



THE EFFECT OF LEAFLET MEDIA HEALTH COUNSELING ON PUBLIC KNOWLEDGE ABOUT THE IMPLEMENTATION OF THE COVID-19 HEALTH PROTOCOL

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ABSTRACT

The Corona Virus Health Protocol 2019 (Covid-19) is a policy set by WHO as the World Health Organization and by the Government of Indonesia to overcome the Covid-19 pandemic. This study aims to identify the effect of leaflet media health counseling on public knowledge about the implementation of covid-19 health protocol in LK 06 Kelapa Tujuh, North Lampung. This research is really important as kind of prevention to face this pandemic because no one knows when will this pandemic end. The aim is to find out public knowledge about the Covid-19 health protocol before and after being given counseling. The type of research used is quantitative research with True Experiments research design using the Pretest-Posttest Control Group Design approach. The population is the head of the family in the LK 06 Kelapa Tujuh with the sample criteria being traders. The research instrument use a questionnaire sheet with validity test obtained R Table of 0.444. The statistical test use the Independent Samples t Test. The results show that, based on the answers to the knowledge and behavioral application questionnaire, the results of the Independent Samples t Test show that the Sig value or p value = 0.000 is smaller than 0.05. So, it can be concluded that there is an influence from Leaflet Media Health Counseling on Public Knowledge about the Implementation of the Covid-19 Health Protocol.

Keywords: covid-19 health protocol; knowledge; leaflet media health counseling

INTRODUCTION

Severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) or better known as the corona virus is a virus that infects the respiratory system. This virus was discovered in early 2000 which then reappeared at the end of 2019 and called Covid-19, namely Corona Virus Disease 2019. This Covid-19 causes attacks of respiratory infections ranging from mild infections, such as flu, to severe respiratory infections, such as pneumonia, MERS, SARS and death (Haikal, 2020). Starting from the city of Wuhan, China, the corona virus has spread throughout the world so quickly. This Covid-19 has been declared a pandemic by World Health Organization (WHO) since the beginning of 2020. This pandemic is a very dangerous situation because this virus has become an epidemic that threatens everyone's life.

The delay in making policies to prevent this virus has resulted in the spread of the virus spreading throughout the world. One of them is the policy in terms of the flow of people's travel. The flow of people traveling both domestically and internationally by the Chinese community is still ongoing and causes of the spread of the virus throughout the world. The government is not ready to respond to this incident resulting in neglect of handling and also health workers who are not ready to anticipate the virus. So it is suspected that the first case declared by the government was not an imported case, but that it had spread locally in Indonesia. Due to this, public communication and policy making by the government are affected, so that the public does not yet have any knowledge of how to respond to the current conditions. Indonesia, which has so many gateways in various parts of Indonesia, is certainly a huge risk for the virus to enter undetected (Moch Halim Sukur, 2020).

Lampung Province as the gateway to Sumatra has a big potential to be infected since the beginning of the pandemic entering Indonesia. Lampung as the main gate in and out of transportation between Java and Sumatra, which is very dense, cannot be stopped, especially logistics transportation so that it can be a very big factor for Lampung Province to get infected more quickly. Research by (Devi Pramita Sari, 2020) resulted in a value = 0.004 and X^2 Count = 15.331 > X^2 Table 3.841 showed that 31% of the community had poor knowledge of COVID-19 and 69% had good knowledge. (Ni Putu Emy Darma Yanti, 2020) conducted research and found that 30% of the sample had poor knowledge and 70% had good knowledge about COVID-19 knowledge. Research by (Jaji, 2020) with a deviation of 0.46094 and $p = 0.001$, before being given health education to the community, it was found that 56% of the sample had less knowledge and 44% had good knowledge about preventing covid-19, and after being given health education, 100% results were obtained. well-informed community.

North Lampung is an area where the number of positive COVID-19 sufferers is in the top three in Lampung. Based on the pre-survey that has been carried out, there are many people who are active in their environments to public places without using health protocols, so they could be the source of the spread of the virus. Following up on this, from the results of interviews conducted randomly with several people, since the pandemic took place, they have never received any counseling directly from the local government or the local community health center regarding COVID-19. So that people still have minimal knowledge to respond to current conditions and tend to be apathetic about the importance of implementing health protocols (Utara, 2021). Health protocols as a preventive measure to stop the spread of the corona virus. The form of the health protocol is to use a mask from the chin to the nose, clean hands with soap after every activity, use hand sanitizers instead of water, maintain social distance, avoid areas that are determined by the red zone criteria, namely areas where the spread of the virus is out of control.

The implementation of the above health protocols will run optimally with community cooperation in a disciplined manner in implementing health protocols. For this reason, it is necessary to provide information on what knowledge the public should know in order to prevent the transmission of this virus. The aim is to find out public knowledge about the Covid-19 health protocol before and after being given counseling. With this strong background, research needs to be done to find out whether health education has a significant influence on public knowledge about the implementation of the Covid-19 health protocol.

METHOD

This research is quantitative using True Experiments design with Pretest-Posttest Control Group Design approach. The study gave treatment to the first group as a sample group and no treatment to the second group as a control group. Before the researcher conducted counseling to the sample, the researcher assessed the knowledge of the sample by filling out a questionnaire given to the sample. After the researchers conducted the pretest assessment, the researchers conducted health education to the sample using leaflets. Leaflets were given to samples and researchers explained about health protocols in preventing covid-19 at the same time. Then a question and answer session was held to find out if there was information that was not understood by the sample. The control group was not given any treatment. The posttest was carried out 3 days after being given treatment so that the information provided could be understood by the sample first. The control group was also given a posttest 3 days after the pretest as a control (Sugiyono, 2010). The population is the head of the family registered in LK 06 Kelapa Tujuh, North Lampung, with the job criteria as a trader. Using the Slovin formula, the number of samples was 60 people. Data processing uses descriptive statistical calculations and independent samples t test, to determine whether or not there is an effect of leaflet media health education on public knowledge.

RESULTS AND DISCUSSION

Table 1.
 Frequency Distribution of Respondents in LK 06 Kelapa Tujuh

Code	Category	f	%
Gender	Male	53	88,3
	Female	7	11,7
Age	30 - 50 Years	60	100
Kinds of Trader	Conventional	12	20
	Shop	8	13,3
	Stall	40	66,7
Education	Bachelor	10	17
	SHS	29	48
	< SHS	21	35

Region LK 06 has the majority of family heads with male sex of 53 respondents (88.3%). All respondents aged between 30-50 years who are included in the productive age group according to the Central Statistics Agency (BPS) are 60 people (100%). All respondents are traders with the most types of kiosk traders being 40 people (66.7%). Most of the respondents have a high school education level according to the standards set by the government of 29 respondents (48%).

Table 2.
 Overview of Sample Group Knowledge

Pretest result	Amount	Percentage
Very Good	-	-
Good	-	-
Quite Good	19 people	63%
Not Good	11 people	37%
Total	30 people	100%
Posttest result	Amount	Percentage
Very Good	18 people	60%
Good	12 people	40%
Quite Good	-	-
Not Good	-	-

Table 3.
 Overview of Sample Group Knowledge

Knowledge	f	%
Pretest result		
Very Good	-	-
Good	1 orang	3
Quite Good	28 orang	94
Not Good	1 orang	3
Posttest result		
Very Good	-	-
Good	1 orang	3
Quite Good	28 orang	94
Not Good	1 orang	3

Table 2, the results of the pretest assessment were 19 people (63%) with quite good criteria and 11 people (37%) with poor results. On the results of the posttest assessment, 18 respondents (60%) received the Very Good criteria and 12 people (40%) received the Good criteria. Table 3, the results of the pretest assessment were 1 person (3%) with good results, 28 people (94%) with fairly good results, and 1 person (3%) with good results. On the results of the posttest assessment, respondents were 1 person (3%) with good results, 28 people (94%) with fairly good results, and 1 person (3%) with good results.

Table 4.
Overview of Correlation Test Data

Group	Group Statistic	
	Mean	Std. Deviation
Sample	11.90	0.448
Control	0.33	0.305

From table 4, it is known that the average value of the pretest-posttest assessment difference for the sample group is 11.90, while for the control group it is 0.33. It can be seen that the difference in the average pretest-posttest difference between the sample group treated and the control group without treatment is 11.57.

Table 5.
Correlation Test Results

Independent Samples Test				
T	Df	Sig (2-tailed)	Lower	Upper
21.349	58	0.000	10.482	12.651

Based on the output of the t test in the Equal variances assumed section, sig. (2-tailed) or p-value of 0.000 is less than 0.05. The conclusion from this value is that Ho is rejected while Ha is accepted, the interpretation is that there is an effect of leaflet media health counseling on public knowledge about the Covid-19 health protocol. These results show a significant value from the results of the sample group that received intervention with the control group without receiving intervention. The highest value obtained is 12,651 and the lowest value is 10,482. T count in the table is 21,349. The formula to get the value of t table is $(\alpha/2)$; (df) namely $(0.05/2)$; 58 is equivalent to 0.025 ; 58 then the t table is 2.00172. The t count obtained is 21,349 which is higher than the t table 2.00172, so it is determined that Ho is rejected while Ha is accepted which can be interpreted that the effect of leaflet media health education has an influence on public knowledge about the covid-19 health protocol (Prof. Dr. Sudjana, 2005).

$$Effectivity = \frac{R}{T} \times 100\%$$

$$Effectivity = \frac{25}{30} \times 100\%$$

$$Effectivity = 83\%$$

Table 6.
Eligibility Criteria

No.	Score (%)	Eligibility Criteria
1	< 21 %	Very unworthy
2	21 – 40 %	Not Worthy
3	41 – 60 %	Quite Worthy
4	61 – 80 %	Worthy
5	81 – 100 %	Very Worthy

After getting the results of the significance of the research variables, the data obtained from the results of SPSS processing were then determined the value of the effectiveness and feasibility of these variables in the form of leaflet media health counseling interventions. The results of the calculation of the effectiveness analysis above, the effectiveness value of the research variables is 83%. This value is converted into a table of eligibility criteria, so it is found that the feasibility level of this research variable is stated to be very feasible. In the results of the pretest assessment, the criteria for both groups were not so good. In the pretest of the sample group, 63% of respondents with quite good knowledge criteria and 37% not good criteria were found. In the control group, there were 3% with good criteria, 94% of respondents with quite good criteria and 3% of respondents with not good criteria.

The results of interviews with all respondents stated that they had never received information about the Covid-19 health protocol through health counseling from the government health center or other parties. The low level of public knowledge is due to the fact that people still do not have adequate sources of information. (Yeni, 2015) states that it is in line that a person's level of knowledge will be greatly influenced by how much information sources they have. The public gets information either through mass media such as television or social media, but the information obtained tends to be difficult to understand so that the public gets biased information because there is too much different information and cannot confirm the truth.

The level of public knowledge after the intervention was carried out in the form of health counseling about the covid-19 health protocol with leaflet media showed an increase in the sample group where the posttest results after being given the intervention showed very good criteria results of 60% and good criteria 40%. There was no change in the control group where the pretest results were good at 3%, quite good 94%, and not good at 3%. Then the post test without intervention obtained the same assessment results, namely good criteria of 3%, quite good 94%, and not good 3%.

Leaflets as information media in health education activities have an effective and efficient nature where information can be arranged in a simple and clear form so that everyone who reads it can receive and understand the information correctly. The use of language in leaflets is one of the advantages of this media, that we can adjust it according to the respondent's target, such as using a language that is understood by everyone to using the local language that will receive treatment (Masruroh, 2019). Health education using leaflet media with individual counseling methods or door to door gives a good influence on the results of health education. Communication can occur better because respondents can respond directly when there is information that is not clear or can ask directly when there are questions to be asked so that with this kind of communication messages can be conveyed more clearly, can be processed by the mind and all messages can be received (Azizah Saleh, 2018).

The results of the analysis of the relationship test using SPSS for Windows, got a sig value. (2-tailed) or p-value of 0.000 is less than 0.05. The t count in the table is 21,349 and the t table value is 2.00172, so that the t-count is 21,349 higher than the t table 2.00172. It was determined that the leaflet media health education had a major influence in the form of differences in the level of knowledge between the two groups.

Health counseling as a medium of information to disseminate existing information to all circles of society in order to create good coordination by all parties. Health counseling that goes directly to the community can be a very good source of information which will create direct interaction between the community and health workers so that information can be well received. This activity is very effective because it can be adjusted to the targets that will be given health education, can be applied to community groups to individuals. Determination of media and methods to be applied in providing information has an important role. With the right methods and media in accordance with the target criteria, it will facilitate the process of delivering information. It can be seen in the results of the analysis of research that has been carried out that there is an increase in knowledge when respondents have not received intervention and when respondents have been given interventions in the form of

health education leaflets about the Covid-19 health protocol, the value proves that leaflet media health counseling is very good to use as a health education media in public.

In accordance with the results of research by (Jaji, 2020) it was stated that there was an increase in knowledge about preventing the transmission of Covid-19 from 43.73% of people with good knowledge to 100% of people with good knowledge after receiving education via leaflet media. Information that has been compiled concisely and clearly will become information that is easily accepted when conveyed by the public. The public can receive the information well and without biased information so that understanding can be harmonized according to the correct information. Grammar can also be adjusted to the target who will be given counseling, such as using simple language, explaining terms that are difficult to accept, or even being able to use local languages so that people are more open in accepting the information conveyed.

The sample group that was given treatment in the form of leaflet media health education resulted in a significant increase in knowledge. An attractively designed leaflet media will receive careful attention from the public. During the treatment of leaflet media health counseling, the public can be invited to communicate well in two directions where in addition to getting new information, the community can also straighten the information they have received and is not in accordance with the actual information.

The control group did not receive leaflet media health education intervention, where there was no information intake they received. Without receiving health education from any party directly, this group only gets information from television or social media, especially those whose sources of information are not clearly known and also lack the ability to confirm the truth of the information they receive. So from the results of the pretest and posttest there is no difference in the form of increased knowledge.

The effectiveness value of the leaflet media health education variable is 83% with the eligibility criteria included in the very feasible category. This analysis is a reinforcement of the results of the study which states that the independent research variables affect the dependent research variables. It is proven from the effectiveness value and feasibility category which are declared effective and very feasible.

CONCLUSION

The description of public knowledge before the leaflet media health counseling intervention was carried out, namely the pretest of the sample group there were 19 people (63%) with Quite Good and 11 people (37%) with Not Good results and Mean 13.10. The control group pretest contained 1 person (3%) with Good results, 28 people (94%) with Quite Good results, then 1 person (3%) with Not Good results and the mean of 14.93. The description of public knowledge before the leaflet media health counseling intervention was carried out, namely the posttest sample group of 18 respondents who got Very Good results (60%) then 12 people (40%) got Good results and a mean of 25.0. The posttest control group contained 1 person (3%) with Good results, 28 people (94%) with Quite Good results, then 1 person (3%) with Not Good results and a mean of 15.27. Correlation test results obtained sig. (2-tailed) or p-value which is 0.000 lower than 0.05 and t count which is 21.806 higher than t table 2.0172. It is stated that H_0 is rejected and H_a is accepted, it can be interpreted that leaflet media health counseling has an influence on public knowledge about the Covid-19 health protocol (prokes) The effectiveness value is 83% and is included in the Very Eligible category.

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