



Relationship Community Knowledge About Covid-19 with Anxiety in The Working Area of 37 Gantiwarno Public Health Center Pekalongan, East Lampung in 2021

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ARTICLE INFO

Article history:

Received 11 March 2021

Accepted 21 June 2022

Published 10 July 2022

Keyword:

Anxiety
Covid 19
Knowledge

ABSTRACT

The COVID-19 pandemic, which has hit almost all countries and contributed to the largest number of deaths in the last two years, has had a huge impact not only on society but also on various development sectors. In addition, the psychological impact also has an impact on residents' fear and anxiety to carry out activities outside the home which also affects the mental health of individuals who experience lifestyle changes with limited and limited socialization. This type of research is a quantitative descriptive study with a cross-sectional design to see the relationship between public knowledge about covid 19 and anxiety. This research plan will be located in the Working Area of 37 gantiwarno Public Health Center s Pekalongan, East Lampung. The research subjects are the people of Jojog Village who are in the working area of the 37 gantiwarno Health Center with a sampling technique using simple random sampling totaling 357 people. The targeted mandatory output is the publication of scientific articles in accredited national journals in 2021. The TKT of this research is the Vaccine/Biological Health Type with the status of the basic principles of technology being researched and reported where the study of scientific literature on the basic principles of the technology developed already exists, the initial survey has started and assessed, and potential scientific applications for problem-solving have been described.

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Kata kunci:

Kecemasan
Covid 19
Pengetahuan

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DOI: 10.30604/jika.v7iS1.1204

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ABSTRAK

Pandemi covid 19 yang melanda hampir di seluruh negara dan menyumbang kematian terbesar dalam dua tahun terakhir ini memberikan dampak yang sangat besar tidak hanya pada masyarakat tetapi juga pada berbagai sektor pembangunan. Selain itu dampak psikologis juga memberikan dampak ketakutan dan kecemasan warga untuk melakukan aktivitas di luar rumah yang berimbas juga terhadap kesehatan mental individu yang mengalami perubahan gaya hidup dengan sosialisasi yang terbatas dan dibatasi. Jenis penelitian ini adalah penelitian deskriptif kuantitatif dengan rancangan cross sectional untuk mengetahui hubungan pengetahuan masyarakat tentang covid 19 dengan kecemasan. Rencana penelitian ini akan berlokasi di Wilayah Kerja Puskesmas 37 Gantiwarno Pekalongan Lampung Timur. Dengan subjek penelitian adalah masyarakat Desa Jojog yang berada di Wilayah kerja Puskesmas 37 Gantiwarno dengan teknik pengambilan sampel menggunakan simple random sampling yang berjumlah 357 orang. Luaran wajib yang ditargetkan berupa publikasi artikel ilmiah dalam jurnal nasional terakreditasi tahun 2021. TKT penelitian ini adalah Jenis Kesehatan Vaksin/Hayati dengan status prinsip dasar dari teknologi diteliti dan dilaporkan dimana studi literatur ilmiah

tentang prinsip dasar teknologi yang dikembangkan sudah ada, survey awal telah dimulai dan dinilai, dan potensi aplikasi ilmiah untuk pemecahan masalah telah digambarkan.

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INTRODUCTION

Corona viruses are a wide group of viruses that can infect humans and animals. It causes infections of the respiratory system in humans, ranging from the ordinary cold to life-threatening diseases such as Middle East Respiratory Syndrome (MERS) and Severe Acute Respiratory Syndrome (SARS). Corona virus Disease-2019 is caused by SARS-COV2, a corona virus that is identical to the one that caused Severe Acute Respiratory Syndrome (SARS) in 2003 but is caused by a new type of virus (COVID-19). [Notoatmodjo, 2014].

COVID-19 symptoms are non-specific, and an infected person may not show any symptoms at all. The people who got fever (88 percent) and dry cough were the two most frequent symptoms (68 percent). Fatigue, increased phlegm production, loss of smell, shortness of breath, muscular and joint discomfort, sore throat, headache, chills, vomiting, hemoptysis, diarrhea, or cyanosis are some of the less common symptoms. The purpose of COVID-19 prevention is to keep ourselves and others safe. To suppress the COVID-19 pandemic, the World Health Organization (WHO) has officially issued guidelines on how to prevent the Coronavirus which have been approved by the Indonesian Ministry of Health (2020) as follows: implementing a healthy and clean lifestyle, wearing masks, keeping distance and avoiding crowds., increase health service facilities and test tracing, multiply the latest information and do not believe in hoaxes, seek treatment when sick, and limit access in and out of the area [Kementerian Kesehatan Republik Indonesia, 2021].

Knowledge is the consequence of a person's senses detecting specific objects, particularly (eyes, nose, ears, and so on). Education, mass media/information sources, socio-cultural and economic considerations, environment, experience, and age are just a few of the factors that influence knowledge. 2014, Notoatmodjo There are three categories on the knowledge level measurement scale: If the value is 75 percent, the knowledge level is good; if the value is 56-74 percent, the knowledge level is sufficient; and if the value is 55 percent, the knowledge level is poor. [2010, Arikunto].

Anxiety or anxiety is a vague and pervasive worry associated with feelings of uncertainty and helplessness. There are several degrees of anxiety, including mild anxiety related to daily life, moderate anxiety characterized by Shortness of breath, elevated pulse and blood pressure, dry mouth, restlessness, and constipation while cognitive responses are narrowing of the perception area, external stimuli cannot be accepted., focuses on what is of concern. Severe anxiety is characterized by the perception of being very less focused on details, very limited attention span, unable to concentrate or solve problems, and unable to learn effectively. At this stage the individual experiences headache, dizziness, nausea, shaking, insomnia, palpitations, tachycardia, hyperventilation, frequent urination and defecation, and diarrhea. Emotionally the individual experiences fear and all attention is focused on him. The final stage is panic which is associated with fear, influence, and terror [Notoatmodjo, 2014].

Anxiety assessment in this study uses the CAS (Corona virus Anxiety Scale) which contains 5 question items and has been used in several countries, using an assessment with a Likert scale measured on a scale of 0-1 [Cuneyt et al, 2021].

The purpose of this research is knowing public knowledge and anxiety about covid 19 and knowing the relationship between knowledge and anxiety about covid 19. With the achievement of the objectives, the benefits that can be felt from this activity are expected to be used as a reference in identifying knowledge with anxiety about covid 19.

METHOD

This type of research is quantitative. This type of quantitative research is research by obtaining data in the form of numbers. The sample selection method in this study used simple random sampling. Sample criteria: productive age 15-64 years, willing to be a respondent in the study, did not fill out the questionnaire to complete.

Research Location

The research was conducted throughout the community of Jojog Village where Jojog Village is still in the working area of the 37 Gantiwarno Health Center Pekalongan Lampung.

Population and Sample

The population is the entire object of research (Notoatmodjo, 2014). The population of this study is the entire community of Jojog Village, which is still within the 37gantiwarno Public Health Center's operational area of Pekalongan, East Lampung, and is the village with the highest COVID-19 cases of 3,320 people. The sample is part of the overall object of research and is considered to represent the entire population (Notoatmodjo, 2014). The sample in this study used simple random sampling, amounting to 357 people.

Data Processing

Several stages of the technical procedure carried out are:

- a. Data collection was carried out using a google form which was distributed in the form of a link accompanied by a brief explanation to respondents about the aims and objectives of the research on the initial page of the questionnaire.
- b. The next activity is giving consent as evidence of being part of the research and using his/her data for this research.
- c. Respondents were asked to fill in all the questions according to the instructions given in the questionnaire question format. When finished, it will be collected automatically.

- d. Data retrieval is done by transferring data obtained from Google Forms and entered into a computer so that it can be processed. Collecting the results of data collection for further processing and analysis.

Data Analysis

After the data has been collected and then analyzed, the analysis of the data by checking the correctness of filling out the questionnaire to make it easier to analyze the data using

Univariate analysis was conducted to see the frequency distribution of the dependent variable and the independent variable, and bivariate analysis was conducted to see the relationship between knowledge and anxiety about covid 19 in the Jojog Village community where Jojog Village is still in the working area of the 37 gantiwarno Health Center Pekalongan, East Lampung. The statistical test used is the Chi-square test at a confidence level of 95 % and a significance level (α) of 0.05.

RESULTS AND DISCUSSION

Table 1.
Frequency Distribution of Respondents Based on Characteristics in the Work Area of the 37 gantiwarno Pekalongan Health Center, East Lampung .

Category	Frequency	Persentase
Age		
15-24 y.o	44	12.3%
25-34 y.o	66	18.5%
35-44 y.o	100	28.0%
45-54 y.o	100	28.0%
55- 64 y.o	47	13.2%
Gender		
Male	180	50,4%
Female	177	49,6%
Type of Work		
Civil Servant	11	3,1%
General Employees	52	14,6%
Farmer	116	32,5%
Entrepreneur	54	15,1%
Not Working	104	29,1%
Students	20	5,6%
Type of Education		
Elementary School	37	10,4%
Middle School	98	27,5%
High School	163	45,7%
University	59	16,5%
Total	357	100%

According to table 1, the majority of respondents are between the ages of 35 and 44, and 45 and 54. Each of which amounts to 100 respondents (28 %). Next, the gender of the respondents, most of them was male, namely 180 people (50.4 %). Most of the respondents' occupations were farmers as many as 116 people (32.5 %). Most of the respondents had a high school education/equivalent as many as 163 people (45.7 %).

According to table 1, the majority of the respondents are between the ages of 46 and 60, with as many as 140 respondents (39.2 %). The data shows that the population is in the pre-elderly category. Most of the respondents are male, as many as 180 respondents (50.4 %), and most of the parents' education is in the high school graduate category, as many as 163 respondents (45.7 %) which indicates the category of middle education. The occupation of parents in the category of farmers is 116 respondents (32.5 %) which shows that the income of one of the provinces in Indonesia, especially Lampung, is the largest in agriculture.

Most of the respondents with high knowledge were 215 respondents (60.2 %). A different study was found in Turkey which showed that respondents' knowledge was still not correct in answering the method of spread, the risk of being a carrier of the disease, there was no treatment for the infected, there was no vaccine and travel did not make it a

source of transmission. [Baser et al, 2020] A different study conducted in Indonesia by distributing data in 17 provinces resulted in better knowledge of early signs of symptoms and supportive treatment than questions about individuals with comorbidities as well as obese or overweight people and the elderly. [Rias et al, 2020) Research in India shows that educated respondents and especially health workers are more sensitive to information about Covid-19. From some of the questions, respondents answered the question correctly on prevention by washing hands can stop the spread of infection [Roy, 2020].

Based on table 1 above, shows that most of the respondents with low anxiety were 324 respondents (90.8 %). The same study was found in Turkey which showed respondents' anxiety in the mild category using the Beck Anxiety scale instrument. [Baser et al, 2020] A different study was conducted in Indonesia by distributing data in 17 provinces. It was found that high anxiety results were obtained from respondents who had fought against Covid-19 and managed to control the disease [Rias et al, 2020]. Research in India showed that respondents' anxiety was high and took precautions by what the government recommended, namely using gloves, hand sanitizers, and keeping a distance [Roy, 2020].

Table 2.
Distribution of the Frequency of Public Knowledge and Anxiety About COVID-19 in the Work Area of the 37 gantiwarno Pekalongan Health Center, East Lampung.

Description	Frequency	Persentase
Pengetahuan		
Low	49	13,7%
Middle	93	26,1%
High	215	60,2%
Total	357	100,0%
Kecemasan		
Low	324	90,8%
Middle	31	8,7%
High	2	0,6%
Total	357	100,0%

Based on table 2, it is known that most of the respondents have good knowledge about COVID-19, as many as 187 people (52.4%). Public knowledge, the highest score of respondents who answered correctly was on question number 6, namely about signs and symptoms of COVID-19 as many as 321 respondents (89.9%), then questions about risk

factors for COVID-19 as many as 304 respondents (85.2%) and understanding of COVID-19 as many as 295 respondents or 82.6%.

Based on table 2 above shows that most of the respondents have a low level of anxiety as many as 324 respondents (90.8%).

Table 3.
Relationship between Knowledge and Public Anxiety About COVID-19 in the Work Area of the 37 Gantiwarno Pekalongan Health Center, East Lampung.

Knowledge	Anxiety						Total	P value
	Low		Middle		High			
	n	%	n	%	n	%		
Low	59	23.1	9	40.0	1	2.35	18	0,001
Middle	6	28	7	42.35	0	0	13	
High	7	33	4	25	1	2.35	12	
Total	21	48.8	20	46.5	2	4.7	43	

The findings revealed that 31 persons out of 357 had little awareness about low anxiety (42.35 percent). A p-value of 0.01 was obtained from the chi-square test findings. As a result, a substantial correlation between awareness and public worry over COVID 19 can be concluded statistically with a 95% confidence level. The findings revealed that 31 persons out of 357 had little awareness about low anxiety (42.35 percent). A p-value of 0.01 was obtained from the chi-square test findings. As a result, a significant correlation between knowledge and public anxiety regarding COVID 19 can be concluded statistically with a 95 % confidence level.

Based on table 3 above, shows that knowledge is related to anxiety (p-value 0.001). The above study was similar to the one conducted in Croatia, anxiety emerged in respondents who answered that the way to wash their hands was not appropriate, the method of entry of the disease, the effectiveness of antibiotics, the signs and symptoms that occurred, and the possibility of being a carrier of the disease. [Marko, Galic et al, 2020] The same study was conducted in Indonesia by distributing data in 17 provinces. It was found that knowledge was significantly related to anxiety [Rias et al, 2020] At the Bone Public Health Center, Sulawesi Province, it showed that there was an effect of health education on anxiety in the family. [Najman et al, 2020)

LIMITATION OF THE STUDY

Respondents' access to reach the Public Health Center at the time of data collection was quite far away so researchers had to pick up respondents and most of them were elderly.

CONCLUSIONS AND SUGGESTIONS

The result of this research is that there is a significant relationship between knowledge and anxiety (p-value 0.001).

Suggestions in this study are that health workers share promotions about the development of Covid through WhatsApp or other social media, and officers are given the training to reduce anxiety so that the public can also share knowledge about reducing anxiety, especially during the Covid pandemic.

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