

# The Relation Availability of Facilities and Family Support with Covid-19 Prevention

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## ABSTRACT

Coronavirus Disease 2019 (COVID-19) is an infectious disease that has become a global pandemic. The number of cases of COVID-19 continues to increase from year to year. Covid-19 cases in Payakumbuh City until December 2020 were 592 cases. One of the enabling and reinforcing factors in preventing Covid-19 in Payakumbuh City is the availability of facilities and family support. This study aims to determine the relationship between the availability of facilities and family support with the prevention of Covid-19. This research is an analytic observational study with a cross-sectional study design. The study was conducted in Payakumbuh City in March 2020. The population is the entire Payakumbuh City community in 2020, which is 135,573 people. The sample amounted to 196 people with the sampling technique of accidental sampling, namely anyone netted through the google form link, which was distributed through social media until the number met the predetermined sample quota. The data were then analyzed using the chi-square test (CI95% alpha 0.05). The results showed that the p-value of the relationship between the availability of facilities and the prevention of Covid-19 was 0.000, and the p-value of the relationship between family support and prevention of Covid-19 was 0.000. It can be concluded that there is a statistically significant relationship between the availability of infrastructure and family support with the prevention of covid-19 in the people of Payakumbuh City.

**Keywords:** Covid 19 Prevention, Facilities, and Family Support

## 1. INTRODUCTION

Coronavirus Disease 2019 (COVID-19) is a global pandemic. The number of cases of COVID-19 continues to increase from year to year. Globally, there are 219 countries/regions affected by COVID-19 until January 28 2021, with 101,561,219 confirmed cases and 2,196,944 deaths, with an average daily addition of 500,985 points. [1]. WHO said the Southeast Asian region had recorded a significant increase in the number of new cases and deaths from the coronavirus (Covid-19). Southeast Asia was the second most affected region, accounting for 28% of all new cases and 19% recent deaths. According to Worldometers data, out of 10 countries in Southeast Asia, the Philippines has the most issues, with 197,164 cases and 3,038 deaths. Indonesia ranks second with 157,859 cases and 6,858 deaths.

On March 2<sup>nd</sup> 2020, the first Covid-19 was discovered in Indonesia, with two cases. Data on January 28, 2021, showed 1,037,993 confirmed cases of COVID-19, 842,122 recovered, and 29,331

cases died [2]. The Covid-19 mortality rate in Indonesia is 8.9%. This is the greatest number in Southeast Asia [3]. On January 28, 2021, West Sumatra data recorded 26,732 cases, recovered 24,649 cases and died 592 cases [4].

Data obtained from the Payakumbuh City Covid-19 task force was received that the number of positive cases in Payakumbuh City until December 2020 was 592 cases, 583 instances recovered, and 9 points died. The COVID-19 patients consisted of 294 males and 298 females. The number of comorbid issues was 105 cases and clinical cases 289 cases [5].

Following up on the Covid-19 case, the Indonesian government has appealed to the public by providing health protocols to avoid the transmission of the COVID-19 outbreak. The health protocol is a manifestation of health behaviour in disease prevention efforts. According to L, public awareness is the primary key in efforts to break the chain of spreading this deadly infectious disease. Notoatmodjo's hypothesis by Green (2010) Common

risk factors (education, knowledge, attitudes, beliefs, beliefs, values, etc.) and aspects of the entire (education, knowledge, attitudes, beliefs, beliefs, values, etc.) influence a person's behavior (physical environment, and the availability or absence of facilities). Health), and also motivating elements (attitudes and behaviour of health workers or other workers and support from families) [6].

One of the enabling factors that can affect efforts to prevent COVID-19 is the physical environment in facilities and infrastructure. According to research by Nismawati[7], there is a relationship between the availability of infrastructure and efforts to prevent COVID-19, such as a place for washing hands, soap and clean water for washing hands or providing masks to be used during activities. While one of the reinforcing factors that influence a person's health behaviour is family support. The family has a vital role in developing, preventing and correcting health problems contained in the family members themselves. Health problems in the family are interrelated and influence each other between family members, ultimately affecting the surrounding community. The family has a complementary relationship with the health of its family members in building a healthy lifestyle and preventing all forms of the disease (Yuliati, 2020) [8].

The phenomenon found in the field found that the number of covid-19 cases in Payakumbuh City

has increased every month. This is due to the lack of public awareness to make efforts to prevent covid-19. The initial survey was conducted on ten people, as many as eight people who did not avert covid-19. A total of 7 of the samples did not apply health protocols, four people rarely washed their hands, and three people did not wear masks when leaving the house. The efforts to prevent covid are getting less and less when families do not provide information and motivation always to apply health protocols. Therefore, the purpose of this study was to determine the relationship between the availability of facilities and family support with the prevention of Covid-19 in the Payakumbuh District in 2020.

**2. METHODOLOGY**

This study is a cross-sectional analytic observational study. The study was conducted in Payakumbuh City in March 2020. The population is the entire Payakumbuh City community in 2020, which is 135,573 people. The sample amounted to 196 people with the sampling technique of accidental sampling, namely anyone netted through the google form link, which was distributed through social media until the number met the predetermined sample quota. The chi-square test was used to assess the data (CI95% alpha 0.05).

**3. RESULT AND DISCUSSION**

**3.1 Relation Between Availability of Facilities with Covid-19 Prevention**

*Table 1*

Availability of Facilities	Covid-19 Prevention				Total		P value	OR(95% CI)
	No		Yes		N	%		
	n	%	n	%				
Not Available	75	73,5	27	26,4	102	100	0,001	6,226 (3,347-11,580)
Available	29	30,9	65	69,1	94	100		
Total	104	53,1	92	46,9	196	100		

Based on the table, we can see 102 respondents whose facilities were unavailable, 75 respondents did not prevent Covid-19, and 27 respondents contained Covid-19. While among 94 respondents whose facilities were available, 29 respondents did not stop Covid-19, and 65 respondents did prevention of Covid-19. The resulting p-value of 0,001 indicates a statistically significant link between facility availability and Covid-19 prevention, according to statistical testing.

Nismawati (2020) said that there is a relationship between the availability of facilities and family support to prevent covid-19, these facilities such as a place for washing hands, soap and clean

water for washing hands or providing masks to be used during activities (p = 0.000)

There is a link between family support and COVID-19 prevention attempts because respondents who do not receive family support are less motivated to avoid COVID-19. The family's absence of information and motivation to always use masks, wash hands, and keep a distance causes respondents to be less motivated to take these actions. Moreover, respondents tend to forget if they are not reminded. On the other hand, respondents who get good support from their families will be enthusiastic about making efforts to prevent COVID-19. The family may also help by giving healthy and nutritious food to boost immunity and limit the spread of COVID-19.

**3.2 Relation Between Family Support with Covid-19 Prevention**

**Table .2**

Family Support	Covid-19 Prevention				Total		P value	OR(95% CI)
	No		Yes		N	%		
	n	%	n	%				
Not Good	86	64,2	48	35,8	134	100	0,001	4,380 (2,281- 8,408)
Good	18	29,0	44	71,0	62	100		
Total	104	53,1	92	46,9	196	100		

Based on the table, we can see that: from 134 respondents whose family support is good, there were 86 respondents who did not prevent Covid-19, and there were 48 respondents who do prevention of Covid-19. While among 62 respondents whose family support is not good, 18 respondents did not stop Covid-19, and 71 respondents do prevention of Covid-19. The statistically significant association between family support and Covid-19 prevention is statistically based on statistical tests achieved p-value 0.001.

Kundari (2020) stated that family support has a dominant influence on COVID-19 prevention behaviour in the community. The family has a significant role and responsibility for the health of themselves and other members. Families can provide vitamins, fruits, and vegetables to increase immunity, provide masks, hand sanitiser, and others. Families also play a role in conveying information, reminding, and motivating to implement preventive behaviour [9] consistently

The lack of availability of masks causes respondents not to be able to wear masks every time they go out of the house. Likewise, the lack of handwashing facilities outside the home makes respondents lazy to wash their hands after each trip because it is considered inconvenient to have to go to the bathroom after each trip. On the other hand, respondents who have infrastructure facilities will try to use them as best they can to prevent the transmission of COVID-19.

**4. CONCLUSION**

The availability of facilities and family support were found to have a substantial association with Covid-19 prevention, according to statistical research. As a suggestion: Health workers should motivate families to implement Covid-19 prevention wherever they are, seek the necessary facilities and support each other among families to make efforts to prevent COVID-19 optimally.

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**REFERENCES**

- [1] WHO. 2020. Rational Use of Personal Protective Equipment For Coronavirus Disease (Covid-19) And Considerations If Availability Is Very Limited. WHO/2019-Nov/IPC\_PPE\_use/2020.2
- [2] Ministry of Health of the Republic of Indonesia. 2020. Guidelines for the Prevention and Control of Covid-19. Jakarta. Director General of Disease Prevention and Control
- [3] Susilo, A. 2020. Coronavirus Disease 2019: Recent Literature Review. Indonesian Journal of Internal Medicine | Vol. 7, No. 1 | March 2020|
- [4] West Sumatra Covid-19 Task Force, 2020
- [5] Payakumbuh Distric Covid-19 Task Force, 2020
- [6] Notoatmodjo. 2010. Health Behavior Science. Jakarta. Rineka Cipta
- [7] Niswati. 2020. Factors Relating to the Implementation of Health Protocols for Micro-Enterprises During the Covid-19 Pandemic. UNM Environmental Journals. Volume 3 Number 3 August 2020 Pg. 116 – 124
- [8] Yulianti. 2020. The Role of the Family in the Prevention of the Covid-19 Outbreak in www.jurnal.esaunggul.ac.id
- [9] Kundari, NF. 2020. The Relationship of Social Support and Social Media Exposure to COVID-19 Prevention Behavior in the Greater Jakarta Area Community in 2020. Health Research and Development Media, Vol. 30 No. 4, December 2020, 281 – 294