The Correlation Between Knowledge and Attitude About Covid-19 with Compliance with the use of Masks at Masombamarket

Nurhidaya[1(*)], Nur Afni[2], Nurjanah[3]
[1,2,3]Epidemiology Section, Faculty of Public Health, University of Muhammadiyah Palu, Indonesia
*Corresponding Author, Email: nurhidaya0605@gmail.com

ABSTRACT

Non-compliance with the application of health protocols can expand the spread of COVID-19, particularly in public places such as markets. In preoobservations at Masomba market, a small number had used masks properly, but some wore marks on their necks, and many of them did not use masks when trading. The purpose of this research is to determine the correlation between knowledge and attitude about COVID-19 with compliance with the use of masks at the Masomba market. This is quantitative research with a cross-sectional approach using the Chi-Square test and an alpha value = 0,05. The sample of this research is 83 respondents. The independent variables are knowledge and attitudes, and the dependent variable is compliance with the use of masks. The results of this research indicate that the value (p-value) = 0,003 ≤ 0,05 then Ho is rejected, which means that there is a correlation between knowledge of COVID-19 and compliance to the use of masks and the p-value = 0,019 ≤ 0,05 then Ho is rejected which means there is a correlation between attitude and compliance with the use of masks. Good knowledge and attitude of traders about COVID-19 can reduce the risk of COVID-19 transmission, which is supported by disciplined health protocols, especially obedience to using masks in public places, and if there are traders who do not comply with mask use, they can be given a warning both verbally and in writing and appropriate sanctions.

Keywords – Knowledge; Attitude; Mask Use Compliance

INTRODUCTION

At the end of December 2019, China reported a mysterious case of pneumonia of unknown cause. 66% were exposed to a seafood market in Wuhan, Hubei Province, China, based on epidemiological data. A study showed that the patient was infected with Coronavirus, a type of Severe Acute Respiratory Syndrome (SARS-CoV). There are more than 65 countries that have been infected with this virus (1).

Data on COVID-19 cases in Indonesia as of May 13, 2021, in 34 provinces showed 3,448 new cases added, bringing the total confirmed cases of COVID-19 to 1,731. Six

hundred fifty-two people, while the patients who were declared cured were 1,589. 079 people and 47,716 people died (COVID-19 Task Force, 2021).

As for the distribution of COVID-19 cases in Central Sulawesi as of May 13, 2021, there were two additional new cases, bringing a total of 12,665 confirmed cases of COVID-19, 11,758 recovered patients, and 347 deaths. Of the 13 regencies/cities in Central Sulawesi, the highest number of cases is Palu City, with 3,271 confirmed cases of COVID-19 (Central Sulawesi Health Office, 2021).

In humans, coronavirus infection of the SARS-CoV-2 type causes acute respiratory disorders such as fever, cough, and shortness of breath (2). This disease can cause pneumonia, acute respiratory syndrome, kidney failure, and even death in severe cases. Symptoms of this disease can appear within 2-14 days after exposure to the virus (3). COVID-19 can be transmitted from human to human through droplets and can also be in contact with contaminated objects. The COVID-19 outbreak was designated as a global pandemic by WHO on March 11, 2020. The current condition is complicated by the absence of an effective drug for the SARS-CoV-2 virus type, so at this time, of course, promotive and preventive interventions are highly prioritized. The recommended efforts to prevent the spread of this virus are applying cough and sneeze etiquette, washing hands regularly with soap, keeping a distance, and using masks (4).

The Ministry of Health of the Republic of Indonesia made guidelines that can be used to reference the prevention and control of Coronavirus Disease (COVID-19), especially related to health protocols for the community in places and facilities on July 13, 2020, the result of the 5th revision. One of the preventions of transmission to individuals is to use personal protective equipment in the form of masks that cover the nose and mouth if they have to leave the house or interact with other people whose health status is unknown (5).

Non-compliance with the application of health protocols can expand the spread of COVID-19 in the community. Compliance is an attitude that will appear in someone, which is a reaction to something in the rules that must be carried out. This attitude arises when the individual is faced with a stimulus that requires an individual reaction.

The use of masks is very necessary during this pandemic. Masks can be the first barrier if water droplets/splashes are either from yourself or others. The knowledge and attitude of the community is a benchmark for public awareness to comply with the use of masks during the COVID-19 pandemic when doing activities outside the home.

The results of research conducted by Mushidah and Ratna Muliawati that there is a significant relationship between the level of knowledge and attitudes about COVID-19 to the level of compliance with the use of masks as an effort to prevent COVID-19 among MSME traders in the Kutoarjo square, Kaliwungu district (6).

Based on initial observations made by researchers at the mamba market, there were a small number of people who had used masks properly and correctly, but there were those who wore masks only on their necks because wearing masks made them hot and uncomfortable, and there were still many who did not use masks when trading.

Seeing the importance of using masks as a preventive effort to minimize the addition of people infected with the COVID-19 virus through droplets. Therefore, the author is interested in researching "The Relationship of Knowledge and Attitudes about COVID-19 with Compliance with the Use of Masks in the Masomba Market".

METHODOLOGY

This study is a quantitative study using a cross-sectional design. In a cross-sectional study, the researcher measured the variables at one particular time; each subject was only observed once. This research was carried out at Masomba Market from April to May 2021. The population in this study were traders who were in Masomba Market. The population of traders in Masomba Market in 477 traders. At the same time, the number of samples in this study was 83 respondents. The sampling technique used is Probability Sampling with the type of Simple Random Sampling.

RESULTS

Based on the research results, the relationship between knowledge and attitudes about COVID-19 and compliance with the use of masks at the Masomba market can be described in the following table:

Table 1. The relationship between knowledge and compliance with the use of masks

Knowledge	Mask Use Compliance				Total		P-value
	Not obey		Obey				
	n	%	n	%	n	%	
Low	32	65,3	17	34,7	49	100	
Tall	11	32,4	23	67,6	34	100	
Total	43	51,8	40	48,2	83	100	

Primary data source 2021

Table 1 above shows that of the 49 respondents who have insufficient knowledge, 32 respondents (65.3%) do not comply with the use of masks, and 17 respondents (34.7%) adhere to wearing masks. Meanwhile, of the 34 respondents who have high knowledge, 11 respondents (32.4%) do not comply with wearing masks, and 23 respondents (67.4%) comply with wearing masks. Based on the results of the Chi-Square test, the p-value (0.003) < (0.05) so that the HO in this study was rejected, which means that there is a significant relationship between knowledge about COVID-19 and adherence to the use of masks.

Table 2. Relationship between Attitude and Compliance with the Use of Masks

Attitude	Mask Use Compliance				Total		P-value
	Not obey		Obey				
	n	%	n	%	n	%	
Not good	34	60,7	22	39,3	56	100	
Good	9	33,3	18	66,7	27	100	0,019

Total	43	51,8	40	48,2	83	100

Primary data sources 2021

Table 2 above shows that of the 56 respondents who had a bad attitude, 34 respondents (60.7%) did not comply with wearing masks, and 22 respondents (39.3%) obeyed using masks. Meanwhile, of the 27 respondents who had a good attitude, nine respondents (33.3%) did not wear masks, and 18 respondents (66.7%) complied with using masks. Based on the results of the Chi-Square test, a p-value (0.019) < (0.05) was obtained, so that the H0 in this study was rejected, which means that there is a significant relationship between attitudes about COVID-19 and adherence to the use of masks.

DISCUSSION

Relationship between Knowledge about COVID-19 and Compliance with Mask Wear

Based on the study results, the relationship between respondents' knowledge about COVID-19 and compliance with the use of masks was obtained p = 0.003 0.05, which means that there is a relationship between knowledge about COVID-19 and compliance with the use of masks at Masomba Market. The results showed that traders with low knowledge were more disobedient to wearing masks, namely 32 respondents and only 17 respondents who obeyed. Meanwhile, traders with high knowledge are more obedient. Namely, 23 respondents and 11 respondents are not.

Researchers assume that there is common knowledge, but obedient to wearing masks can be caused because traders get information about COVID-19 through electronic media and print media and also self-motivation to obey using masks and worry that if exposed to COVID-19 they can no longer trade. . Likewise, the presence of high knowledge but not obedient to using masks can occur due to the ignorance of traders to take precautions.

The results of this study are in line with the research of Eka Norita (2020), which states that there is a relationship between the level of knowledge and compliance with the use of masks, namely the value (p = 0.010 <0.05). This study is also in line with research conducted by Devi et al. (2020) that there is a relationship between public knowledge and compliance with masks. Knowledge is closely related to the decisions taken by someone because the knowledge possessed can be one of the foundations in making choices. The better the knowledge of the community, the higher the compliance with using masks (7).

Providing information will increase one's knowledge. Knowledge can make someone have awareness so that someone will behave according to the knowledge they have (8).

The Relationship between Attitudes about COVID-19 and Compliance with the Use of Masks

Based on the study results, the results of the Chi-Square Test analysis were obtained with a value (p = 0.019 0.05) which means that there is a relationship between attitudes about COVID-19 and compliance with the use of masks at Masomba Market. The study

results found that 34 respondents were not compliant and did not comply with wearing masks, and 22 respondents obeyed using masks. Meanwhile, nine respondents have a good attitude but do not comply, and more are obedient, namely 18 respondents.

The researcher assumes that a bad attitude can be obedient to wearing a mask because the local government requires wearing a mask when trading and support from family. Likewise, with a good attitude, traders believe in COVID-19 but do not wear masks because wearing masks makes them hot, and they have difficulty breathing, especially when talking, so traders prefer to hang their masks around their necks or not use them at all. Researchers also assume that traders do not comply with wearing masks because traders believe that COVID-19 does not cause illness, and they believe that if they consume food that is directly taken or picked from the tree, they will always be healthy and will not get COVID-19.

Attitude is readiness or willingness to act. Attitude has not been said to be an action or activity but is a predisposition to the action of behavior. This attitude is still a closed reaction or response and is not an open reaction or open behavior (9).

As a reaction, attitude is related to two things: liking or agreeing, which leads to a positive attitude, and disliking or disagreeing or a negative attitude. If it is associated with the use of masks by workers, a positive attitude will result in a relevant positive action, namely the use of masks at work, which, if maintained sustainably, will form a lasting behavior by traders. A positive attitude towards something, namely the use of masks, tends to approve masks as personal protective equipment at work.

The factors that influence a person's attitude are personal experience, the influence of others who are considered important, the influence of the surrounding culture, the socio-cultural system, the mass media, educational institutions, religious institutions, and emotional factors (10).

This is in line with Sukmawati's (2021) research. The results of the bivariate analysis on the respondent's attitude variable towards using masks using the Chi-square test obtained a p-value of 0.004 ($P < 0.05$). These results show a statistically significant or significant relationship between respondents' attitudes towards the behavior of using masks during the COVID-19 pandemic in the people of Gunung Putri District. Likewise, Malawati (2013) concluded that there was a significant relationship between attitudes and behavior in their research. The same thing is also found in the results of Rustika's research (2018), which reveals that respondents who have a supportive attitude towards wearing masks will obey using masks 3.5 times compared to respondents who have a non-supportive attitude (11).

Attitude refers to an individual's evaluation of various aspects of the social world and how that evaluation raises an individual's liking or disliking of issues, ideas, other people, social groups, and objects. Attitude is initially defined as a condition for the emergence of action. The phenomenon of attitude is a mental mechanism that evaluates, forms views, colors feelings, and helps determine our behavioral tendencies towards humans or things that we face and even ourselves (12).

This is in line with the Theory of Reasoned Action (Fishbein and Ajzen, 1973 through Siregar, 1993: 17); among the variables of attitude and behavior (action), there is a variable that mediates it, namely intention (disposition). Someone who will act based on a specific purpose. This theory places attitudes central about human actions, attitudes they say are a function of beliefs (13).

Someone who believes that the action that will be taken will have a positive impact on him, he will tend to take the action (14). Vice versa, if he believes the action to be taken will hurt him, he is refusing to take action. This is called behavior belief. Besides personal belief (behavior belief), group belief (group belief) also determines one's actions. If the person believes that his group or social environment will approve his action, he will carry it out. On the other hand, if he believes that his social environment will not support him, he does not take this action.

CONCLUSIONS

This study concludes a significant relationship between traders' knowledge about COVID-19 and Compliance with the Use of Masks at Masomba Market based on the value of p = 0.003 0.05, and Ho is rejected. Then there is a significant relationship between the attitude of traders about COVID-19 and Compliance with the Use of Masks at Masomba Market based on the value of p = 0.019 0.05, and Ho is rejected.

SUGGESTION

Suggestions are recommended for the community, especially traders, to always be disciplined in health protocols, especially obediently using the correct mask as one of the preventions of transmission of COVID-19 when in public places, especially when talking, coughing, and sneezing.

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