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Factors Related To Covid-19 Prevention Behavior On Market Traders In Pontianak

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ABSTRACT

Informal sector workers are one of the workgroups that are vulnerable to contracting Covid-19, because they interact more directly with many people, so they can increase the risk of spreading a disease. The report by the Satuan Tugas Penanganan COVID-19 as of May 8 2022 shows that the cumulative number of people who are reprimanded related to 3M based on the location of the crowd is occupied by "Market" in first place. The purpose of this study was to determine the factors associated with Covid-19 prevention behavior in market traders in Pontianak. This research is an analytic observational study with a cross sectional approach. The total sample is 97 respondents taken by purposive sampling. The research instrument used a questionnaire and the data were analyzed using the Chi-Square test. Results: There is a significant relationship between knowledge (p = 0.000), attitude (p = 0.000), availability of hand washing facilities (p = 0.013), social support (p = 0.000), and availability of educational media (p = 0.027) with behavior prevention of Covid-19, and there is no relationship between vaccination status (p = 0.071) and behavior of Covid-19 prevention in market traders in Pontianak. Conclusion: there is a significant relationship between knowledge, attitude, availability of hand washing facilities, social support, and availability of educational media with Covid-19 prevention behavior among market traders in Pontianak.

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1. INTRODUCTION

Coronavirus disease or better known as Covid-19 is an infectious disease caused by the SARS-CoV-2 virus. This virus first appeared in December 2019, in Wuhan City, China [1]. Then it became a pandemic that spread to almost every country, including Indonesia. Losses can be experienced in various fields such as education, social affairs, and especially the economic sector, due to the negative impact of the Covid-19 pandemic [2]. This of course needs special attention and is handled immediately to prevent greater losses. One of the preventions that can be done is by breaking the chain of transmission of Covid-19.

Prevention of Covid-19 transmission recommended by the Centers for Disease Control (CDC) includes getting vaccinated, using masks, keeping a distance from other people, avoiding rooms and crowds with poor ventilation, washing hands frequently, applying coughing and sneezing ethics, and always maintaining and monitor their own health [3]. Based on a survey conducted by the Badan Pusat Statistik (BPS) regarding people's behavior during the Covid-19 pandemic for the period 15-25 February 2022, 15.5% of Indonesian people were still not compliant in wearing masks, 20.3% were not compliant in washing their hands , 28.9% do not adhere to keeping their distance, 26.6% do not avoid crowds, 29.2% do not reduce mobility, 18.2% do not maintain air circulation, 14.1% do not

maintain/increase immunity, 20.3% do not maintain cough ethics, and 21.1% do not fulfill balanced nutritional intake [4].

In West Kalimantan, based on the report of the Satuan Tugas Penanganan COVID-19 as of May 8, 2022, the percentage of community compliance with masks at the Regency/City level was only 33.3% and ranked 23rd out of 25 provinces that provided reports, while the percentage of compliance with social distancing amounting to 81.82% ranked 19th [5].

The level of knowledge about preventing an infection is directly proportional to the preventive behavior carried out by a person. This is shown from the results of previous research that the higher a person's level of knowledge, the more positive attitude and practice of Covid-19 prevention behavior [2]. However, in a survey conducted regarding perceptions about conditions after getting the Covid-19 vaccine, there were 20.3% of respondents who stated that after getting the vaccine they would not be infected and may not apply health protocols [6].

According to UU Nomor 25 Tahun 1997 tentang Ketenagakerjaan, informal sector businesses are activities of individuals or families, or several people who carry out joint efforts to carry out economic activities on the basis of trust and agreement, and are not legal entities [7]. Informal sector businesses consist of small business units with the main objective of creating job opportunities and income for each of them. Usually, this type of business does not have specific policies as in the formal sectors. Some examples of workers in the informal sector include farmers, street vendors, market traders, and parking attendants. This group of workers is a group that is vulnerable to contracting emerging diseases, one of which is Covid-19.

Workers in the informal sector usually interact more easily and often directly with large numbers of people, thereby increasing the risk of spreading a disease. The report from the Satuan Tugas Penanganan COVID-19 as of May 8 2022 also shows that the cumulative number of people reprimanded for 3M (wearing masks, maintaining distance and avoiding crowds, and washing hands with soap and running water) based on the location of the crowd is occupied by "Market" in the first place [5]. In addition, the results of previous studies showed that 56.6% of micro-entrepreneurs did not implement health protocols [8].

Based on the description above, the researcher is interested in conducting research with the title "Factors Related to Covid-19 Prevention Behavior in Market Traders in Pontianak". The difference between this study and previous research is that it is found in the independent variables, which in this study added the variable "vaccination status" which had not been studied in previous studies. In addition, the target of this research is market traders, which in previous research was conducted on the general public and workers in the formal sector such as health workers in hospitals. This study aims to determine the factors related to Covid-19 prevention behavior in market traders in Pontianak.

2. METHOD

This research is an analytic observational study, using measurements of the effect of the independent variable on the dependent variable without giving special treatment to the dependent variable, using a cross-sectional approach. The independent variables in this study were knowledge, attitude, availability of hand-washing facilities, social support, availability of educational media, and vaccination status. Meanwhile, the dependent variable is the behavior of Covid-19 prevention.

The research was conducted in September 2022 at the Pontianak traditional market. The total sample is 97 people taken by purposive sampling. Data collection was carried out by direct observation and interviews to fill out a questionnaire that had been formed in the Kobocollect application. The collected data were analyzed univariately and bivariately using the Chi-Square test.

3. RESULTS AND DISCUSSION

Pontianak has approximately 41 traditional markets. Most of these traditional markets operate in the morning until noon and even in the evening, some are open in the afternoon until the evening. Data were collected by interviewing traders and direct observation of workplace conditions. After collecting data on all variables, the data is then analyzed.

Based on research that has been carried out to determine the relationship between knowledge, attitudes, availability of hand washing facilities, social support, availability of educational media, and vaccination status with Covid-19 prevention behavior at market traders in Pontianak with a total of 97 respondents, the results can be presented as follows:

Table 1. Respondent Characteristics

Characteristics	F	%
Sex		
Male	51	52.6
Female	46	47.4
Level of Education		
Elementary School	22	22.7
Junior High School	9	9.3
Senior High School	64	66.0
Bachelor Degree	2	2.1
Age		
11-20 years old	6	6.2
21-30 years old	24	24.7
31-40 years old	25	25.8
41-50 years old	28	28.9
51-60 years old	9	9.3
61-70 years old	5	5.2
Income		
1.000.000 – 5.000.000	76	78.4
>5.000.000 – 10.000.000	16	16.5
>10.000.000 – 15.000.000	4	4.1
>15.000.000 – 20.000.000	1	1.0

Based on table 1, it can be seen that of the 97 respondents, the largest proportion of respondents were male as many as 51 people (52.6%), while women were 46 people (47.4%). 22 people (22.7%) of respondents graduated from Elementary School, 9 people (9.3%) graduated from Junior High School, 64 people (66.0%) graduated from Senior High School, and 2 (2.1%) respondents graduated from college. The age of the most respondents is in the range of 41-50 years with a total of 28 respondents (28.9%). The income of the most respondents is in the range of 1,000,000 – 5,000,000, with a total of 76 respondents (78.4%).

Table 2. Univariate Analysis

Variabel	F	%
Knowledge		
Poor	50	51.5
Good	47	48.5
Attitude		
Less Supportive	47	48.5
Supportive	50	51.5
Availability of Hand-Washing Facilities		
Not Available	45	46.4
Available	52	53.6
Social Support		

Social Support Less Supportive	39	40.2
Social Support Supportive	58	59.8
Availability of Educational Media		
Not Available	60	61.9
Available	37	38.1
Vaccination Status		
Not Vaccinated	45	46.4
Vaccine Dose 1	8	8.2
Vaccine Dose 2	30	30.9
Booster	14	14.4
Covid-19 Prevention Behavior		
Poor Practice	44	45.4
Good Practice	53	54.6

Based on table 2, it can be seen that there are more respondents with poor knowledge category, namely 50 people (51.5%), while respondents with good knowledge category are 47 people (48.5%). A total of 47 respondents (48.5%) had a less supportive attitude and 50 respondents (51.5%) had a supportive attitude. Availability of hand washing facilities was stated by 45 respondents (46.4%) not available, while 52 others (53.6%) stated that they were available. Social support that fellow traders did not support was 39 respondents (40.2%) and those who did support were 58 respondents (59.8%). In the variable availability of educational media, at the work location of the respondents most of the educational media were not available, with a total of 60 respondents (61.9%), and at the other 37 work locations (38.1%) educational media were available. Respondents who had not been vaccinated were 45 respondents (46.4%), had vaccine dose 1 by 8 respondents (8.2%), had vaccine dose 2 by 30 respondents (30.9%), and had booster vaccines by 14 respondents (14.4%). Of the 97 respondents, it was found that 44 respondents (45.4%) had poor preventive behavior and 53 respondents (54.6%) had good preventive behavior.

Table 3. Bivariate Analysis

Variable	Covid-19 Prevention Behavior		PR (95% CI)	P value
	Poor Practice (%)	Good Practice (%)		
Knowledge				
Poor	70.0	30.0	3.656 (1.977-6.760)	0.000
Good	19.1	80.9		
Attitude				
Less Supportive	78.7	21.3	5.623 (2.784-11.356)	0.000
Supportive	14.0	86.0		
Availability of Hand-Washing Facilities				
Not Available	60.0	40.0	1.835 (1.162-2.899)	0.013
Available	32.7	67.3		
Social Support				
Social Support Less Supportive	79.5	20.5	3.546 (2.141-5.874)	0.000
Social Support Supportive	22.4	77.6		
Availability of Educational Media				
Not Available	55.0	45.0	1.850	0.027

Available	29.7	70.3	(1.072-3.193)	
Vaccination Status				
Not Vaccinated	57.8	42.2		
Vaccine Dose 1	50.0	50.0		0.071
Vaccine Dose 2	36.7	53.3		
Booster	21.4	78.6		

Based on the results of bivariate analysis using the Chi-Square test which can be seen in table 3, it is known that there is a significant relationship between knowledge (p = 0.000), attitude (p = 0.000), availability of hand-washing facilities (p = 0.013), social support (p = 0.000), and the availability of educational media (p = 0.027) with Covid-19 prevention behavior, and there was no relationship between vaccination status (p = 0.071) and Covid-19 prevention behavior in market traders in Pontianak.

Discussion

The results of the study on the knowledge variable showed that more respondents with poor knowledge had poor preventive behavior (70.0%) compared to those with less knowledge and good prevention behavior (30.0%). The same thing was found in respondents whose knowledge category was good, more of them had good preventive behavior (80.9%) compared to those with poor prevention behavior (19.1%). The results of this study are in line with research conducted by Ningsih and Indriati, 2021 which states that there is a significant relationship between the level of knowledge and the behavior of Covid-19 prevention, p value = 0.000; p < 0.05 [9]. Knowledge of a person will increase his understanding of an object. This understanding will turn into a perception and belief, then awareness will emerge until it is reflected in the person's behavior.

On the attitude variable, the results of the Chi-Square test show p value = 0.000; p < 0.05. This value indicates that there is a significant relationship between attitude and Covid-19 prevention behavior in market traders. Respondents who have a supportive attitude tend to have good preventive behavior (86.0%) compared to those with poor preventive behavior (14.0%). This is in line with previous studies [10] [11] which stated that attitude is related to Covid-19 prevention behavior. Like knowledge, behavior is also a reflection of one's attitude. Attitude is a form of one's assessment of something. This assessment can be in the form of an opinion, for example agreeing or disagreeing, and often reflects a person's personality. This will make a person behave in a way that is unique according to each person's personality [12].

The availability of hand-washing facilities is one of the variables that significantly influences prevention behavior. This finding is in line with previous research [13], dengan tersedianya fasilitas cuci tangan di area pasar, akan memudahkan para pedagang untuk with the availability of hand-washing facilities in the market area, it will make it easier for traders to wash their hands. Places for washing hands that are close to the workplace, function properly and are equipped with soap, so that traders don't feel the hassle of washing their hands. Traders who work in markets that are not equipped with adequate hand-washing facilities have a 1,835 chance of not doing this behavior.

Covid-19 prevention behavior is also influenced by social support factors from fellow traders. This study found results that preventive behavior increased in traders who received support or were reminded by fellow traders to implement preventive behavior. In this study it was also found that most traders were also motivated to take precautions when other traders around them implemented preventive behavior. In line with several previous studies [13] [14] [15], these findings reinforce perceptions that social support can influence prevention behavior.

Market traders who have educational media in their work area tend to have good preventive behavior (70.3%). The availability of educational media around traders will make these traders see, read, understand and remember the messages conveyed. This is related to increased knowledge. With increased knowledge, an assessment will arise which we call attitude. If a positive attitude is formed, awareness will emerge and positive behavior will also be reflected. So traders who do not have educational media available in their work area have a 1,850 times chance of not implementing good

preventive behavior. This is in line with previous research [16] which found that there was an increase in people's knowledge and behavior of preventing Covid-19 after receiving education through posters and videos.

Vaccination status is one of the variables examined in this study. The results of the Chi-Square statistical test obtained a value of $p = 0.071$; $p > 0.05$, which means there is no relationship between vaccination status and preventive behavior. The results of a survey regarding acceptance of the Covid-19 vaccine that was conducted by the Indonesian Ministry of Health in 2020 found that most people who refused the vaccine had reasons to doubt the safety of the vaccine [17]. However, that doesn't mean that all people who refuse to be vaccinated don't care about the Covid-19 pandemic. Some of them still feel vulnerable and practice good preventive behavior. Likewise with respondents who want to receive vaccines. Many also want to receive vaccines simply because they need to be able to carry out their daily activities with the condition that they must receive vaccines, follow government regulations, and so on. Even though they don't feel vulnerable and are negligent, so they don't apply good preventive behavior.

4. CONCLUSION

Based on the results and discussion of the research that has been carried out, it can be concluded that the Covid-19 prevention behavior of market traders in Pontianak is mostly in the good category (54.6%). Factors that are significantly related to Covid-19 prevention behavior include knowledge, attitudes, availability of hand-washing facilities, social support, and availability of educational media. Meanwhile, vaccination status is unrelated to Covid-19 prevention behavior at market traders in Pontianak.

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