

ARTICLE INFORMATION Received: October, 05, 2022 Revised: February, 03, 2023 Available online: February, 08, 2023

at: http://ejurnalmalahayati.ac.id/index.php/nursing/index

Support from community leaders and families related to Covid-19 prevention behavior In Indonesia

Aprianti, Haikal*, Yusthin Meriantti Manglapy, Muhammad Iqbal

Fakultas Kesehatan Universitas Dian Nuswantoro Corresponding author. *E-mail: haikalfaqih@dsn.dinus.ac.id

Abstract

Background: COVID-19 is a public health problem and has been declared a pandemic by the WHO. In Indonesia, there were 1,682,004 confirmed positive cases of COVID-19, with a total of 1,535,491 (91.3%) recovering and 45,949 (2.7%) deaths. Behavior-reinforcing factors, namely support from community leaders and families, have an important role in preventing COVID-19 in Indonesia.

Purpose: To analyze the relationship between the support of community leaders and family support on Covid-19 prevention behavior.

Method: A quantitative method with a cross-sectional design and the sampling technique used was purposive sampling with inclusion criteria being willing to become respondents by filling in informed consent, aged over 18 years, Indonesian residents could access the google form. Two thousand seven hundred samples meet the inclusion criteria.

Results: The results showed that there was a strong and significant relationship between the variables of community leader support (p value = 0.001; r = 0.296) and family support (p value = 0.001; r = 0.402) on Covid-19 prevention behavior.

Conclusion: We need to strengthen the capacity of community leaders and families to improve their behavior to prevent COVID-19 in Indonesia.

Keywords: Community; Leader; Support; Family; Preventive; Behavior; Covid-19.

INTRODUCTION

Data to the World Health Organization, on May 3, 2021, the number of confirmed cases of COVID-19 in the world was 152,534,452, with 3,198,528 (2.1%) people dying (World Health Organization, 2021). In Indonesia, there were 1,682,004 confirmed positive cases of COVID-19, with a total of 1,535,491 (91.3%) recovered 45,949 (2.7%) died and (Satgas Penanganan COVID-19, 2021). COVID-19 has become a serious world problem because the number of COVID-19 cases is increasing daily. COVID-19 affects everyone regardless of age or gender. COVID-19 has been categorized as a global pandemic (Sari et al., 2020). The increase in the number of cases of

Covid-19 occurs in a speedy time, so it requires handling (Mujiburrahman et al., 2020).

Factors that can affect health are behavioral and non-behavioral. According to Green, health behavior can be influenced by three factors, namely predisposing factors, enabling factors, and reinforcing factors (Green, 1984). Then when viewed from the predisposing factors, the community has sociodemographic factors such as differences in age, gender, education, occupation, and background, and reinforcing elements such as family support and support from community leaders. Based on these factors can influence people's behavior (Syakurah &

Moudy, 2020). So, for the prevention of COVID-19, it is necessary to have family support and the support of community leaders.

Family support is a form of attitude or action of family members to protect from stressors. The support that the family can give is in the form of informational. appreciation, emotional, and instrumental support. The support obtained can be seen from Information support, where families look for a lot of information about COVID, provide understanding to family members, provide advice and remind them every time they leave the house to comply with health protocols such as wearing masks and carrying hand sanitizer. In instrumental support, the family can provide equipment for the prevention of COVID-19, such as masks, hand sanitizer, vitamins, etc. Emotional support, namely giving attention, encouragement, and enthusiasm, to consistently apply the health protocol, and the last one is appreciation support, where families give each other praise or reward for implementing the Health protocol (Ashidiqie, 2020). Abidin (2020) explained that family functions have an essential role in maintaining the health of their family members. They provide a support system, financial balance, and health control so that it affects the health problems faced. Family participation in health protocols still needs to be improved and improved. Families must be more sensitive in facilitating and always apply suitable health protocols. Family support is an attitude, action, and acceptance of the family (Alvita & Christin, 2021). Support can come from other people (parents, children, husband, wife, or siblings) who are close. Where the form of support can be in the form of information, certain behaviors, or materials that can make individuals feel loved, cared for, and loved (Santika, 2020). A Research shows a significant effect between family support and COVID-19 prevention behavior in the Jabodetabek community (pyalue = 0.000). From 424 respondents, 183 respondents received adequate family support. Around 66.1% of them have good COVID-19 prevention behavior (Kundari et al., 2020).

The support of community leaders is a very dominant factor in the implementation of clean and healthy living behavior (Rosidin et al., 2021) because the role of community leaders in efforts to prevent

Aprianti, Haikal*, Yusthin Meriantti Manglapy, Muhammad Iqbal

Fakultas Kesehatan Universitas Dian Nuswantoro Corresponding author. *E-mail: haikalfaqih@dsn.dinus.ac.id

DOI: https://doi.org/10.33024/minh.v5i2.8013

COVID-19 is significant. The part of these community leaders is perfect and essential social support in the context of avoiding COVID-19 (Santika, 2020). Community leaders have a significant role. Because in essence, community leaders are people who have a substantial role in a community group and have power. namely the ability to influence other people or groups according to their wishes. The part of community leaders, among others, are social controllers, quardians, and enforcers of values and norms that apply in society. In addition, community leaders also play a role in solving various problems that occur. Community leaders must provide support, guidance, motivation, and direction to the community. Community leaders also act as support providers. During this pandemic, community leaders also play an essential role in preventing the spread of Covid-19 through proper management of social distancing, using masks, not making physical contact, maintaining a minimum distance of 2 meters, diligently washing hands using soap and running water, carrying antiseptics, using hand tools. Self-feeding and other measures that can prevent the spread of Covid-19 (Rosidin et al., 2020). The research that has been done is that there is an influence of community leaders on community compliance in preventing Covid-19 in the community. with a p-value of 0.040 (Sutriyawan et al., 2022). Research conducted by Lilis, a public figure on the prevention of covid-19, is known to have a less than good role by 50 respondents (59%). In comparison, their behavior towards preventing the transmission of covid-19 is mostly good by 67 respondents (79.8%). Based on this, a study was conducted on how research carried out the relationship between family support and community leader support with COVID-19

RESEARCH METHOD

prevention behavior.

This study uses a quantitative method with a crosssectional design and sampling technique with purposive sampling with inclusion criteria willing to become respondents by filling out informed consent, aged over 18 years, Indonesian residents, can access google forms and understand Indonesian. Based on this, 2700 samples meet the inclusion criteria. A semi-

structured online questionnaire was developed using the kobotoolbox, with a consent form also available. The researcher sent respondents questionnaire links via e-mail, WhatsApp, Facebook, or other social media.

The community leader's support variable questions consist of 11 questions with the answer choices of never, rarely, often, and very often. While the family support questions consist of 10 questions with answers never, rarely, often, and very often. The questions have been tested for validity and reliability.

The researcher analyzed the data descriptively to see the distribution of frequency and percentage of support from community leaders and family support. The following analysis uses the Spearman rank test to determine the relationship of each variable to the Covid-19 prevention behavior with a significance value of 5% (0.05). This study approved by Ethical Research Committee from Universitas Dian Nuswantoro No. 272/EA/KEPK-Fkes-UDINUS/VI/2022.

RESULTS

Based on the data that has been collected from 2700 respondents, it is found that the distribution of the frequency and percentage of the variables of community support and family support is found. The frequency distribution and rate of community leaders' support variables are listed in table 1 on the next page. Based on the table, the research found that as many

as 6.3% of respondents felt they had never received information or explanation about how to increase their immune system, and community leaders had never reminded 5.3% of respondents to wash their hands with soap regularly when traveling out of the house and community leaders. Never urges residents who have just returned from out of town to report and self-isolate.

The distribution of the frequency and percentage of family support variables is shown in table 2. Based on the table, research also found that their families had never asked 6.2% of respondents about fever, flu, or other symptoms of Covid-19 that they had experienced, were experiencing or felt the current condition. A total of 3.3% of respondents' families explained how to spread COVID-19, and 3.1% recommended that I stay at home if there is no urgent need.

The analysis results see the relationship between the variables of community support and family support can also be seen in table 3. Based on the table, the research found that the support of community leaders with behavior was 0.296 with a Sig of 0.000; it can be concluded that there is a significant correlation, with the correlation coefficient very high. Strong/perfect. While on the family support variable with behavior, the result is 0.402 with a Sig of 0.000, it can be concluded that there is a significant correlation, with an extreme/perfect correlation coefficient.

Aprianti, Haikal*, Yusthin Meriantti Manglapy, Muhammad Iqbal

Fakultas Kesehatan Universitas Dian Nuswantoro Corresponding author. *E-mail: haikalfaqih@dsn.dinus.ac.id

Malahayati International Journal of Nursing and Health Science, Volume 05, No.2, September 2022: 136-144

Support from community leaders and families related to Covid-19 prevention behavior in Indonesia

Table 1. Frequency and Percentage of Variables Supported by Community Leaders (N=2700)

No	Statement	Never (%)	Rarely (%)	Agree (%)	Very agree (%)
1	I got an explanation about the importance of maintaining	140	685	1526	349
	health from community leaders	(5,2)	(25,4)	(56,5)	(12,9)
2	I got an explanation about the impact of COVID-19 from	138	709	1515	338
	community leaders	(5,1)	(26,3)	(56,1)	(12,5)
3	I got an explanation about COVID-19 prevention from	123	693	1553	331
-	community leaders	(4,6)	(25,7)	(57,5)	(12,3)
4	I got an explanation about how COVID-19 spreads from the	138	660	1581	321
	community	(5,1)	(24,4)	(58,6)	(11,9)
5	Community leaders around where I live to remind me to	132	524	1598	446
	wear a face mask when traveling out of the house	(4,9)	(19,4)	(59,2)	(16,5)
6	Community leaders around where I live to remind them to	142	632	1523	403
	regularly wash their hands with soap when traveling out of the house	(5,3)	(23,4)	(56,4)	(14,9)
7	Community leaders around where I live to urge people to	139	617	1527	417
	stay at home if there is no urgent need	(5,1)	(22,9)	(56,6)	(15,4)
8	I got an explanation about increasing the body's immunity	170	704	1469	357
	from community leaders	(6,3)	(26,1)	(54,4)	(13,2)
9	Community leaders use subtle language when explaining	114	487	1702	397
	and reminding the public	(4,2)	(18,0)	(63,0)	(14,7)
10	Community leaders show pleasant faces when explaining	118	541	1678	363
	and reminding people	(4,4)	(20,0)	(62,1)	(13,4)
11	Community leaders urge residents who have just returned	144	582	1540	434
	from out of town to report and self-isolate	(5,3)	(21,6)	(57,0)	(16,1)

Aprianti, Haikal*, Yusthin Meriantti Manglapy, Muhammad Iqbal

Fakultas Kesehatan Universitas Dian Nuswantoro Corresponding author. *E-mail: haikalfaqih@dsn.dinus.ac.id

Malahayati International Journal of Nursing and Health Science, Volume 05, No.2, September 2022: 136-144

Support from community leaders and families related to Covid-19 prevention behavior in Indonesia

Table 2. Frequency and Percentage of Family Support Variables (N=2700)

No	Statement	Never (%)	Rarely (%)	Agree (%)	Very agree (%)
1	The family explained to me the importance of taking care of his health	58 (2,1)	271 (10,0)	1542 (57,1)	829 (30,7)
2	My family explained to me the impact of COVID-19	78 (2,9)	379 (14,0)	1630 (60,4)	613 (22,7)
3	My family explained to me the impact of COVID-19	63 (2,3)	326 (12,1)	1654 (61,3)	657 (24,3)
4	My family explained to me how COVID-19 spreads	88 (3,3)	424 (15,7)	1623 (60,1)	565 (20,9)
5	My family also reminds me to use a face mask and wash my hands with soap when I go out of the house	71 (2,6)	229 (8,5)	1540 (57,0)	860 (31,9)
6	My family recommends I stay at home if there is no urgent need	84 (3,1)	295 (10,9)	1597 (59,1)	724 (26,8)
7	My family explained to me the importance of boosting my immune system	54 (2,0)	262 (9,7)	1555 (57,6)	829 (30,7)
8	The family uses soft language when explaining and reminding me	57 (2,1)	264 (9,8)	1756 (65,0)	623 (23,1)
9	The family put on a pleasant face when explaining and reminding me	60 (2,2)	351 (13,0)	1723 (63,8)	566 (21,0)
10	My family asks if I have a fever, flu, or other symptoms of COVID-19	168 (6,2)	650 (24,1)	1457 (54,0)	425 (15,7)

Table 3. Community Leader Support and Family Support with Behavior

Variable	p-value	rho
Community Leader Support	0,001	0,296
Family Support	0,001	0,402

Aprianti, Haikal*, Yusthin Meriantti Manglapy, Muhammad Iqbal

Fakultas Kesehatan Universitas Dian Nuswantoro Corresponding author. *E-mail: haikalfaqih@dsn.dinus.ac.id

DISCUSSION

The study results show a strong relationship between the support of community leaders and families with Covid-19 prevention behavior. This is in line with research in the city of Semarang, which states that community leaders have an essential role in social distancing behavior during the Covid-19 pandemic (Pertiwi & Budiono, 2021), Another study in Depok City stated that, differently, public compliance with largescale social restriction policies in preventing Covid-19 was not directly related to community leaders in the area (Wiranti et al., 2020). Most respondents stated that the role of community leaders was not good, namely 54.5%. Compliance with the application of health protocols in respondents who noted the role of community leaders was good was 67.0%. This proves that the part of community leaders is significant in supporting community compliance in behavior. including using masks when leaving the house, constantly washing hands when going home, and keeping a distance when doing activities outside the home. Research from Nigeria showed that Support from religious leaders helped to reinforce the maintenance of handwashing, disinfection of hands and surfaces, and social distancing, while community based opinion groups helped intensify COVID-19 risk communication efforts (Afolabi & Ilesanmi, 2022). The community needs the role of community leaders in complying with health protocols. Because not all people already have a good understanding of 3M. Community leaders help provide knowledge to the community and socialize government programs so that other people can also be exposed to the latest information in preventing Covid-19 (Rizgah & Amelia, In addition to community leaders, strict regulations are also needed if people violate; this is required to have a deterrent effect in the morning for those who disobey. This Covid-19 prevention effort needs the involvement of various parties, both critical components in the community and community leaders themselves, because of the habit of people who are more willing to listen to advice from those told in the community (Wabula & Tunny, 2021). Support from community leaders can be in the form of emotional support, appreciation support, instrumental support, and informative support (Akbar et al., 2015). COVID-19's global presence and social transmission pathways require social and community responses. This may be particularly important to reach margin analyzed populations and to support equity-informed responses.

Aligning previous community engagement experience with current COVID-19 community-based strategy recommendations highlights how communities can play important and active roles in prevention and control. Countries worldwide are encouraged to assess existing community engagement structures and use community engagement approaches to support contextually specific, acceptable and appropriate COVID-19 prevention and control measures (Dyer, 2020). The community plays a subordinate role in administrative management systems. The community in China is a functional part of state power and a fundamental unit covered by the state system(Wang et al., 2021)

Another factor that influences Covid-19 prevention behavior is family support. Family support is support obtained in the form of informational and emotional. The family always reminds the family to wash their hands, and if they have to leave the house, wear a mask, keep a distance and bring hand sanitizer. The role of the family is significant in implementing health protocols to prevent Covid-19. This is because, during the pandemic, most activities are centered from their respective homes. Therefore, the family environment has a significant role in maintaining and improving Covid-19 prevention behavior (Wonok et al., 2020). This is in line with research that there is a significant relationship between family support and Covid-19 prevention behavior (p-value of 0.000). The family has an important role and responsibility for the health of themselves and other members. Families can provide vitamins, fruits, and vegetables to increase immunity and provide masks, hand sanitizer, and others. Families also convey information, remind, and are motivated to implement COVID-19 prevention behavior consistently. From the research and supporting theories above, a study can conclude that family support is essential to COVID19 prevention behavior. This is because if family members receive good support from the family, it will produce good behavior (Kundari et al., 2020). Research from China showed that, strong support family plays an important role in improving individuals' attitudes about sosial distancing and maintaining positive mental health during the epidemic (Li & Xu, 2022)

According to Friedman, the family plays a critical role in shaping the character that a person can manage health in terms of how the family recognizes problems health, the ability to make decisions, provide

care, improve and maintain a healthy home environment and be able to find the health facilities needed. One of the functions of the family in the health sector is to keep the health status of family members as high as possible, from prevention to rehabilitation through family support. So that the existence of family support is the key to success in controlling Covid 19 prevention behavior. This is by research that explains that family support is an essential factor that must exist in the health care of family members, starting with emotional, material, and information support (Sutinah, 2020). According to Bailon and Maglaya explaining that in the family, there are five family health care tasks which consist, first, the family must be able to recognize the problem, where the family must understand the Covid 19 disease, its causes, signs, and symptoms, its spread, prevention, and even treatment. The second task is that the family is required to make the right decisions in handling covid 19 in their family environment, one of which is the effort in prevention and the willingness to take proper care of family members who are positive for Covid 19. The third task, the family must be able to provide appropriate treatment efforts for members who are positive for covid 19, provide support for self-isolation, and provide the availability of infrastructure in implementing covid 19 prevention behavior. Fourth, families can modify the physical and psychological environment. In this case, the family must be able to create a clean and safe environment with room ventilation. Besides that, the family can make a calm and comfortable Susana in the family even in conditions of work, study, and worship at home. In the fifth task, the family must be able to choose the suitable health facilities around the family to treat family members with signs and symptoms of Covid 19 (Alvita & Christin, 2021).

Study from China Quality of Life among Chinese parents of young children during the COVID-19 pandemic and examined the relationship between job changes, family conflict, and Quality of Life. Our findings suggested that individuals with more frequent marital conflict and parent—child conflict had worse Quality of Life. We found that job changes significantly enhanced the negative correlation between marital

Aprianti , Haikal*, Yusthin Meriantti Manglapy, Muhammad Iqbal

Fakultas Kesehatan Universitas Dian Nuswantoro Corresponding author. *E-mail: haikalfaqih@dsn.dinus.ac.id

DOI: https://doi.org/10.33024/minh.v5i2.8013

conflict and Quality of Life, but did not significantly buffer the negative relationship between parent-child conflict and Quality of Life among the whole sample. In addition, both of the moderation effects differed across gender and family structure, and they were only significant for fathers and one-child family(Liu et al., 2022)

CONCLUSION

The study results show a strong and significant relationship between the variables of community leader support and family support on Covid-19 prevention behavior. Family support that is still lacking is that families have never been asked about symptoms of Covid-19, while support from community leaders that is lacking is that they never get information or explanations on how to increase body immunity. Based on this, there should be a need for capacity building about the need to increase body immunity during the COVID-19 pandemic, as well as the need to provide so that families understand the signs and symptoms of COVID-19.

REFERENCES

Afolabi, A. A., & Ilesanmi, O. S. (2022). Community engagement for COVID-19 prevention and control: A systematic review. *Public Health Toxicology*, 2(2), 1–17.

Akbar, M. A., Gani, H. A., & Istiaji, E. (2015). Dukungan Tokoh Masyarakat dalam Keberlangsungan Desa Siaga di Desa Kenongo Kecamatan Gucialit Kabupaten Lumajang (Community Leaders' Support in the Sustainability of Alert Village in Kenongo Village, Sub District of Gucialit, Lumajang Regency). *Pustaka Kesehatan*, 3(3), 522–529.

Alvita, G. W., & Christin, D. N. (2021). Gambaran Dukungan Keluarga dalam Pelaksanaan Protokol Kesehatan di Masa Pandemi Covid-19 di Desa Kembang Dukuhseti Kabupaten Pati. *Jurnal Profesi Keperawatan (JPK)*, 8(2), 215–223.

- Ashidiqie, M. L. I. I. (2020). Peran Keluarga Dalam Mencegah Coronavirus Disease 2019. *SALAM: Jurnal Sosial Dan Budaya Syar-I*, 7(8), 911–922. https://doi.org/10.15408/sjsbs.v7i8.15411
- Dyer, O. (2020). Covid-19: Many poor countries will see almost no vaccine next year, aid groups warn. BMJ: British Medical Journal (Online), 371.
- Green, L. W. (1984). Modifying and developing health behavior. *Annual Review of Public Health*, *5*(1), 215–236.
- Kundari, N. F., Hanifah, W., Azzahra, G. A., Islam, N. R. Q., & Nisa, H. (2020). Hubungan Dukungan Sosial dan Keterpaparan Media Sosial terhadap Perilaku Pencegahan COVID-19 pada Komunitas Wilayah Jabodetabek Tahun 2020. *Media Penelitian Dan Pengembangan Kesehatan*, 30(4).
- Li, S., & Xu, Q. (2022). Family support as a protective factor for attitudes toward social distancing and in preserving positive mental health during the COVID-19 pandemic. *Journal of Health Psychology*, 27(4), 858–867.
- Liu, X., Bai, Y., Huang, N., Ahmed, F., Shahid, M., & Guo, J. (2022). Chinese Younger Parents' Quality of Life During the COVID-19 Pandemic: Do Job Changes and Family Conflicts Matter? *Frontiers in Public Health*, 9, 758242.
- Mujiburrahman, M., Riyadi, M. E., & Ningsih, M. U. (2020). Hubungan pengetahuan dengan perilaku pencegahan COVID-19 di masyarakat. *Jurnal Keperawatan Terpadu (Integrated Nursing Journal)*, 2(2), 130–140.
- Pertiwi, G. S., & Budiono, I. (2021). Perilaku Physical Distancing Masyarakat pada Masa Pandemi Covid-19. *Indonesian Journal of Public Health and Nutrition*, *1*(1), 90–100.
- Rizqah, S. F., & Amelia, A. R. (2021). Hubungan Perilaku Masyarakat Dengan Kepatuhan

Aprianti , Haikal*, Yusthin Meriantti Manglapy, Muhammad Iqbal

Fakultas Kesehatan Universitas Dian Nuswantoro Corresponding author. *E-mail: haikalfaqih@dsn.dinus.ac.id

- Penggunaan Masker Untuk Memutus Rantai Penularan Covid-19 Di Kelurahan Bontoa Maros. Journal of Muslim Community Health, 2(3), 165– 175
- Rosidin, U., Rahayuwati, L., & Herawati, E. (2020). Perilaku dan Peran Tokoh Masyarakat dalam Pencegahan dan Penanggulangan Pandemi Covid -19 di Desa Jayaraga, Kabupaten Garut. *Umbara*, 5(1), 42. https://doi.org/10.24198/umbara.v5i1.28187
- Rosidin, U., Sumarni, N., & Suhendar, I. (2021). Pendidikan Kesehatan Tentang Personal Hygiene Pada Siswa SMK Al Halim Garut. *Jurnal Abdimas BSI: Jurnal Pengabdian Kepada Masyarakat*, 4(2), 181–190.
- Santika, I. G. N. N. (2020). Optimalisasi Peran Keluarga Dalam Menghadapi Persoalan Covid-19: Sebuah Kajian Literatur. *Jurnal Ilmiah Ilmu Sosial*, 6(2), 127–137.
- Sari, A. R., Rahman, F., Wulandari, A., Pujianti, N., Laily, N., Anhar, V. Y., Anggraini, L., Azmiyannoor, M., Ridwan, A. M., & Muddin, F. I. (2020). Perilaku pencegahan Covid-19 ditinjau dari karakteristik individu dan sikap masyarakat. *Jurnal Penelitian Dan Pengembangan Kesehatan Masyarakat Indonesia*, 1(1).
- Satgas Penanganan COVID-19. (2021). *Data Sebaran COVID-19*. Satgas Penanganan COVID-19. https://covid19.go.id/
- Sutinah, S. (2020). Pelaksanaan Terapi Psikoedukasi Keluarga Terhadap Beban Dan Dukungan Keluarga Akibat Pandemi Covid-19. Logista-Jurnal Ilmiah Pengabdian Kepada Masyarakat, 4(2), 177-185.
- Sutriyawan, A., Akbar, H., Anri, A., Lolan, Y. P., & Miranda, T. G. (2022). Faktor yang mempengaruhi kepatuhan memakai masker, mencuci tangan dan menjaga jarak sebagai pencegahan penularan

- Covid-19. Jurnal Ilmu Kesehatan Masyarakat, 18(2), 107–116.
- Syakurah, R. A., & Moudy, J. (2020). Pengetahuan terkait usaha pencegahan Coronavirus Disease (COVID-19) di Indonesia. *HIGEIA* (Journal of Public Health Research and Development), 4(3), 333–346.
- Wabula, L. R., & Tunny, I. S. (2021). Pembagian Masker Dan Hand Sanitizer Serta Sosialisasi Pencegahan Penyebaran Covid-19 Pada Masyarakat Dusun Banngoi Kabupaten Seram Bagian Timur. Jurnal Pengabdian Masyarakat Indonesia, 1(4), 135–141.
- Wang, C., Dong, X., Zhang, Y., & Luo, Y. (2021). Community resilience governance on public health crisis in China. *International Journal of*

- Environmental Research and Public Health, 18(4), 2123
- Wiranti, W., Sriatmi, A., & Kusumastuti, W. (2020). Determinan kepatuhan masyarakat Kota Depok terhadap kebijakan pembatasan sosial berskala besar dalam pencegahan COVID-19. *Jurnal Kebijakan Kesehatan Indonesia*, 117–124.
- Wonok, M. J., Wowor, R., & Tucunan, A. A. T. (2020). Gambaran perilaku masyarakat tentang pencegahan covid-19 di desa tumani kecamatan maesaan kabupaten minahasa selatan. *KESMAS*, 9(7).
- World Health Organization. (2021). WHO Coronavirus Disease (COVID-19) Dashboard. World Health Organization. 2021.

Aprianti , Haikal*, Yusthin Meriantti Manglapy, Muhammad Iqbal

Fakultas Kesehatan Universitas Dian Nuswantoro Corresponding author. *E-mail: haikalfaqih@dsn.dinus.ac.id