to confront fear and danger, for individual security cannot be achieved without fusion within the framework of a human group that guarantees security and stability. Protection and security in its various dimensions, and with the development of human societies and the increase of its members, their security needs to be increased, and imperative necessities appeared to confront new and diverse dangers. Human societies, as well as the different ways and lifestyles, faced difficulties in maintaining their security and controlling The behaviour of its members and the degree of control in it, in addition to its inability to confront other human gatherings, which have become the rule of the jungle that is controlling them, and the force is the one that imposes its rule and desires. Therefore, psychological security is one of the needs of the highest order for human beings. It can only be achieved after the minimum needs of the human being are fulfilled (Jabr, 1996, p. 80). himself and therefore his behaviour. Many psychologists have been interested in studying the motives of human behaviour, among which is the motive of security, and one of the most

famous of these is Abraham Maslow, who divided the motives of human behaviour into five motives, making them organized in a hierarchical form, its basic base They are the physiological needs, immediately followed by the need for security, then the need for love, and the last of which is the need for self-realization. Fulfilling his need for security as leads to the inability to move and go towards self-realization (Jabr, 1996). warm, it will grow normally, and be able to achieve what it wants,

Psychologists have paid great attention to the issue of physical and psychological needs, and this is evident in studies of developmental psychology. The demands and psychological needs of growth have a fundamental role in achieving a stable psychological state, through which the individual feels security, tranquillity and balance between his inner forces or between individual reconciliation and the interests of the group (Samara et al., 1996). Security is a feeling and obsession as old as man himself and found with him to confront loneliness and fear, so man's obsession was to protect himself, and from here the beginning of the concept of security was a self-concept that depends on man's protection of himself from environmental and human risks that he may be exposed to, which It prompted him to move toward domestication and live with others to eliminate unity because of his realization that union is a force to confront fear and danger. Individual security cannot be achieved without fusion within the framework of a human gathering that guarantees security and stability, so the family, clan, tribe, and then the state appeared, later on, based on human needs and out of feelings With tranquillity and selfprotection with all the meaning of the word protection and security in its various dimensions, and with the development of human societies and the increase of their members, their security needs to be increased, and a necessity appeared. It is imperative to confront new and diverse dangers, and the security need has become encompassing everything related to the human being, from the

security of his body to the security of his entity to the security of his freedoms and rights. The behaviour of its members and the degree of control in them, in addition to their inability to confront other human groups, which have become the rule of the jungle and the power that imposes their rule and desires.

The concept of psychological security is one of the complex concepts in psychology, and its indicators overlap with other concepts such as emotional reassurance, self-security, adaptation, self-satisfaction, positive selfconcept, emotional balance (Abu-Saad, 1999, p. 15). Maslow Psychological security: It is the individual's feeling that he is loved and accepted by others and has a place among them. He realizes that his environment is friendly and not frustrating, in which he feels the scarcity of danger, threat and anxiety. Psychological security to reduce or get rid of tension, selfrealization and a sense of psychological security (Assagioli, 1989). Psychological security is also called "emotional security", "personal security", "private security" and "personal peace", and psychological security from The basic concepts in the field of mental there is a link between health, and psychological security, social security and mental health, where there is an essential relationship between religious tendency and feelings of security as a factor of personality that determines mental health (Assagioli, 1989). 15 Psychological security: reassurance Psychological and emotional, which is personal security, or the security of each individual d separately, and a situation in which the satisfaction of needs is guaranteed, and not exposed to danger (such physiological needs, the need for security, love and affection, the need for belonging and status, and the need for self-esteem). Psychological security is a compound of self-confidence, selfconfidence, and certainty of belonging to a safe group (Assagioli, 1989).

2. Literature Review

The Tadmouri 2020 study aims to identify the level of mental health of the Lebanese during the Corona pandemic crisis and to identify the differences in the levels of mental health in light of some demographic variables such as age, social status, educational level, gender, employment status, economic level, and governorate. The comparative survey descriptive approach was adopted, and the sample included 2347 individuals different Lebanese governorates. Their ages ranged between (13-84 years). A form for demographic data and a modified 90-Symptom checklist was prepared. The results showed that the Lebanese enjoy a high degree of mental health. It also showed that there were statistically significant differences in mental health due to age group, gender, social status, educational level, employment status, and economic level. Cao (2020) attempted to determine the psychological impact of the Corona pandemic on university students from the College of Medicine in China. The results showed that 0.9% of the respondents suffer from severe anxiety, 2.7% from moderate anxiety, and 21.3% from mild anxiety. Moreover, it was found that the presence of relatives or acquaintances with COVID-19 was a risk factor for increased student anxiety, and delays in academic activities were positively associated with anxiety symptoms.

Elmer, Mepham & Stadtfeld (2020)investigated students' social networks and their mental health before and at the time of the coronavirus pandemic, using longitudinal data collected since 2018. The researchers analyzed the change in multiple network dimensions such as interaction, friendship, social support and participation, and mental health indicators such as depression, anxiety, and stress, and loneliness. This was within two groups that included (214) students who suffer from the crisis, and additional comparisons were made with a previous group that did not witness the crisis. After the comparison, it was found that the networks of interaction and participation in the study became few. Moreover, the levels of stress exacerbated In students, anxiety, loneliness and depression compared to before the crisis, and fears of losing social life turned into concerns about health, family and friends.

Liu, Liu, & Zhong (2020) examined the psychological state of college students during the COVID-19 pandemic. The level of cognition, psychological state, anxiety and depression among university students during the spread of the Corona epidemic, in order to understand the psychological dynamics of students who suffer from stress. The results showed that there were statistically significant differences between the two types of university students in feelings of anxiety and panic about exposure to risks, and the levels of anxiety and depression among university students were higher than the levels of national standards. In addition, panic over the epidemiological situation was found to be a risk factor for anxiety. The analysis indicated that COVID-19specific fears, isolation in social networks, lack of interaction, emotional support, and isolation were associated with negative mental health trajectories. It was found that the female students had a low level of mental health, especially with regard to social integration and the stresses associated with the epidemic. Ojewale (2020) examined the prevalence of anxiety and depression and the ways undergraduate students cope with the situation in a Nigerian university. It also studied the relationship between psychological state and family work. The prevalence rate of anxiety and depression was 41.5% and 31 .9. Students at health-related colleges were significantly less anxious than those in other colleges. Factors associated with not being able to afford three meals a day, negative family performance, chronic illness, and living in an area with a high rate of COVID-19 were key factors in depression.

3. The current Study

This study aims to answer the following research questions

- 1. Are there statistically significant differences between infected with the Covid19 and uninfected individuals on the psychological security variable?
- 2. Are there statistically significant differences between infected with the Covid19 and uninfected on future anxiety?
- 3. Are there statistically significant differences in the psychological security variable among infected with the Covid19due to gender?
- 4. Are there statistically significant differences in the variable of future anxiety among infected with the Covid19 due to gender?
- 5. Is there a statistically significant relationship between psychological security and age among people infected with Covid19?
- 6. Is there a statistically significant relationship between future anxiety and age among people infected with Coronavirus?
- 7. Is there a statistically significant relationship between psychological security and age among those not infected with Coronavirus?
- 8. Is there a statistically significant relationship between future anxiety and age among those not infected with Coronavirus?

4. Methodology

This study uses a fully quantitative research design. The researcher collected the data from the sample through the social networking sites available to the researcher in Jordan. The two survey questionnaire scales were used first: The Psychological Security Scale and second: The Future Anxiety Scale. The available sample consisted of the Jordanian community. The number of infected participants was 1928. Their ages ranged between 18-56, males, 1007, with an average age of 38, and 920, with an average age of 34. On the other hand, the uninfected

1932, aged between 18-54 males 1021 with an average age of 32 and 932 females with an average age of 30. The psychological Security Scale was designed by Jassim (2009) consisted of 46 items, including positive and negative items. Three alternatives were identified 1-2-3 for positive items and 3-2-1- for negative items. And the items in the Future anxiety scale Al-Khaldi (2002) consisted of 84 items with five alternatives are placed in front of each item. Validity and stability were calculated in addition to the validity and reliability of the previous research. Internal consistency (constructive validity): The correlation coefficient between each item and the total sum of the scale was calculated, and all values were statistically significant at the significance level of 0.05 or less, where the values ranged between: 0.618 to 0.831 and 0.431 to 0.839, for the two scales respectively which indicates the consistency of the scale items internally, and this is an indication of the validity of the scale items. Stability: The stability of the two scales was calculated in two ways: the "Cronbach Alpha" method and the half-segmentation, where the stability value of the scale by the alpha-Cronbach method ranged between 0.92 and 0.95 and 0.95 and the values by the halfsplit method were equal to 0.89, and the stability of the scale for the non-infected where the value of the scale stability was by the method Alpha - Cronbach equals 0.96, and its value is equal to 0.90 by the split-half method, which are values that indicate the stability of the scale and its validity for application.

SPSS 23.0 software was used to analyse the collected data. Mean scores, standard deviation, t-test and Pearson correlation tests were used to analyse the data descriptively and inferentially.

5. Results

5.1 Significant differences between infected and uninfected individuals on the psychological security

To answer this question, the mean scores and standard deviations, and independent t-test of the respondents on the psychological security scale were extracted according to the psychological security, results are illustrated in Table (1).

Table 1. Results of the t-test for independent samples to extract the significance of the differences

Variable	Status	N.	M	SD	T	F	Sig
		Respondents					
Psychological	Infected	1927	134	5.3	63.5	3878	0.000
security	uninfected	1953	78	38.7			

It is noted from Table (1) that there are apparent and clear differences between the mean score of the infected and the uninfected individuals on the psychological security scale, in favour of those infected with the Coronavirus. It can be seen from Table (1) that there are statistically significant differences in psychological security that are attributed to the infection variable; Because the significance level is less than 0.05 and in favour of those infected with the Coronavirus because their mean score in psychological security is much greater than the mean of psychological security of non-infected people. This result can be explained by the fact that those exposed to the disease experienced less fear of death, while those who have not yet undergone the disease are still afraid of the

disease. Fear of the unknown generates a feeling of insecurity much more than if the effects of this unknown were revealed and we knew the impact of this fear on Ali and its dangers, and this was confirmed by Radwan (2020). Abuse is as threatening as the possibility of serious illness.

5.2 Significant differences between infected with the Covid19 and uninfected on future anxiety

To answer this question, the mean scores and standard deviations of the respondents on the psychological security scale were extracted according to future anxiety, results are illustrated in Table (2).

Table 2. Descriptive results of the responses on the anxiety scale

		*			•		
Variable	Status	N.	M	SD	T	F	Sig
		Respondents					
Psychological	Infected	1927	57.29	45.49	-77.31	3878	0.000
security	uninfected	1953	154.85	32.04			

It can be seen from Table (3) that there are apparent and clear differences between the mean score of the infected and the uninfected on the scale of future anxiety, in favour of those not infected with the Coronavirus. It is clear from Table (4) that there are statistically significant differences in future anxiety that are attributed to the infection; because the significance level is less than 0.05 and in favour of the non-infected with the Coronavirus because their mean in future anxiety is much greater than future anxiety of those infected.

This result can be explained by the fact that the uninfected still has not experienced the disease, this leads to constant anticipation and fear of the unknown. A non-infected person can't calm the anxiety and think while he is in danger of being exposed. This was confirmed by Al-Rashidi's (2017) study that future anxiety is linked to self-efficacy and self-efficacy that expresses stability and psychological security. The greater the self-efficacy, the less anxious the future, and this is what this hypothesis and the first hypothesis indicated. This was confirmed by

Cao et al 2020 study that individuals who have relatives infected with Corona have a high level of anxiety. Elmer, Mepham & Stadtfeld (2020) study confirmed that mental health increases the more individuals perceive the danger around them. The (2020) study by Xiong et al confirmed that mental health deteriorated with increased risk perception.

5.3 Significant differences in the psychological security variable among infected with the Covid19 due to gender

To answer this question, the mean scores and standard deviations of the respondents on the psychological security scale were extracted according to gender, results are illustrated in Table (3).

Table 3. Descriptive results of the responses psychological security variable among infected with the Covid19 due to gender

Variable	Gender	N. Respondents	M	SD	T	F	Sig
Psychological	Male	Respondents 1006	132.30	6.54	-17.745	1925	0.000
security	Female	921	136.29	2.06			

It can be shown from Table (3) that there are statistically significant differences psychological security that are attributed to gender. Because the level of statistical significance is less than 0.05, and in favour of females, that is, infected females with corona have more psychological security than males because their mean score is greater than males on the psychological security. This result can be explained that females receive psychological and social support more than men and they have self-compatibility, higher the effective communication and social relations that women enjoy with society are higher than men. This was confirmed by Naisa (2014), that psychological adjustment increases the feeling of psychological security. This is confirmed by the study of Abdul Majeed (2004), which indicates an increase in psychological security for females more than males when exposed to stress and abuse in life. This was confirmed by

the Turner 1994 study that females receive social support and enjoy high social support. The study of Matud (2019) confirmed that women receive higher psychosocial support than men and were more satisfied with their lives and satisfied with health in Spanish society. While the Utopia (2018 Ostudy said that the psychological security of female university students is less than that of male students, the difference in the result of this study is because the study was conducted on female students inside the university campus.

5.4 Statistically significant differences in the variable of future anxiety among infected with the Covid19 due to gender

To answer this question, the mean scores and standard deviations of the respondents on the psychological security scale were extracted according to gender, results are illustrated in Table (4).

Table 4. Descriptive results of the responses anxiety variable among infected with the Covid19 due to gender

Variable	Gender	N.	M	SD	T	F	Sig
		Respondents					
Psychological	Male	1006	132.30	6.54	-3.508	1925	0.000
security	Female	921	136.29	2.06			

It can be seen from Table (4) that there are statistically significant differences in future anxiety that are attributed to gender. Because the level of statistical significance is less than 0.05, and in favour of females, that is, females with corona have more future anxiety than males because their arithmetic mean is greater than the arithmetic average of males on the variable of future anxiety, and this result can be explained that the female is afraid of returning to the isolation experience she was exposed to. When she is injured, she is afraid that she will be away from the psychological support she used to receive in the past. This was confirmed by the Al-Badran (2011) study, which indicates that females have higher anxiety about the future than males in anxiety about health and anxiety about death. This is confirmed by the Al-Gragiri study (2020) and the Ajjal (2015) study, that there are differences in future anxiety between males and females. Al-Sabawi's (2007) confirmed that females are more concerned about the future than men. Lagory (1997) confirmed that homeless women receive more effective and more expressive support. However, this support does not help homeless women, leaving them distressed and anxious for the future.

5.5 Significant relationship between psychological security and age among people infected with Covid19

To answer this question, the Pearson relationship between the psychological security scale and age were extracted according to the age, results are illustrated in Table (5).

	Variable		Age
		Psychology security	
	correlation coefficient	1	.706**
Psychology	Statistical significance		0.000
security	Sample		1927
	correlation coefficient	.706**	1
Age	Statistical significance	0.000	
	Sample	1927	

Table 5. Pearson relationship between psychological security and age

There is a direct statistically significant relationship between psychological security and age because the value of the significance level is less than 0.05, and this means that the greater the age of a person infected with the Coronavirus, the greater his sense of psychological security, and it can be explained that the increase in age and the greater number of experiences gives the skills in solving problems, methods of reflection, awareness, insight into life to a greater degree and selfconfidence, and this increases his sense of psychological security, especially after the experience of being exposed to the most difficult diseases and surviving a major and dangerous epidemic. This experience leads to greater confidence and security for the patient

because he possessed a healthy strength that made him overcome the most dangerous epidemics of this era. The experience of escaping death gives a feeling of strength health that enabled him to overcome the most difficult and dangerous diseases. This was confirmed by the study of Aqra'a (2005). Training experiences work on increasing self-confidence and acquiring life skills to face upcoming difficulties. This knowledge and experience increase psychological security. This was confirmed by Beyon Miloyan, (2017) study that anxiety and depression decrease with positive future events. As confirmed by Weiss (2014), anxiety decreases with age.

5.6 Relationship between future anxiety and age among people infected with Coronavirus

To answer this question, the Pearson relationship between the anxiety scale and age were extracted according to the age, results are illustrated in Table (6).

Table 6. Pearson relationship between future anxiety and age of infected individuals

	Variable		Age
		Anxiety	
Anxiety	correlation coefficient	1	817**
	Statistical significance		0.000
	Sample		1927
	correlation coefficient	817**	1
Age	Statistical significance	0.000	
	Sample	1927	

It can be seen from Table that (6) that there is a statistically significant indirect relationship between future anxiety and age because the value of the significance level is less than 0.05. This means that the higher the age of the person infected with the Coronavirus, the less anxiety he has about the future, and this result can be explained that the ambition of the person decreases with the increase of age and this leads to less anxiety about the future, and less thinking about remaining life. Just as the experience of being exposed to a serious disease gives the individual confidence that he has strong health and high immunity capable of passing the most dangerous diseases. Going

through a strong and difficult experience gives the feelings of strength and control, so he feels that he is able to overcome difficult problems and fear decreases, and increase the feeling that being able to overcome the problems will be faced in the future.

5.7 Relationship between psychological security and age among non-infected with Covid19

To answer this question, the Pearson relationship between the psychological security scale and age were extracted according to the age, results are illustrated in Table (7).

Table 7. Pearson relationship between psychological security and age of non-infected individuals

	Variable		Age
		Psychology security	
	correlation coefficient	1	962**
Psychology	Statistical significance		0.000
security	Sample		1953
	correlation coefficient	962**	1
Age	Statistical significance	0.000	
	Sample	1953	

It is clear from the previous table that there is a statistically significant indirect relationship between psychological security and age because the value of the significance level is less than 0.05. This means that the higher the

age of a person who is not infected with the Coronavirus, the less he has a sense of psychological security. This can be explained that perceiving the risk increases with age because health news has indicated through the

media and social networking sites that the disease increases with age. Safety is less because the amount of danger increases with age.

5.8 Significant relationship between future anxiety and age among non-infected with Covid19

To answer this question, the Pearson relationship between the future anxiety scale and age were extracted according to the age, results are illustrated in Table (8).

Table 8. Pearson relationship between future anxiety and age of non-infected individuals

Variable			Age
		Psychology security	
	correlation coefficient	1	.828**
Psychology	Statistical significance		0.000
security	Sample		1953
	correlation coefficient	.828**	1
Age	Statistical significance	0.000	
	Sample	1953	

The above Table (8) shows that there is a direct statistically significant relationship between future anxiety and age because the significance level value is less than 0.05. This means that the higher the age of the person not infected with Coronavirus, the more anxiety about the future, and this result can be explained that the media It was published through the news and on social media that the risk of corona patients increases with age. As a result of this information that has spread in societies, fear increases with age. Wagner (2015) confirmed that self-esteem decreases with age. Also, Ulrich Orth (2010) indicated that self-esteem rises in the form of a positive relationship with age, but it begins to decline around the time of retirement. This confirms that anxiety increases naturally.

6. Discussion

In the midst of the COVID-19, this research sought to find out whether those infected with Covid19 would have increased levels of anxiety and distress as compared to those who were not affected. Despite their higher levels of psychological stability and prospective fear, respondents were very psychologically stable and apprehensive about the future. A strategy

that seeks to decrease the psychological wellbeing and burden should be designed and applied during COVID-19 pandemic lockdowns. Meals, shelter, and financial stability ought to be targeted to reduce the stress that results from the lack of these factors. Preventing future racial and gender disparities especially important for vulnerable populations, especially involving women. To a certain extent, it is also critical to increase awareness of the different publicly available sources of assistance to meet the requirements of the mentally unstable. Mental health care in a specific autonomous district may be obtained from government agencies at the national level. Furthermore, there are activist and professional groups dedicated to meeting the concerns of individuals with mental health issues and promoting the general psychological wellbeing of the community. These organisations may also assist those in need to seek mental health professionals.

According to the literature, significant life events such as moving or changing jobs may result in extreme and persistent psychological stress. From this increase in reported cases, the COVID-19 pandemic now represents a major cause of global stress. Regular schedules were

interrupted due to the closure of companies, businesses, and educational institutions. In certain cases, it was required (recommended) that people stay at home. Behavioural changes are bound to adversely affect the psychological health and emotional wellbeing of an individual.

Another key factor to psychological stress is illness vulnerability and the financial challenges that may follow from not being able to work. People in Jordan experienced insecurity and reduced control due to lockdowns, restrictions, and quarantines, which undoubtedly had a substantial effect on their everyday lives and may possibly have negative consequences on their physical, social, and economic circumstances. Severe measures that were used over an extended period certainly lengthened an already difficult and stressful condition, while the loss of both employment and income may have caused additional concern. It is important to recognise that for respondents who have little or no reliable income, the consequences are far more profound.

Age was also shown to be associated with self-reported concern. Younger generations had higher levels of stress, according to the results. These findings were consistent with the earlier research and others that focus on the effect of catastrophes on the psychological wellbeing of those involved (Shi et al.2020; Huang & Zhao 2020; Leung et al. 2020). The question remains a little hazy as to why specifically this arises. While the elderly may pay closer attention to simulating the impacts of happy emotions, younger individuals may overlook neglecting the negative emotional and financial impacts that "positive effects" have on others.

There were also previous data that showed that stress among females was higher than that of men (Vigna et al., 2019; Ishiguro, 2019). Women seem to be at an increased risk of developing psychological problems (Le, 2020) as a result of an epidemiological study, which concludes that females have an increased

risk of mental health issues (Lim et al., 2018). Other studies believe that greater psychological stress among females is related, in particular, to their job being more strongly affected by COVID-19 and the parental household load (Wang, 2020). Stress disparities between males and females are often associated with variations in the effects of stress people' social. environmental. cognitive processes psychodynamic, and (Slavich & Sacher 2019). Researchers now believe that reactions to stress and the expression of emotion is influenced by gender, as well as whether an individual experiences gender dysphoria (Street & Dardis 2018) and, lately, susceptibility to stress has been explored, and factors such as fluctuations in a woman's reproductive organs (King et al., 2017) and oestrogen levels throughout the menstrual cycle have been included (Albert, Pruessner & Newhouse, 2015). MRI studies that focus on anxiety and stress management have shown an association between cognitive function and emotions. self-referential processing, and cognitive control in males. Females reported higher levels of stress, and these reports are related to their increased demand for psychological services and support. Women's susceptibility to stress is something that needs to be taken into consideration, and the government should give women services to help increase their emotional resilience and relieve their stress (Le et al., 2020).

Furthermore, the discovery of moderate positive associations between COVID-19-related concerns and psychological discomfort suggests that, while indeed they are interconnected, they do not measure the same psychological concept. This is a problem that needs to be analysed more.

The results of this study have a few shortcomings. First, while the study respondents represent a nationwide sampling, a lot of the respondents who were not part of the selected target population were situated outside the region that was hit worst by the pandemic. Additionally, cross-sectional designs have the

additional difficulty of investigating causal connections. Second, we believe we may have had some impact on the spread of the COVID-19 pandemic due to our use of social media. Ultimately, to avoid concerns for the personal safety of respondents, we avoided asking if they were infected or had undergone any diagnostic tests. Nevertheless, the proportion of respondents who had been in close contact with an infected individual or who had undergone any diagnostic tests was rather limited.

7. Implication of the Study

based on the results of the finding, a number of implications can be drawn as follow:

- 1. Providing psychiatrists in Jordan with some aspects to take into consideration dealing with psychological disorders that result from the spread of the Corona virus.
- 2. Assign psychological counsellors in all health and social centres with the mechanism of dealing with those infected with the Corona virus and those who are not infected.
- 3. The results of this research contribute to the design of programs that work to persuade people to take the vaccine against Corona, as the aspect of psychological security and future anxiety are two main axes to work on increasing the motivation to take the vaccine.
- 4. This study contributes to the success of the effective media programs dealing with news related to this pandemic.

8. Conclusion

This research sought to discover the striking differences and significant associations between infected and non-infected individuals in relation to age and gender when it comes to their state of mind regarding their emotional security and future anxiousness. The research design was purely quantitative and has been conducted in Jordan. The respondents in the study were comprised of 1928 individuals who were already infected with the virus and

1932 individuals who were not free from Covid-19 infection. All of the listed individuals took part in an online survey on future fear and psychological security. A descriptive and inferential analysis was done using SPSS 23.0, and a series of independent t-tests and Pearson correlations were used. The results revealed that there is a strong correlation between those who are infected and those who are not infected related to future anxiety and psychological security. Females, though, are less assured regarding future and psychological anxiety compared to males. Age distinct statistical importance as well: It has a direct connection with future anxiety and psychological security and an indirect influence on future physical health. This study adds to the few research studies that look at how a person's mental state is impacted by the pandemic. To examine the Jordanian anxiety levels and the psychological security, the current study aim has successfully filled the void.

References

- [1] Abu-Saad, I. (1999). Self-esteem among Arab adolescents in Israel. The Journal of social psychology, 139(4), 479-486.
- [2] Alakrash, H. M., & Razak, N. A. (2021). Education and the fourth industrial revolution: Lessons from COVID-19. Computers, Materials and Continua, 951-962.
- [3] Alakrash, H. M., & Abdul Razak, N. (2021). Technology-Based Language Learning: Investigation of Digital Technology and Digital Literacy. Sustainability, 13(21), 12304.
- [4] Albert, K., Pruessner, J., & Newhouse, P. (2015). Estradiol levels modulate brain activity and negative responses to psychosocial stress across the menstrual cycle. *Psychoneuroendocrinology*, *59*, 14-24.

- [5] Assagioli, R. (1989). Self-realization and psychological disturbances. Spiritual emergency: When personal transformation becomes a crisis, 27-48.
- [6] Banerjee, D., & Rai, M. (2020). Social isolation in Covid-19: The impact of loneliness.
- [7] Cao, W., Fang, Z., Hou, G., Han, M., Xu, X., Dong, J., & Zheng, J. (2020). The psychological impact of the COVID-19 epidemic on college students in China. *Psychiatry research*, 287, 112934.
- [8] Clemente-Suárez, V. J., Dalamitros, A. A., Beltran-Velasco, A. I., Mielgo-Ayuso, J., & Tornero-Aguilera, J. F. (2020). Social and psychophysiological consequences of the COVID-19 pandemic: An extensive literature review. Frontiers in Psychology, 11, 3077.
- [9] Cudjoe, T. K., & Kotwal, A. A. (2020). "Social distancing" amid a crisis in social isolation and loneliness. Journal of the American Geriatrics Society.
- [10] Doyumgaç, I., Tanhan, A., & Kiymaz, M. S. (2021). Understanding the most important facilitators and barriers for online education during COVID-19 through online photovoice methodology. International Journal of Higher Education, 10(1), 166-190.
- [11] Elmer, T., Mepham, K., & Stadtfeld, C. (2020). Students under lockdown: Comparisons of students' social networks and mental health before and during the COVID-19 crisis in Switzerland. *Plos one*, 15(7), e0236337.
- [12] Eurosurveillance Editorial Team. (2020). Note from the editors: World Health Organization declares novel coronavirus (2019-nCoV) sixth public health emergency of international concern. Eurosurveillance, 25(5), 200131e.

- [13] Huang, Y., & Zhao, N. (2020). Generalized anxiety disorder, depressive symptoms and sleep quality during COVID-19 outbreak in China: a web-based cross-sectional survey. *Psychiatry research*, 288, 112954.
- [14] Ishiguro, A., Inoue, M., Fisher, J., Inoue, M., Matsumoto, S., & Yamaoka, K. (2019). Gender-based risk and protective factors for psychological distress in the midterm recovery period following the great East Japan earthquake. *Disaster medicine and public health preparedness*, 13(3), 487-496.
- [15] Jabr, S. D. (1996). The Effect of Cooperative Learning in English Language on the Ninth Grade Student's Attitudes and Academic Achievement at UNRWA Schools in Nablus District (Doctoral dissertation).
- [16] King, S. B., Toufexis, D. J., & Hammack, S. E. (2017). Pituitary adenylate cyclase activating polypeptide (PACAP), stress, and sex hormones. *Stress*, 20(5), 465-475.
- [17] Le, X. T. T., Dang, K. A., Toweh, J., Nguyen, Q. N., Le, H. T., Toan, D. T. T., ... & Ho, R. C. (2020). Evaluating the psychological impacts related to COVID-19 of Vietnamese people under the first nationwide partial lockdown in Vietnam. *Frontiers in psychiatry*, 11, 824.
- [18] Leung, K., Wu, J. T., Liu, D., & Leung, G. M. (2020). First-wave COVID-19 transmissibility and severity in China outside Hubei after control measures, and second-wave scenario planning: a modelling impact assessment. *The Lancet*, 395(10233), 1382-1393.
- [19] Lim, G. Y., Tam, W. W., Lu, Y., Ho, C. S., Zhang, M. W., & Ho, R. C. (2018). Prevalence of depression in the community from 30 countries between

- 1994 and 2014. *Scientific reports*, 8(1), 1-10.
- [20] Liu, X., Liu, J., & Zhong, X. (2020). Psychological state of college students during COVID-19 epidemic. *Available at SSRN 3552814*.
- [21] Maslach, C., & Jackson, S. E. (2013). A social psychological analysis. Social psychology of health and illness, 227.
- [22] Ojewale, L. Y. (2020). Psychological state and family functioning of University of Ibadan students during the COVID-19 lockdown. *medRxiv*.
- [23] Raeiszadeh, M., & Adeli, B. (2020). A critical review on ultraviolet disinfection systems against COVID-19 outbreak: Applicability, validation, and safety considerations. Acs Photonics, 7(11), 2941-2951.
- [24] Samara, M., Burbidge, V., El Asam, A., Foody, M., Smith, P. K., & Morsi, H. (2017). Bullying and cyberbullying: Their legal status and use in psychological assessment. International journal of environmental research and public health, 14(12), 1449.
- [25] Santos, C. F. (2020). Reflections about the impact of the SARS-COV-2/COVID-19 pandemic on mental health. Brazilian journal of psychiatry, 42, 329-329.
- [26] Serrano-Ripoll, M. J., Meneses-Echavez, J. F., Ricci-Cabello, I., Fraile-Navarro, D., Fiol-deRoque, M. A., Pastor-Moreno, G., ... & Gonçalves-Bradley, D. C. (2020). Impact of viral epidemic outbreaks on mental health of healthcare workers: a rapid systematic review and meta-analysis. Journal of affective disorders, 277, 347-357.
- [27] Shi, J., Huang, A., Jia, Y., & Yang, X. (2020). Perceived stress and social support influence anxiety symptoms of Chinese family caregivers of community-dwelling older adults: a cross-sectional

- study. *Psychogeriatrics*, 20(4), 377-384.
- [28] Slavich, G. M., & Sacher, J. (2019). Stress, sex hormones, inflammation, and major depressive disorder: Extending Social Signal Transduction Theory of Depression to account for sex differences in mood disorders. *Psychopharmacology*, 236(10), 3063-3079.
- [29] Street, A. E., & Dardis, C. M. (2018). Using a social construction of gender lens to understand gender differences in posttraumatic stress disorder. *Clinical psychology review*, 66, 97-105.
- [30] Taylor, E. (2001). Positive psychology and humanistic psychology: A reply to Seligman. Journal of Humanistic Psychology, 41(1), 13-29.
- [31] Vigna, L., Brunani, A., Brugnera, A., Grossi, E., Compare, A., Tirelli, A. S., ... & Riboldi, L. (2019). Determinants of metabolic syndrome in obese workers: gender differences in perceived job-related stress and in psychological characteristics identified using artificial neural networks. Eating and Weight Disorders-Studies on Anorexia, Bulimia and Obesity, 24(1), 73-81.
- [32] Wang, C., Chudzicka-Czupała, A., Grabowski, D., Pan, R., Adamus, K., Wan, X., ... & Ho, C. (2020). The association between physical and mental health and face mask use during the COVID-19 pandemic: a comparison of two countries with different views and practices. Frontiers in psychiatry, 11, 901.
- [33] Alakrash, H., Edam, B., Bustan, E., Armnazi, M., Enayat, A., & Bustan, T. (2021). Developing English Language Skills and Confidence Using Local Culture-Based Materials in EFL Curriculum. LINGUISTICA ANTVERPIENSIA, 548-564.

- [34] Alakrash, H. (2021). Factors Affecting the Application of Communicative Language Teaching CLT in Syrian Schools. TESOL and Technology Studies, 2(1), 1-14.
- [35] Wang, Y., Pan, B., Liu, Y., Wilson, A., Ou, J., & Chen, R. (2020). Health care and mental health challenges for transgender individuals during the COVID-19 pandemic. The Lancet Diabetes & Endocrinology, 8(7), 564-565.
- [36] Wind, T. R., Rijkeboer, M., Andersson, G., & Riper, H. (2020). The COVID-19 pandemic: The 'black swan' for mental health care and a turning point for ehealth. Internet interventions, 20.