RELATIONSHIP KNOWLEDGE AND COMMUNITY BEHAVIOR IN APPLYING SOCIAL DISTANCE AS ONE OF THE COVID-19 PREVENTION MEASURES

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ABSTRACT

Background: Covid-19 can spread from person to person people through splashes from the nose or mouth which comes out when people who contract Covid-19 cough or exhale. People most at risk contracting this disease is a person who is in close contact with Covid-19 patients including those who treat.

Objective: Covid-19 has been declared a pandemic world by WHO (WHO, 2020). Nationally it has been specified status of disaster emergency outbreak of disease due to Coronavirus in Indonesia.

Method: The design of this study is a cross-sectional study with non-sampling techniques probability sampling is purposive sampling. Sample in this study, there were 50 people.

Result: the results of the study showed that many respondents have a good knowledge category 44 people, and have positive behavior that's as many as 40 people. Next, the results of the analysis using fisher's exact test obtained results p = 0.000 (< 0.05) which means there is a relationship between knowledge and behavior of the community in applying social distance as a precautionary measure Covid-19.

Conclusion: From the results of the study it can be concluded that there is a relationship between knowledge and community behavior in applying social distance as one of the Covid-19 prevention measures in Bawalipu Village.

INTRODUCTION

Covid-19 has been declared a world pandemic by World Health Organization (WHO, 2020). Nationally through the decree of the head of the National Disaster Management Agency No. 9A of 2020 which was updated through decree number 13 A of 2020 has been established the status of certain emergency disasters due to coronavirus outbreaks in Indonesia (Kemenkes RI, 2020b). Coronavirus disease 2019 (COVID-19) is an emerging respiratory infections and is known to cause illness ranging from the common cold to severe acute respiratory syndrome. At present, the disease has been posing a serious threat to the communities, and it is critical to know the communities' level of adherence on COVID-19 prevention measures Shewasinad Yehualashet S, et al, 2021).

Covid-19 can be spread from person to person through splashes from the nose or mouth that come out when people infected with Covid-19 cough or exhale. The spark that comes out will fall and hit other objects and surfaces around it. If the object or surface is touched or touched by the hand, then the hand touches the eyes, nose, or mouth, then the person will contract Covid-19 (Rohita, 2020).

People most at risk of contracting this disease are people who are in close contact with Covid-19 patients including those who treat Covid-19 patients. Standard recommendations to prevent the spread of infection are through regular hand washing using soap and running water, applying to cough and sneezing ethics, avoiding direct contact with livestock and wild animals, wearing masks, and avoiding close contact with anyone who shows symptoms of respiratory diseases such as coughing and sneezing. In addition, implementing Infection Prevention and Control (IPC) while in health facilities, especially emergency departments, and implementing health protocols such as social distance (Kemenkes RI, 2020a).

Social distancing policies to ensure physical distance between people have become a crucial strategy in the battle against the spread of the coronavirus (Nilsen, 2020). Social distancing is one of the mitigation strategies recommended to reduce the risk of morbidity and mortality caused by COVID-19. Community compliance with social distancing is a part of the pandemic control (Yanti, et all, 2020). Social distancing, or now being converted into physical distancing, is a series of non-medical interventions or measures taken to prevent the spread of infectious diseases by maintaining physical distance between people and reducing the number of people coming into contact with each other. This strategy is applied by keeping a distance of about six feet or two meters from others as well as avoiding gathering together in large groups (5 people or more).

During the Covid-19 pandemic, the World Health Organization (WHO) has suggested references to " physical restriction" as a substitute alternative to "social restrictions", following the idea that the term is related to physical distance that prevents transmission; but people can stay socially connected through technology (Ministry of Home Affairs, 2020).

Efforts to break the chain of the spread of Covid-19 require a good understanding and knowledge from all elements including the community. Knowledge about Covid-19 disease is very important so as not to cause an increase in the number of cases of Covid-19 disease. Knowledge of Covid-19 patients can be interpreted as the result of knowing from the patient about his illness, understanding the disease, how to prevent, treatment and complications (Mona, 2020).

Knowledge is the most important domain in the formation of behavior. In addition to knowledge from the public, the knowledge, attitudes, and actions of public figures or governments can describe their behavior to encourage the community in prevention efforts. So that people can behave well. Behavior is a part of a person's actions that can be studied and observed. One of the factors that influence human behavior or society is the level of knowledge (Donsu, 2017). Based on the preliminary study and the description above, this study aims to identify the relationship of knowledge with behavior in the community in applying social distance as one of the preventive measures of Covid-19.

METHODS

The design of this study is cross-sectional. This research was conducted in Bawalipu Village and was conducted in June - August 2020. The sample in this study is a community in Bawalipu Village that meets the inclusion and exclusion criteria that have been set by researchers. The inclusion criteria in this study include:

a. People who can be reached where to live at least 1 RT / RW

b. Willing to be a respondent

c. Cooperative or can be interviewed verbally

The sampling technique used in this study is nonprobability sampling in the form of purposive sampling. The number of samples in this study using the formula slovin obtained a sample of 50 people. The data analysis was used in univariate and bivariate. The bivariate analysis uses the chi-square test, to see the relationship between each free variable and the bound variable. If, the statistical test results of the value p-value < 0.05 then there is a significant relationship between the free variable and the bound variable, and vice versa. The instruments in the study used questionnaires.

RESULTS

Univariate Analysis

Table 1. Distribution Based on Respondent Characteristics

Characteristics	N	%
Age		
16 – 34	28	56
35 – 54	22	44
Education		
Elementary School	2	4
Junior High School	15	30
Senior High School	15	30
Bachelor's Degree	18	36
Knowledge		
Good	44	88
Bad	6	12
Community Behavior		
Positive	40	80
Negative	10	20
	50	100
Total		

Sources: Primary data, 2020

Based data in table 1 shows that most respondents aged between 16 -34 years, which is as many as 28 people (56%). As for the education category, the majority of respondents educated bachelor's degree is as many as 18 people (36%). Some respondents have a good knowledge category of 44 people (88%) and the behavior of the majority of people is in the positive category of 40 people (80%).

Bivariate Analysis

Table 2. The Relationship Between Knowledge and Community Behavior in Applying Social Distance as One of the Covid-19 Prevention Measures

		Behavior		p
		Positive	Negative	
Knowledge	Good	39	5	0,00
	Bad	1	5	0

Sources: Primary data, 2020

Based on table 2 shows that respondents who are in good knowledge categories and have positive behaviors as many as 39 people, while those who have negative behaviors as many as 5 people. Respondents who had bad knowledge had positive behavior as many as 1 person and behaved negatively as many as 5 people. Furthermore, the results of the analysis using fisher's exact test obtained results p = 0.000 (< 0.05) which means there is a relationship between knowledge and community behavior in applying social distance as one of the prevention measures for Covid-19.

DISCUSSION

Based on table 2 shows that most respondents who are good knowledge categories and have positive behaviors as many as 39 people, while those who have negative behaviors only 5 people. Respondents who had bad knowledge had positive behaviors of only 1 person and

behaved negatively as many as 5 people. This indicates that the higher or better a person's knowledge of something will affect the behavior of that individual. The results of the analysis using fisher's exact test obtained results p = 0.000 (< 0.05) which means there is a relationship between knowledge and community behavior in applying social distance as one of the preventive measures of Covid-19. This is following the theory that knowledge is the result of "knowing" and this occurs after people have to sense a particular object. Knowledge about various ways in achieving health maintenance, how to avoid disease, will increase public knowledge (Priyanto, 2018). Another study conducted by Mujiburrahman showed that the value of p-value = 0.001 (p<0.05) which means there is a relationship between knowledge and Covid-19 preventive behavior in the community.

Knowledge plays an important role in the determination of complete behavior because knowledge will form a further belief in perceiving reality, providing the basis for decision making and determining behavior towards certain objects (Novita et al., 2018) so that it will affect a person's behaving. Researchers assume that knowledge determines each individual so much that it will affect behavior in everyday life. Because the higher the level of a person's knowledge is the easier it is to determine what he should choose and what he has to do in his life.

In addition, knowledge has a close relationship with the decisions it will make, because with knowledge one has a foundation for making choices. Moreover, this high level of knowledge is also supported by the level of education, the level of education a tall person will find it easier to get access to information about a person's problems (Mujiburrahman et al., 2020).

The knowledge–attitude–behavior model modifies human health-related behaviors by dividing changes into three continuous processes, i.e., knowledge acquisition, belief generation and behavior formation (Liu et al., 2016). A study by Jannuzzi et al. (2020) showed attitude and subjective norms together explain 30% of the variability in intentions. Jannuzzi et al. defined attitude as a psychological construct, a mental and emotional entity that inheres in, or characterizes a person. It is an individual's predisposed state of mind regarding a value, precipitated through a responsive expression towards oneself. A subjective norm is the perceived social pressure to engage or not to engage in a behavior. It is necessary to include motivational strategies and targeted strategies to strengthen attitude and subjective norms in designing an intervention (Ferreira and Pereira, 2017).

Preventive actions that can taken to prevent the spread COVID-19 is a health protocol, with implement several actions including wear masks, wash hands and keep

your distance when socializing is good in the educational environment and when outside the educational environment (Melnick & Darling-Hammond, 2020).

CONCLUSION

Based on the results of the analysis using fisher's exact test obtained results p = 0.000 (< 0.05) which means there is a relationship between knowledge and community behavior in applying social distance as one of the prevention measures for Covid-19 in Bawalipu Village.

RECOMMENDATIONS

Researchers can further learn more about other factors that influence an individual's behavior. There may be several other factors that are very strong to shape a person's behavior, one of which is strengthening both inside and outside. Based on the results of this study, other studies are still needed to assess other factors that affect a person's behavior, especially regarding the behavior of preventing the spread of Covid-19.

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