Covid-19 Prevention Behaviors and Social Support For Elderly Group in The Working Area of The Atambua City Puskesmas

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Abstract
The elderly group is a group at risk of exposure to COVID-19, so it is necessary to have COVID-19 prevention behaviors, such as knowledge, attitudes, actions and social support among the elderly group in the working area of the Atambua City Health Center, in Belu Regency. This research is a quantitative research using descriptive research methods. The number of samples in this study were 100 elderly people, in the work area of the Atambua City Health Center. With a random sampling technique, data collection used a questionnaire of knowledge, attitudes, actions, and social support which had been declared valid and reliable. The results of the study found that 86.0% of the elderly had good knowledge about preventing COVID-19, and 88.0% of the elderly who had a good attitude towards preventing COVID-19 were good at preventing COVID-19, as much as 83.0%. Meanwhile, the elderly who have good social support for preventing COVID-19 are 87.0%, in the working area of the Atambua City Health Center, Belu Regency.

Keywords: Behavior, Social Support, Elderly, COVID-19.

INTRODUCTION
Coronavirus Disease 2019 (COVID-19) is a virus that can attack the respiratory system. The spread of COVID-19 can spread quickly, resulting in an increase throughout the world. The World Health Organization (WHO) officially declared COVID-19 a pandemic on March 11 2020. On April 15 2020, COVID-19 cases were declared globally with the number of COVID-19 reaching 1,991,275 people in 205 countries, and in 2021 the number of COVID-19 increased to 131,347,619 people. This makes COVID-19 a world health problem (Moudy & Syakurah, 2020).

The number of COVID-19 cases in Indonesia in 2020 was 743,198 cases, with the number of active cases being 109,903. This can endanger vulnerable groups with weak immune systems such as the elderly. In 2021, transmission of the COVID-19 disease has spread to all provinces in Indonesia and one of them is East Nusa Tenggara Province. The number of confirmed COVID-19 cases in 2020 in NTT was 3,293 cases, with the most dominant sufferers being the elderly. Based on confirmed COVID-19 cases, in East Nusa Tenggara Province in 2022 there will be 94,045 people. Those most affected by COVID-19 are the elderly (Ministry of Health of the Republic of Indonesia, 2022).
The number of elderly people in East Nusa Tenggara Province based on the 2020 population census is 5.33 million people. When compared with 2010, the annual population growth rate (2010-2020) was 1.25%, this number decreased compared to the 2000-2010 period of 2.07%. The population ratio in East Nusa Tenggara Province is more male than female. If we look at the geographical data, the Timor region is the island with the largest population concentration, namely 2.37 million people or 44.52% of the total population of NTT (BPS NTT Province, 2020).

The increase in COVID-19 cases in NTT Province in 2020 was 2.3% with the highest number of cases in the elderly group. The elderly group tends to experience organ dysfunction in the body as they get older. Elderly people can experience disorders in the immune system, both natural and adaptive disorders. The elderly tend to experience disturbances in the metabolic system in the human body and their immunity decreases drastically, which can result in the elderly suffering from various diseases (Sekaki, 2020).

The COVID-19 attack had a bad impact and even caused illness and death in a short time. The effect of corona virus infection is very dangerous for elderly people. Therefore, implementing the COVID-19 health protocol through the new normal in daily life, always using masks, washing hands, and maintaining distance (social distancing) can make an important contribution to efforts to prevent the transmission of COVID-19 in the social environment of society (Ministry of Health of the Republic Indonesia, 2022).

The population in Belu Regency in 2020 was 217,973 people. The number of elderly people in Belu Regency in 2020 was 14,386 people. Belu Regency has 12 sub-districts consisting of 69 villages. Elderly people in East Nusa Tenggara Province (NTT), especially Belu Regency. This can be seen from the strategic activities of land, sea and air transportation routes. Activities carried out every day include traveling out of town or vice versa. Crowd conditions in the COVID-19 pandemic situation are very dangerous, especially for elderly people, who have weak immune systems and have a history of special illnesses. For this reason, for the safety of elderly people who are vulnerable to attacks from COVID-19, there must be awareness of the behavior of elderly people in preventing COVID-19.

The population of sub-districts in the 2020 Atambua City Health Center UPTD working area is spread across 3 sub-districts. The population of Atambua sub-district is 5,816 people, Fatubeno sub-district is 9,113 people and Tenukiik sub-district is 3,656 people. The total number of residents in the working area of
Atambua City Health Center is 18,585 people with a total of 4,248 family cards.

The number of elderly residents at the Atambua City Health Center, in 2019 was 1,412 people, in 2020 it was 1,415 people, and in 2021 it was 1,371. The number of posyandu for the elderly in the working area of the Atambua City Health Center is 11 Posyandu in 3 sub-districts (Atambua City Health Center Profile, 2020).

The number of COVID-19 cases in the Atambua City Community Health Center, in 2020 was 246 cases, the number of positive cases found in the elderly in 2020 was 36 people, in 2021 there were 19 elderly people, and in 2022 there were 19 COVID-19 cases in the elderly. Based on the description above, researchers want to conduct research on: COVID-19 prevention behavior and social support among elderly groups in the Atambua City Health Center working area.

METHOD

This type of research is quantitative descriptive research, which was carried out in the working area of the Atambua City Health Center, Atambua City District, Tenukiik Village, Belu Regency. For 3 months, namely from August 2022 to November 2022. Sampling used a simple random sample technique from a total population of 1,371 elderly people aged > 60 years and obtained a research sample of 100 elderly people as research respondents. The variables studied are knowledge, attitudes, actions, social support. Data collection techniques use observation and interview techniques to collect data in this research. The research instruments used were questionnaires, books, stationery, cellphones and laptops to obtain documentation results. This research process was carried out by the researchers themselves. Research data obtained directly as well as supported data from Community Health Center institutions that are directly related to research activities. This research uses descriptive statistical analysis to describe each research variable in determining the frequency or valid results for presenting data and drawing conclusions.

RESULTS

The results of this research are divided into 2 parts, namely the frequency distribution of respondent characteristics and the frequency distribution of variables, with COVID-19 prevention behavior and social support for the elderly group in the working area of the Atambua City health center, Atambua City District, Belu Regency, East Nusa Tengara Province. Table 1 shows the gender of elderly male respondents in the working area of the Atambua City health center as many as 50 people with a percentage of 50%. Meanwhile, the number of female respondents was 50.
people with a percentage of 50%. The distribution of elderly respondents based on education was mostly respondents with an elementary education level of 97%, middle school 1%, and high school 2%. There were 33 elderly respondents who had a retired job status with a percentage of 33.0%, 12 people had a farmer job status with a percentage of 12.0%, 3 people were self-employed with a percentage of 3.0%. Meanwhile, the employment status of housewives is 52 people with a percentage of 52.0% with a total of 100%.

Table 1. Characteristics of Elderly Respondents in the Atambua City Health Center Working Area.

<table>
<thead>
<tr>
<th>No</th>
<th>Gender</th>
<th>Frequency (n)</th>
<th>Proportion (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Male</td>
<td>50</td>
<td>50.0</td>
</tr>
<tr>
<td>2.</td>
<td>Female</td>
<td>50</td>
<td>50.0</td>
</tr>
<tr>
<td></td>
<td>Total</td>
<td>100</td>
<td>100</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>No</th>
<th>Education</th>
<th>Frequency (n)</th>
<th>Proportion (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>SD</td>
<td>97</td>
<td>97.0</td>
</tr>
<tr>
<td>2.</td>
<td>SMP</td>
<td>1</td>
<td>1.0</td>
</tr>
<tr>
<td>3.</td>
<td>SMA</td>
<td>2</td>
<td>2.0</td>
</tr>
<tr>
<td></td>
<td>Total</td>
<td>100</td>
<td>100</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>No</th>
<th>Work</th>
<th>Frequency (n)</th>
<th>Proportion (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Retiree</td>
<td>33</td>
<td>33.0</td>
</tr>
<tr>
<td>2.</td>
<td>Farmer</td>
<td>12</td>
<td>12.0</td>
</tr>
<tr>
<td>3.</td>
<td>Wiraswasta</td>
<td>3</td>
<td>3.0</td>
</tr>
<tr>
<td>4.</td>
<td>IRT</td>
<td>52</td>
<td>52.0</td>
</tr>
<tr>
<td></td>
<td>Total</td>
<td>100</td>
<td>100</td>
</tr>
</tbody>
</table>

Table 2. Frequency Distribution Results of knowledge, attitudes, actions and social support variables with COVID-19 prevention behavior in the work area of the Atambua City Health Center, Atambua City District, Kab. Belu, Nusa Tenggara Province.

<table>
<thead>
<tr>
<th>Knowledge</th>
<th>Frequency (n)</th>
<th>Proportion (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bad</td>
<td>14</td>
<td>14.0</td>
</tr>
<tr>
<td>Good</td>
<td>86</td>
<td>86.0</td>
</tr>
<tr>
<td>Total</td>
<td>100</td>
<td>100</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Attitude</th>
<th>Frequency (n)</th>
<th>Proportion (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bad</td>
<td>12</td>
<td>12.0</td>
</tr>
<tr>
<td>Good</td>
<td>88</td>
<td>88.0</td>
</tr>
<tr>
<td>Total</td>
<td>100</td>
<td>100</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Action</th>
<th>Frequency (n)</th>
<th>Proportion (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bad</td>
<td>17</td>
<td>17.0</td>
</tr>
</tbody>
</table>

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Based on Table 2. above, 14 elderly respondents lack knowledge regarding preventing COVID-19 with a percentage of (14%). Meanwhile, the percentage of elderly respondents with good knowledge was 86 people (86%), with a total of 100 elderly people who had been interviewed. The attitude of elderly respondents who did not do enough to prevent COVID-19 was 12 people with a percentage of (12%). Meanwhile, 88 elderly respondents had a good attitude towards preventing COVID-19, a percentage (88%) of the total of 100 elderly people who were interviewed. The number of elderly respondents who did not take enough precautions against COVID-19 was 17 people with a percentage of (17%). Meanwhile, there were 83 elderly people who behaved well, with a percentage (83%) of the total of 100 elderly people who had been interviewed. The social support group of elderly people who received less support for preventing COVID-19 was 13 people with a percentage of (13.0%). Meanwhile, good social support for preventing COVID-19 was 87 people with a percentage of (87.0%), out of a total of 100 elderly people who were interviewed.

**DISCUSSION**

**Overview of Elderly Knowledge of COVID-19 Prevention**

Based on the level of knowledge of the elderly group in the Atambua City Health Center working area, the prevention of COVID-19 has been very well implemented by the elderly community, who know how the disease COVID-19 is transmitted, and how to prevent COVID-19, by implementing good health protocols during this period. pandemic.

These results are in line with research by Wulan (2021) which shows that the application of behavioral science is very good for the elderly group, in order to optimally improve health for the elderly group aged more than > 60 years, in improving physical, social and economic health aspects. The efforts made include implementing preventive health behavior such as promotive and preventive efforts (Aprilianingtyas & Indarjo, 2022).

The results of this research show that good knowledge is obtained from good education or
counseling about implementing health protocols for preventing COVID-19 in the elderly group during the pandemic.

The results of this research reveal the educational role provided by the government through counseling on how to prevent COVID-19, through health protocols carried out by health workers in each health agency, especially community health centers and community leaders in the elderly community in the Atambua City Health Center working area so that there is good knowledge of preventing COVID-19 in the mass COVID-19 pandemic.

Overview of Elderly Attitudes Towards COVID-19 Prevention

Based on the results of research on the attitudes of elderly groups towards preventing COVID-19 in the working area of the Atambua City Health Center, the elderly community has a good attitude towards preventing COVID-19. This can be seen by the implementation of health protocols with strict supervision from families and communities as well as the government in implementing efforts to prevent the transmission of COVID-19 to elderly people in the Atambua City Health Center working area.

The results of this research are in line with Sari’s (2020) research, as many as 20 people had good knowledge (98%) and positive attitudes (96%) regarding the COVID-19 pandemic. This research is also in line with 2020, namely that the majority of Indonesian people, 56%, have a positive attitude about social distancing, to prevent the transmission of COVID-19 (Suprayitno et al., 2020). The research results showed that good attitudes were obtained from information received from family, community and government regarding the prevention of COVID-19 in the working area of the Atambua City Health Center. The results of this research involve the government, community and family in providing direction and good attitudes towards preventing COVID-19, by implementing health protocols that were directly conveyed by Atambua City Health Center health workers, to the elderly group during the COVID-19 pandemic, in the area Atambua City Health Center work.

Overview of Elderly Actions for Preventing COVID-19

Based on the actions of the elderly group towards preventing COVID-19 in the working area of the Atambua City Health Center, in establishing health protocol measures outside the home and in public service places, as well as always following inspection and supervision measures from house to house by health officers regarding efforts to prevent COVID-19. 19 during the pandemic. The results of this research are in line with research conducted by

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Triyanto (2020) regarding the formation of behavior which greatly influences knowledge, attitudes and actions towards preventing COVID-19. The results of this research are also supported by Wowo researchers (2021) where the actions of the community in Malalayang 1 Timur Subdistrict had good actions as many as 58% took preventive measures against COVID-19. Meanwhile, 21% of them did not take action to prevent COVID-19 (Wowor et al., 2021). The results of this research show that the actions of the elderly community in the working area of the Atambua City Health Center, regarding the role of the government and the community in implementing health protocols, are mostly in the good category.

General Description of Social Support for the Prevention of COVID-19 Based on the results of research on social support for elderly groups, the prevention of COVID-19 shows that social support in the working area of the Atambua City Health Center is in the good category. This support is formed from the actions of the government, society, and social support from the family. This support influences knowledge, attitudes and actions in providing health protocol information. This shows that the elderly community's actions were very good in implementing health protocols during the COVID-19 pandemic. The results of this research are in line with Kundari (2020) that there is a relationship between family and community support and COVID-19 prevention behavior. This is because family and society are included in the individual's closest environment, which has strong relationships between family members. Family is also very important in taking a support role (Aprilianingtyas & Indarjo, 2022). The results of this research show that social support for the elderly group in the working area of the Atambua City Health Center is mostly included in the good category in providing information support during the COVID-19 pandemic.

CONCLUSION

Based on the research results, it can be concluded that: The knowledge of the elderly group in the Atambua City Health Center working area is knowledge regarding how the COVID-19 virus spreads and how to prevent it. COVID-19 has been very good during the COVID-19 pandemic.

The attitude of the elderly group in the Atambua City Health Center working area, based on attitudes towards how the COVID-19 virus spreads and prevention, has been very good during the COVID-19 pandemic.

The actions of the elderly group in the Atambua City Health Center working area, based on the actions taken regarding the transmission of the COVID-19 virus and prevention of COVID-19,
have been very good during the COVID-19 pandemic.

Social support for elderly groups in the working area of the Atambua City Health Center, based on social support from the community, family and government, regarding how the COVID-19 virus is transmitted, as well as preventing COVID-19 has been very good during the COVID-19 pandemic.

SUGGESTION

For Health Workers

The role of health workers, especially the role of community health officials, the elderly in preventing COVID-19 behavior and social support for elderly groups in the working area of the Atambua City Health Center.

The community hopes that the elderly group will be more careful in making behavioral decisions regarding health, both in terms of attitudes, actions and support provided, in order to maintain a more optimal health status in old age and carry out regular checks at health service agencies.

For other researchers, further research is needed regarding COVID-19 prevention behavior and social support for elderly groups who are more vulnerable to exposure to the disease.

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