RELATIONSHIP OF FAMILY KNOWLEDGE WITH COVID-19 PREVENTION BEHAVIOR IN THE ELDERLY

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ABSTRACT

COVID-19 has become a frightening disease for people, especially the elderly. Metabolic changes in the physical and psychological changes that occur in the elderly are a factor in the high mortality rate of the elderly in the era of the COVID-19 pandemic. The participation of families who must give extra attention to the elderly is very much needed and has a high contribution to improving the health status of the elderly. This study aims to determine the relationship between family knowledge and COVID-19 prevention behavior in the elderly in RT.10/RW.004, RawaBuaya, Cengkareng-West Jakarta. The design of this study used a quantitative correlation method with a cross sectional approach. The sample amounted to 53 respondents and was taken by accidental sampling. The tool used in this study used a questionnaire which was distributed to each family with elderly members. From the research data, it was found that there was a relationship between knowledge of the elderly and COVID-19 prevention behavior in the elderly. The conclusion of this study is that there is a relationship between family knowledge and Covid-19 prevention behavior in the elderly in RT.10/RW.004, RawaBuaya, Cengkareng-West Jakarta.
Keywords: Covid-19, elderly, family.

BACKGROUND

The COVID-19 pandemic has had an impact on various aspects of life. Especially in the elderly, and the elderly generally face a significant risk of contracting COVID-19. 8 out of 10 people die Suffering at least one comorbidity, suffering from cardiovascular disease, hypertension and diabetes, as well as various other chronic diseases (Zainal, 2020)

The elderly and pre-elderly age in the COVID-19 pandemic are one of the groups that are vulnerable to being affected, as evidenced by the data written in the task force for the acceleration of handling COVID-19, where there are 12.2% of positive confirmed cases in the elderly and 25 in the pre-elderly. ,1% in Indonesia. Old age is one of the markers. Living longer does not mean living in a healthy condition. Previous research has found that increasing age is also accompanied by an increasing tendency to get sick and have physical limitations due to a drastic decrease in physical abilities (Gatimu et al., 2016). Increasing age also tends to be followed by the emergence of various chronic diseases, not a few elderly have chronic diseases, such as heart disease, diabetes, asthma, or cancer. This can increase the risk or danger of viral infections and other diseases (Melani, 2020)

The ability of the family to manage health for their family is very important and is a hope for the welfare of other family

members, in terms of the extent to which the family must have the ability to recognize health problems, make decisions, the role of providing family health services, maintain the condition of the home environment that supports health. and maintain relationships that benefit families and health facilities (Ali, Z, 2010). The awareness of each individual in the family in meeting health needs is the initial capital to maintain their health status. An elderly who is an old age should be of more concern, an elderly person must also see his ability related to health so that he can remain independent at his age (Effendi 2018). In this pandemic condition, all activities and activities of the elderly really must be guided both biologically, psychologically, socially and spiritually.

Having a family or companion for the elderly is the key to the success of efforts to prevent all health problems related to the elderly, which in this case is in a pandemic condition, the elderly are expected to remain healthy and free from the risk of contracting COVID-19. As the results of research conducted by Abidin (2019), that the family plays an important role in maintaining and maintaining the health status of the family. Problems found in the family include limited family knowledge about preventive measures for the COVID-19 virus, lack of family awareness to use masks when leaving the house, lack of family understanding in the use of antiseptics and disinfectants when coughing and sneezing (Han Y, 2020).

Based on the results of interviews conducted by researchers in the RT 10/RW 004 RawaBuaya Researchers found that several elderly families did not know about how to prevent COVID-19 such as, keeping a distance, wearing masks, and washing hands with soap in running water or running water. Use antiseptic after activity. Based on the above phenomenon, the researcher is interested in conducting research with the title of the relationship between family knowledge and Covid-19 prevention behavior in the elderly. Based on the results of the preliminary study that has been carried out, the problem formulation can be formulated, namely whether there is a relationship between family knowledge and COVID-19 prevention behavior in the elderly in RT.10/RW.004, Rawabuaya, Cengkareng, West Jakarta.

RESEARCH METHODS

The design in this study was quantitative with observational analytics and used a cross-sectional design. The population in this study were all people living in the area of RT 10 RW 04 RawaBuaya, Cengkareng West Jakarta, while the sample in this study were families with the elderly living in the area of RT 10 RW 04 RawaBuaya, Cengkareng West Jakarta. This study uses an instrument in the form of a questionnaire containing questions regarding family knowledge with the prevention of COVID-19 in the elderly

RESEARCH RESULTS AND DISCUSSION

The results obtained from the results of data collection through questionnaires distributed to 53 respondents.

Frequency Distribution of Respondents Based on The Level of Knowledge.

	Frekuensi (n)	Persen(%)
Good	19	35.8
Enough	8	15.1
Not Enough	26	49.1
Total	53	100.0

From the results of data analysis obtained from the table above, it shows that there are 19 respondents who have good knowledge with a percentage of 35.8%, while there are 26 respondents who have not enough with a percentage of 49.1%.

The researcher's analysis related to the results that there was no relationship between family knowledge and COVID-19 prevention behavior in the elderly. Because the disease COVID-19 is a new thing for the community so they also lack information about COVID-19 and how to prevent it.

The problems obtained by the respondents include the limited knowledge of respondents about the COVID-19 virus prevention measures, lack of awareness to use masks when leaving the house, lack of understanding in the use of antiseptics and disinfectants when coughing and sneezing (Han Y, 2020).

Knowledge is the result of knowing and this occurs after someone has sensed a certain object. Most of human knowledge is obtained through the eyes and ears (Notoadmojo). Knowledge is needed as support in generating self-confidence, so it can be said that knowledge is a very important domain for the formation of one's actions. Knowledge in this study is that respondents are able to know about COVID-19 and its prevention efforts

Frequency Distribution of Respondents Based on Preventive Behavior

Behavior	Frekuensi (n)	Persen (%)
Very good	17	32.1
Good	13	24.5
Enough	8	15.1
Not enough	9	17.0
Very bad	6	11.3
Total	53	100.0

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The table above shows that there are 17 respondents who have very good behavior with a percentage of 32.1% while there are 6 respondents who have very bad preventive behavior with a percentage of 11.

The frequency distribution of respondents is based on the behavior of preventing covid-19, most of the respondents have very good behavior, namely 17 respondents with a percentage of 32.1% while those who have very bad behavior are 6 respondents with a percentage of 11.3%. The results of research conducted by AndinaBungaSyafel (2020) where the majority of respondents have good behavior as many as 72 people (60%) and the majority of respondents have bad behavior as many as 48 people (40%).

Good behavior can be an effort to prevent the transmission of COVID-19 (Audria, 2019). Health behavior is influenced by many factors, including knowledge, perception, emotion, motivation, and environment (Rahayu, 2014). Preventive behavior in a broad sense is not only limited to someone who is healthy but can also be aimed at people who are sick. In accordance with the limitation of "prevention" is "the act of keeping from happening", which means an action that keeps something from happening or in other words it doesn't get worse (Hariyono, 2013)

Relationship between knowledge and prevention behavior

Knowledge Level	Preventive Behavior COVID-19										P Value
	Very good		Good		Enough		Not Enough		Very bad		
	N	%	N	%	N	%	N	%	N	%	
Good	12	63.2%	6	31.6%	1	5.3%	0	0%	0	0%	0.073
Enough	2	25.0%	2	25.0%	3	37.5%	1	1.4%	0	0%	
Not Enough	3	8.3%	5	19.2%	4	30.8%	8	30.8%	6	23.1%	
Total	17	32.1%	13	24.5%	8	15.1%	9	17.0%	6	11.3%	

From the results of data analysis obtained in the table above, it shows that respondents who have good knowledge are 12 people with very good behavior with a percentage of 63.2% while respondents who have less knowledge are 3 people with very bad preventive behavior. The results of the statistical test analysis showed that the p-

value was 0.073, which means that the p-value <0.05 indicates that Ho fails to be rejected, so it can be concluded that there is a significant relationship between knowledge and COVID-19 prevention behavior.

Based on the knowledge obtained some respondents have less knowledge as many as 26 people with a percentage of 49.1%. based on the results of the statistical test, it was found that the p-value of 0.073 means that the p-value <0.05 indicates that Ho fails to be rejected, so it can be concluded that there is a significant relationship between knowledge and COVID-19 prevention behavior.

The theory put forward by Notoadmodjo related that respondents with a good level of knowledge had sufficient to good COVID-19 prevention measures. This can be interpreted that knowledge is a very important domain for the formation of one's actions because good knowledge can create good behavior as well. Where the level of family knowledge also affects compliance with using masks and hand washing compliance as an effort to prevent the spread of the corona virus. Compliance is a positive behavior from the family. On the other hand, bad family behavior will increase the number of cases and death rates due to COVID-19 transmission.

Good behavior can be an effort to prevent the spread of COVID-19. Health behavior is influenced by many factors including knowledge, perception, emotion, motivation and environment. Exploration of public health behavior can be seen from various components, including perceptions of disease susceptibility, perceptions of obstacles in prevention efforts, perceptions of benefits, encouragement, and individual perceptions of their abilities to carry out prevention efforts (Almi, 2020).

This study shows that most of the respondents' preventive behavior is in the very good category (32.1%). The forms of behavior shown include obedience in maintaining distance when outside the house, always washing hands with soap or hand sanitizer before entering the house, obeying the use of masks when traveling and not touching or shaking hands with other people. Someone who already knows about certain information, then he will be able to determine and make decisions on how he should deal with it. In other words, when a person has information about COVID-19, he will be able to determine how he should behave towards COVID-19 (Ahmadi, 2013)

CONCLUSION

Based on the results of research and analysis regarding "The Relationship of Family Knowledge With Covid-19 Prevention Behavior in the Elderly, of the 53 respondents who have been studied, the results show 26 respondents who have less knowledge (49.1%) and 19 respondents have good knowledge (35.8%). Of the 53 respondents who have been studied with the results of 17 respondents who have very good behavior (32.1%) and 6 respondents who have very good behavior (11.3%). The suggestion from this research is that one of the efforts that can be made by health workers in helping the community have adequate knowledge about the Covid-19 disease is by carrying out health promotion activities. It is also hoped that further researchers can improve research related to COVID-19 prevention behavior because it will improve the generalization of research results and have a higher benefit value.

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