Knowledge and Attitude Relationship on Clean and Healthy Lifestyle Towards The Prevention of Covid-19 Transmission in RW.03 Ciganjur Village South Jakarta

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Abstract
The coronavirus disease 2019 (COVID-19) originating from Wuhan, China began to emerge in December 2019. Until now, COVID-19 has become a global pandemic, and Indonesia has been one of the countries that affected by this virus since March 2020. Based on World Health Organization data on October 20, 2020, corona has spread in 215 countries and has infected 40.4 million people. And based on data from the Indonesian Task Force for Covid-19, the victims who have been infected have reached 369,000 people. This study aims to determine whether there is a relationship between knowledge and attitudes about Clean and Healthy Behavior towards the prevention of COVID-19 in RW.03 Ciganjur Sub-District. The sample in this study amounted to 97 respondents in RW.03 Ciganjur Sub-District. The sampling technique used was simple random sampling and the data were analyzed using Chi-Square. The results showed that there was a relationship between knowledge about clean and healthy behaviors against the prevention of COVID-19 transmission, indicated by a p value of 0.000 (p < 0.05) and there was also a relationship between attitudes about clean and healthy behavior and prevention of COVID-19 transmission, indicated with a p value of 0.000 (p < 0.05). Citizens who have poor knowledge and negative attitudes about clean and healthy behavior towards preventing the transmission of COVID-19 will have good knowledge and a positive attitude towards preventing transmission of COVID-19. Interventions need to be made to reduce bad knowledge and negative attitudes towards residents, to increase prevention of COVID-19 transmission.

Keywords: Pengetahuan, Sikap, Perilaku Hidup Bersih dan Sehat, Pencegahan, Penularan Covid-19

Preliminary
Since December 2019, the outbreak of the 2019 coronavirus disease (COVID-19) virus has emerged from Wuhan, China. Until now, COVID-19 has become a global pandemic, Indonesia has been one of the countries affected by the virus since March 2020. This virus has been named severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) and can move quickly from humans through direct contact.

On 20 October 2020, according to the World Health Organization, the corona has spread in 215 countries and has reached 40.4 million people. Based on data from the Indonesian Covid-19 Handling Task Force, it has reached 369,000 people. The total number of corona virus cases in DKI Jakarta has reached 96,217 people. The total number of corona virus cases in
South Jakarta has reached 12,705 people. The total number of corona virus cases in Ciganjur Village has reached 169 people.

Signs and symptoms of COVID-19 usually appear 2-14 days after exposure. Signs and symptoms generally experience acute respiratory problems such as fever, cough, fatigue, shortness of breath, and some have nasal congestion, runny nose, headache, conjunctivitis, sore throat, diarrhea, loss of smell and smell or skin rash. In severe cases it can cause pneumonia, acute respiratory syndrome, kidney failure, and even death (Kemenkes RI, 2020).

According to the Centers for Disease Control and Preventive (CDC), there are several preventive measures for the transmission of COVID-19, namely: washing your hands frequently using running water and soap for 40-60 seconds, or by using an antiseptic (handsanitizer) for at least 20-30 seconds. Avoid close contact by keeping a distance of at least 1 meter. Cover your nose and mouth using a mask when doing activities outside the home. Covering when coughing and sneezing using a tissue or by using the upper inner arm. Cleaning household items using a disinfectant. Monitoring your health every day by exercising frequently, eating nutritious foods, and taking vitamins regularly to increase endurance.

Clean and Healthy Living Behavior (PHBS) is all behavior that is carried out on the basis of the awareness of each family member to help himself and his family, using the basic principle of "Prevention is Better Than Cure" (Kemenkes RI, 2018).

Clean and Healthy Life Behavior (PHBS) is not only focused on healthy food sources, but is related to the habit of living a healthy lifestyle in daily life, as an effort to avoid all kinds of diseases.

According to (Notoatmodjo, 2011) there are several factors that influence PHBS, namely: predisposing factors, enabling factors, reinforcing factors. And it can also be influenced by other factors including: age, gender, environment and level of education.

Based on the results of a preliminary study using the interview method with 7 respondents, 4 respondents said they did not know what PHBS was and did not want to know about PHBS, the respondent said there were still family members who smoked in the house, and 3 respondents said they knew what PHBS was, but the respondents said they had not meet the 10 indicators in PHBS. And of the 7 respondents they only knew that the spread of COVID-19 was only by washing their hands and keeping their distance, and there were also respondents who had not implemented PHBS and prevention of COVID-19 transmission.

**Method**

This type of research is quantitative using a cross sectional approach. The population in this study amounted to 3,270 then calculated using the solvin formula using a 10% error presentation because there were so many objects studied, and also the limitations of researchers who could not conduct research directly due to the COVID-19 pandemic which imposed large-scale social restrictions.

\[ n = \frac{N}{1+N \times e^2} \]

Where

- \( n \) = Number of Samples
- \( N \) = Number of Population
- \( e \) = Percentage of Population
- 10%

So:

\[ n = \frac{3,270}{1+3270 \times (0.1)^2} \]

\[ n = \frac{3,270}{1+3270 \times 0.01} \]

\[ n = \frac{3,270}{337} \]

\[ n = 97 \]

So it can be found that the sample used is 97 samples, using simple random sampling technique.
Result

Respondent Characteristics

In an effort to determine the characteristics of respondents in RW.03 Ciganjur Village, data collection was carried out through questionnaires with the community at RW.03 Ciganjur Village.

Following are the results of data collection regarding the characteristics of respondents consisting of age, gender, latest education and occupation of the respondent.

1. Age

| Age                  | M    | SD   |
|----------------------|------|------|
| (Min-Max 17-45)      | 27,12| 8,530|

Based on table 1, it can be seen that the minimum age of the respondent is 17 years and the maximum age of the respondent is 45 years, with an average age of 27.12 years.

2. Gender

| Gender | f   | (%) |
|--------|-----|-----|
| Woman  | 50  | 51,5|
| Man    | 47  | 48,5|
| Total  | 97  | 100 |

Table 2 shows that the majority of respondents are female.

3. Last Education

| Education            | f   | (%) |
|----------------------|-----|-----|
| Primary School       | 3   | 3,1 |
| Junior High School   | 10  | 10,3|
| Senior High School   | 52  | 53,6|
| College              | 32  | 33,0|
| Total                | 97  | 100 |

Table 3 shows that the majority of the respondents had a high school education as many as 52 respondents (53.6%).

4. Work

| Profession          | f   | (%) |
|---------------------|-----|-----|
| Jobless             | 26  | 26,8|
| Student             | 16  | 16,5|
| General Employees   | 43  | 44,3|
| Entrepreneur        | 12  | 12,4|
| Total               | 97  | 100 |

Table 4 shows that the majority of respondents have jobs as private employees.

5. Knowledge

| Knowledge | f   | (%) |
|-----------|-----|-----|
| Good      | 87  | 89,2|
| Not Good  | 10  | 10,3|
| Total     | 97  | 100 |

Table 5 shows that 87 respondents (89.2%) have good knowledge of clean and healthy living behaviors, and 10 respondents (10.3%) have poor knowledge about clean and healthy living behaviors.

6. Attitude

| Attitude | f   | (%) |
|----------|-----|-----|
| Positive | 91  | 93,8|
| Negative | 6   | 6,2 |
| Total    | 97  | 100 |

Table 6 shows that 91 respondents (93.8%) have positive attitudes towards clean and healthy living behaviors, and 6 respondents (6.2%) have negative attitudes towards clean and healthy living behaviors.

7. Behavior to Prevent COVID-19 Transmission

| Behavior | f   | (%) |
|----------|-----|-----|
| Good     | 90  | 92,8|
| Not Good | 7   | 7,2 |
| Total    | 97  | 100 |

Table 7 shows that 90 respondents (92.8%) did well in preventing Covid-19 behavior, and 7 respondents (7.2%) were not good at preventing Covid-19 transmission behavior.

Table 8. Relationship of Knowledge to Behavior to Prevent COVID-19

| Knowledge  | Behavior | Total | Nil ai | p   |
|------------|----------|-------|-------|-----|
|            | Good     | Not Good |       |     |
| N          | %        | N      | %      | %   |
| Good       | 85       | 87,6   | 2      | 2,1 |
| Not Good   | 5        | 5,2    | 5      | 5,2 |
| Total      | 90       | 92,8   | 7      | 7,2 |

Table 8 shows that based on the results of the chi-square test that has been carried out, the p value is 0.000 based on this value because the p value <0.05 can be
concluded that there is a relationship between knowledge and behavior to prevent Covid-19 transmission in RW.03 Ciganjur Village.

Table 9. Relationship of Attitudes towards Prevention of COVID-19 Transmission

| Attitude | Behavior | Total | Nilai p |
|----------|----------|-------|---------|
|          | Good     | Not Good |        |
| Positive | N %  | N %  | N %  | 0.000  |
| Positive | 88  | 90.7  | 3  | 3.1  | 91  | 100  |
| Negative | 2  | 2.1  | 4  | 4.1  | 6  | 100  |
| Total    | 90  | 92.8  | 7  | 7.2  | 97  | 100  |

Table 9 shows that based on the results of the chi-square test that has been carried out, the p value is 0.000 based on this value because the value of p <0.05 can be concluded that there is a relationship between attitudes and behaviors to prevent Covid-19 transmission in RW.03 Ciganjur Village.

Discussion

Age
The age characteristics of respondents based on the age range in this study indicate that the minimum age is 17 years and the maximum age is 45 years.

This is in line with research which states that ages 26-45 are easier to grasp knowledge.

According to Wawan and Dewi (2011), age is a countable individual. The increasing age will affect the level of maturity and the strength of a person will be more mature in thinking and behaving in an existing problem.

Gender
Characteristics of respondents based on gender in this study note that most of the respondents were female 50 respondents (51.5%), and male gender 47 respondents (48.5%).

This is in line with the research which states that there are more female respondents than male respondents. It can be seen that there are 59 female respondents, 41 male respondents.

Jenis kelamin merupakan hal yang sangat penting bagi setiap individu untuk menentukan identitasnya.

Last education
The characteristics of the respondents based on the latest education can be seen that the respondents with elementary education are 3 respondents (3.1%), SMP 10 responders (10.3%), SMA 52 respondents (53.6%), and Higher Education 32 respondents (33.0 %). It can be concluded that there are more respondents with high school education than other levels of education.

This is in line with the research which states that most of the respondents are educated at SD 5 respondents, SMP 14 responders, SMA 21 respondents, College 12 responders. Which states that the level of education greatly influences a person's knowledge because someone with basic education is usually slower to receive knowledge information than someone with secondary education.

Profession
The characteristics of respondents based on work in this study note that the respondents who work as students are 16 respondents (16.5%), private employees 43 respondents (44.3%), self-employed 12 respondents (12.4%), and those who do not work 26 respondents (26.8%).

This is in line with previous studies of 150 respondents, 46 respondents (30.67%) who have jobs as private employees. Which states that more respondents have jobs as private employees, which is influenced by the level of education the respondent has.

Knowledge
Based on table 5, it can be seen that 87 respondents (89.2%) have good knowledge, and 10 responders (10.3%) have poor knowledge. it can be concluded that the majority of knowledge of the residents of RW.03 Ciganjur Village have good knowledge.

This is in line with research conducted on 150 respondents 105 who have good knowledge. Knowledge has many factors that affect knowledge (Notoatmodjo, 2012). Factors that can affect knowledge
include: age, education, occupation (Budiman, 2013)

**Attitude**

Based on table 6, it can be seen that 91 respondents (93.8%) have a positive attitude, 6 respondents (6.2%) have a negative attitude.

This is in line with research which states that 70 respondents (100%) have good attitudes towards clean and healthy living behaviors. Attitude is a genetic disorder or a collection of symptoms in response to something. And attitude is something that involves thoughts, feelings, attention and other psychological symptoms (Notoatmodjo, 2010).

**Behavior to Prevent COVID-19 Transmission**

Based on table 7, it can be seen that 90 respondents (92.8%) have good behavior, and 7 respondents (7.2%) have poor behavior.

This is in line with research conducted by Mujiburrahman, Muskhab Eko Riyadi, and Mira Utami Ningsih that 45 respondents (43.3%) have good behavior towards preventing covid transmission. A good behavior can be an effort to prevent the transmission of COVID-19 (Audria, 2019).

**Knowledge Relationship to the Prevention of COVID-19 Transmission**

Based on table 8 using the Chi-Square test, it can be seen that the probability value (sig) <0.05 can be seen in Asymp.Sig (2 sided) p value 0.000. This shows that H0 is rejected, which means that there is a significant relationship between Knowledge About Clean and Healthy Living Behaviors Against the Prevention of COVID-19 Transmission.

This is in line with research conducted by Mujiburrahman, Muskhab Eko Riyadi, and Mira Utami Ningsih who obtained a p-value of 0.001 <0.05. This shows that Ho is rejected, which means that there is a significant relationship between knowledge and COVID-19 prevention behavior in the community in Potorono Banguntapan Bantul D.I. Yogyakarta.

According to Wawan and Dwi (2010) knowledge is the result of "knowing" and occurs after a person senses a certain object. Knowledge is all efforts to improve health care in the community, as an effort to avoid disease, it is necessary to increase public knowledge (Priyanto, 2018).

Based on the researchers' assumptions, it can be concluded that some RW.03 residents have good knowledge and behavior to prevent COVID-19, but there are still a small number of residents who have poor knowledge, so it can be said that the better the knowledge, the better the COVID-19 prevention behavior.

**Attitude Relationship Towards Prevention of COVID-19 Transmission**

Based on table 9 using Chi-Square, it can be seen that the probability value (sig) <0.05 can be seen in Asymp.Sig (2 sided) p value 0.000. This shows that H0 is rejected, which means that there is a significant relationship between Attitudes about Clean and Healthy Living Behaviors Against the Prevention of COVID-19 Transmission.

This is in line with research which states that there is a relationship between attitudes and behaviors to prevent the transmission of COVID-19. It can be seen that the p value is 0.000 <0.05. This shows that H0 is rejected, which means that there is a significant relationship between Attitudes about Clean and Healthy Living Behaviors Against the Prevention of COVID-19 Transmission.

According to Notoatmodjo (2014), attitude is very important in the socio-psychological component, because it is a tendency to act and perceive. The factors that greatly influence attitudes are electronic and print media, because they greatly influence the formation of one's opinion and beliefs in attitudes.

Based on the researchers' assumptions, it can be concluded that some RW.03 residents have good knowledge and behaviors to prevent COVID-19, but there are still a small number of residents who have negative attitudes, so it can be said
that the more positive the attitude, the better the COVID-19 prevention behavior.

**Conclusion**

From the results of the research and the elaboration of the discussion, it can be concluded that there is a relationship between knowledge and attitudes about clean and healthy living habits to prevent the transmission of COVID-19 in RW.03, Ciganjur Village. The higher the public's knowledge, the more positive the attitude and behavior to prevent COVID-19, which is shown the better.

**Suggestion**

**Academics**

It is hoped that more extensive research can be carried out on Knowledge and Attitudes about Clean and Healthy Behavior in Preventing the Transmission of COVID-19. As well as being able to apply Clean and Healthy Lifestyle in Efforts to Prevent COVID-19 Transmission.

**Health Sector**

It is hoped that health workers in the community (community nurses) will carry out more frequent health education on Clean and Healthy Living Behaviors and facilitate the need to implement clean and healthy living behaviors in efforts to prevent COVID-19 transmission.

**Community Environment**

Drawing from the conclusion of the data results, it is hoped that a small number of people who have poor knowledge and negative attitudes can increase their knowledge by seeking information and applying Clean and Healthy Living Behaviors in order to obtain good behavior in efforts to prevent COVID-19 transmission.

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