Comparison of Public Awareness of Personal Hygiene before and during the COVID-19 Outbreak

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Abstract

The case of Covid-19 is still happening today with a prevalence rate still reaching two percent in Kendari city. The purpose of the study was to find out the comparison of public awareness of personal hygiene before and during or after the COVID-19 outbreak. This type of research is a quantitative cross-sectional study design. 1,557 families with a sample of 94 families using Proportional Random Sampling. Wilcoxon test became the analytical method. The results of the study prove that there are differences in the level of public awareness before and during or after facing the COVID-19 outbreak as evidenced by the p value < (0.000 < 0.05), where more people are aware of personal hygiene during or after COVID-19 compared to before the onset of COVID-19. The conclusion of the study is that public awareness in the Work Area of the Perumnas Public Health Center on the application of personal hygiene has increased after the COVID-19 outbreak. It is recommended for managers of disease prevention and control programs to further increase outreach to the community in the Work Area of the Perumnas Health Center about the application of personal hygiene such as maintaining distance, using masks, washing hands and others.

Keywords

Covid-19, Hygiene, Epidemic, Perumnas

Background

A serious world problem today is Covid-19 problem with the number of cases continuing to increase. 175 countries have been exposed to COVID-19 in early March 2020 with a transmission rate of 435,493 cases, then an increase of 89.6 million cases with a death toll of 1.93 million in 2021 [1]. Corona Virus Disease-19 has become a non-natural national disaster Positive cases of COVID-19 with the number of confirmed cases reaching 377,541 and patients recovering as many as 301,006 people, while the mortality rate for COVID-19 in Southeast Asia is the highest at 8.9% for Indonesia [2].

In Kendari City, the number of positive COVID-19 cases was 2117, 346 recovered, 29 died and 742 are still being treated. In Kendari City there are 15 health centers, Perumnas Health Center ranks 10th highest Corona Virus disease in Kendari City [3].

Based on data from the Perumnas Public Health Center, the number of confirmed cases of Corona positive continued to increase from March to October 2020 with a total of 103 confirmed positive cases with 6 deaths. Positive confirmed cases in the Work Area of the Perumnas Health Center are more dominant than other Puskesmas areas, namely Poasia, Jati Raya and Lepo-Lepo which occupy the highest order of COVID-19 cases with the number of cases ranging from 43-50 people [3,4].

The problem faced in preventing the spread of the corona virus is the lack of public awareness of personal hygiene sanitation. Many people think that Covid-19 is not a problem [5]. To stop the spread of this infectious disease, high public awareness is needed. If the community is not disciplined and supported by high public awareness, the concept of social distancing, lockdown and or whatever it will not work [6]. The spread of the epidemic must be prevented from getting wider, it needs support from various levels of society, not only from the government, the community must take a role by maintaining personal hygiene.

Implementation of preliminary study to 10 heads of families in the Work Area of the Perumnas Public Health Center.
Center. The results of the interview proved that there were 6 people who said that before the COVID-19 outbreak they did not keep their distance from other people, did not use masks and often ate in public places, unlike during the COVID-19 outbreak. Meanwhile, there were 7 family heads who said that there was no difference in the application of personal hygiene before and after the COVID-19 outbreak. The level of public awareness regarding prevention of transmission is important to minimize the incidence of COVID-19. Knowing the comparison of public awareness of personal hygiene before and during or after the COVID-19 outbreak was the aim of this study.

Method

Quantitative with a cross-sectional study design is the type and design of this study with a population of 1,557 families, and a sample of 94 families. Proportional Random Sampling is used for the sampling technique. The questionnaire became an instrument to collect data and analyzed the Wilcoxon test, then presented tables and explanations.

Results

The distribution of respondents in Table 1 shows that of the 94 respondents, 45.7% of respondents were predominantly aged 31-40 years and 6.4% respondents were aged > 50 years. In terms of gender, male is the most dominant 74.5% and female 25.5%. Based on education, the highest number was at the primary school level with 35.1% respondents and the smallest education was at undergraduate (5.3%). Based on the occupation, the most are entrepreneurs (42.6%) and Civil Servants (3.2%).

The study showed that before facing the COVID-19 outbreak, of the 94 respondents studied, there were 28 respondents (29.8%) with a sufficient level of awareness and there were 66 respondents (70.2%) with a low level of awareness of personal hygiene. Meanwhile, during or after facing the COVID-19 outbreak, there were 64 respondents (68.1%) with a sufficient level of awareness and there were 30 respondents (31.9%) with a low level of awareness in the category of personal hygiene. This means that public awareness regarding personal hygiene after the COVID-19 outbreak dominates the sufficient category (Table 2). Meanwhile, the mean value of public awareness of personal hygiene was higher during or after facing the COVID-19 outbreak, which was 72.21 compared to before the COVID-19 outbreak, which was 39.57.

The analysis of differences in public awareness of personal hygiene before and after the Covid-19 outbreak in Table 3 proves the results of the Wilcoxon Test on the level of awareness of Personal hygiene before facing the COVID-19 outbreak and after facing the COVID-19 outbreak, there are differences in the level of public awareness of personal hygiene before and during or after facing the COVID-19 outbreak in the Kendari City Perumnas Public Health Center Work Area.

Discussion

The results of the bivariate analysis prove that there are differences in the level of public awareness in dealing with the Covid-19 outbreak both before and during or after facing the COVID-19 outbreak as evidenced by the value of < 0.05 in the Wilcoxon test, where more people are aware of personal hygiene during or after COVID-19 compared to before
COVID-19. This proves that the level of public awareness of the application of personal hygiene in the Kendari City Public Health Center Work Area has increased during or after facing the COVID-19 outbreak. Another study also suggested that the Asymp.Sig value < 0.05 in the Wilcoxon signed rank test, where more people were aware of cleanliness during or after COVID-19 than before COVID-19 [7].

Compliance is a picture of a positive attitude of society. The increase in the number of cases and deaths of Covid-19 is a reflection of the attitude of the people who are not compliant [8]. Good curiosity and supported by good behavior will also trigger someone to take positive actions as well, this can be seen from student compliance as evidenced through actions so as not to be exposed to COVID-19 [9].

The increase was influenced by the appeal and recommendation from the government to continue implementing health protocols when in public places. Where before the COVID-19 outbreak occurred, people did not know the impact of not keeping their distance from other people, but after COVID-19 the government and health workers began to educate and educate the public about maintaining contact and being close to other people. This is what makes people afraid when they are in the open. This is because the increased risk of spreading COVID-19 can occur in crowded places.

Health protocols have been implemented by most people during or after the COVID-19 outbreak, such as wearing masks, batik etiquette and sneezing and social distancing, but the application of hand washing has not been carried out properly in accordance with WHO rules. The increase that occurred was influenced by an appeal from the government to comply with health protocols for the prevention and termination of disease transmission [10].

In preventing the transmission of the virus, the effectiveness of masks is a very good tool to use. Approximately 56% of the effectiveness of surgical masks that are able to prevent particles with a nanometer size, but in addition to surgical masks, to prevent Covid-19 people can also wear cloth masks to avoid splashing saliva/droplets [11]. Before the COVID-19 outbreak, the government had not recommended wearing masks when leaving the house, but after the COVID-19 outbreak the government has obligated the public to wear them when leaving the house. Forms of control and prevention by using masks.

Masks are protective for others and for themselves. Transmission of disease through splashing saliva can also be protected with a mask [12]. Hand washing behavior has also increased after COVID-19. This is because the government has launched a hand washing program with soap. The public has been given education related to diseases that will arise if they do not wash their hands with soap.

The pandemic period requires people to routinely, maintain personal hygiene by always washing their hands. This will be done a lot if we are after holding objects in the outside environment. Because viruses can enter our bodies through objects we touch [13]. Prevention of the epidemic that continues to increase is not only the task of the government, but it needs support from all levels of society so that the epidemic can pass. On the other hand, the movement to prevent the spread of the epidemic is the task of the community, which is supported by the government by increasing public awareness through educational efforts to the public using digital media during the Covid-19 pandemic [14].

To stop the transmission of disease, the main key is awareness and understanding from the community. If people are not disciplined and supported by high public awareness, the concept of social distancing, lockdown and or whatever will not work. Therefore, strategies and efforts from the government are needed through education about a clean and healthy living culture so that people are aware of the dangers of Covid-19.

Conclusion

There are differences in the level of public awareness of personal hygiene before and during or after facing the COVID-19 outbreak. It is hoped that health centre, especially health workers, will increase education and information to the public, whether there is an outbreak or there is no disease outbreak regarding the use of masks, keeping a distance and being able to maintain personal hygiene, wash hands and others. For the community to further improve and pay attention to the level of personal hygiene, whether there is an outbreak or there is no disease outbreak to prevent transmission of the Corona virus. As well as for others to explore more detailed information about public perceptions regarding the importance of personal hygiene awareness behavior by using qualitative research methods.

References


