



# Analysis of Factors Related to Compliance with Wearing Masks in the Mongging Market Based on the Health Belief Model

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**Abstract.** Covid-19 is a virus that transmits rapidly from one person to another, one of which is in public facilities such as traditional market. This study aims to analyze factors related to mask use obedience behavior on traders and buyers in the Mongging Market Based on the Health Belief Model. This is a quantitative study using a cross-sectional method. Traders and buyers made up the sample in this study, with a total of 125 respondents who agreed to be used as research samples by filling out research questionnaires and conducted analyze with fisher exact alternatives and spearman test. The result show that factors have significant relationship with excellent and correct adherence to wearing masks is perceived susceptibility (p-value = 0.000), perceived severity (p-value = 0.000), perceived benefits (p-value = 0.000), perceived barriers (p-value = 0.000), cues to action (p-value = 0.000), perceived threat (p-value = 0.000), and gender (p-value = 0.000). While age (p-value = 0.159), recent education (p = value = 0.104), income (p-value = 0.909) and self efficacy (p-value = 0.217) are not significant relationship with excellent and correct adherence to wearing masks on traders and buyers in the Mongging Market.

**Keywords:** wearing mask · traditional market · health belief model

## 1 Introduction

The outbreak of the Coronavirus, also known as Covid-19, which began in Wuhan, China, shocked almost the entire world in early 2020 [1]. Covid-19 spreads very fast among persons owing to close contact between a person and another person infected with Covid-19 [1, 2]. The World Health Organization declared the Covid-19 outbreak to be a global pandemic due to its rapid spread throughout the world [1].

In June 2021, Indonesia has the second highest number of new Covid-19 cases and deaths in the Southeast Asia region [3]. Covid-19 in Indonesia underwent a second wave and peaked in terms of active cases on July 24, 2021, with 574,135 cases [4]. East Java is one of the provinces in Indonesia that ranks fourth as of September 3, 2021, with

385,218 active cases of Covid-19 and 28,476 deaths caused by Covid-19 [5]. Pamekasan Regency is a district in East Java and the sole district in Madura with a red zone category as of 11 August 2021, compared to three other districts. Pamekasan Regency is the only level 3 district in East Java, with the lowest Covid-19 vaccine accomplishment rate [6]. As of April 19, 2022, there are still occurrences of Covid-19 with a new kind known as omicron, with 837 current cases reported [6]. To date, the activeness of Covid-19 demands good collaboration from all parties, such as each individual wearing masks as a way of carrying out health protocols [7].

The market is one of the public facilities where Covid-19 has a high potential for transmission between persons [8–10]. Mongging Market is one of the most important traditional markets in Pamekasan Regency, as well as the largest in the Pademawu District. Preliminary research indicated that merchants in Mongging Market perished as a result of Covid-19 exposure and that by 2021, the majority of dealers had been exposed to Covid-19. Based on preliminary data for one week in July 2021, the average trader who does not use masks appropriately and correctly is 171. Wearing masks safely and correctly is one of the health precautions that must be followed during the Covid-19 pandemic [11]. People who disregard health regulations increase the number of positive instances of Covid-19. It is likely that a fresh wave of Covid-19 cases will arise, leading to an increase in the number of victims who died as a result of Covid-19 [6, 12].

An effort that the community, including market traders and buyers, may do as a kind of preventative and control behavior begins with the presence of health perceptions in each individual regarding future health behaviors [1, 13]. The Health Belief Model is a widely utilized paradigm that is considered to be able to evaluate community compliance behavior during the Covid-19 pandemic [13, 14]. Previous research discovered a relationship between perceived vulnerability, perceived severity, perceived obstacles, and action cues and Health Protocol compliance behavior [12]. There is also a considerable correlation between anticipated rewards and compliant conduct in carrying out the new normal adaption [1]. Self-efficacy influences compliance behavior while implementing new Covid-19 routines [15]. People who have decided to be obedient in following government norms are said to have a threat perception. The last characteristic component that determines the choice of a healthy habit is [16]. Based on the Health Belief Model (HBM) theory, the purpose of this study is to examine the factors related to the compliance behavior of wearing masks among traders and buyers in Mongging Market.

## 2 Method

This is a quantitative study utilizing a cross-sectional approach. Based on the Health Belief Model (HBM) theory, this study sought to examine the factors associated with traders' and buyers' compliance with wearing masks at Mongging Market. This study collected data through surveys and direct questionnaires from 125 respondents (a mix of dealers and purchasers at Mongging Market) using the non-probability sample approach of incidental sampling. Data was collected in January and February 2022 at Mongging Market in Pamekasan Regency. Perceived vulnerability, perceived severity, perceived benefits, perceived barriers, self-efficacy, action cues, perceived threats, and individual

characteristics were independent variables, while the compliance of traders and buyers in wearing masks properly and correctly in Mongging Market was the dependent variable in this study.

A construct validity test, consisting of expert validity and item validity, was performed prior to distributing the questionnaire to the sample (question items). Two lecturers who were professionals in the field of health behavior science performed expert validity testing. The Pearson Product Moment test was used to calculate item validity, and the Alpha Cronbach approach was employed to perform reliability assessments. The questionnaire's rating instrument is a Likert scale with a score of 1–4. Each respondent's variable statement would be cumulative, and the cumulative value would be divided by the maximum score of answers per variable and multiplied by 100%. The value is categorized into high perception and compliance if the value is  $> 50\%$  and will be categorized as low if the value is  $\leq 50\%$ . SPSS 26 was used to analyze and evaluate the data that had been obtained. It included two data analyses: univariate analysis and multivariate analysis, to characterize the sociodemographic features of the study's respondents. The goal of the bivariate analysis is to determine the relationship between the independent and dependent variables using statistical tests such as the Fisher Exact alternative and the Spearman test. If  $r_{count} > 1$ , the independent variable is judged to have a substantial association (0.05). A 95% confidence interval (CI) was used in this investigation. This study's ethical approval is registered as number 029/HRECC.FODM/I/2022.

### 3 Results

#### 3.1 Characteristics of Respondents

According to the results of this study, traders and buyers in Mongging Market, Pamekasan Regency were more disobedient to wearing masks. It was discovered that 56.8% of 125 respondents did not use masks appropriately and correctly. The majority of respondents in this research (54.4%) were buyers. Table 1 shows the detailed characteristics of respondents.

**Table 1.** Characteristic of respondents

| Component                   | n  | %    |
|-----------------------------|----|------|
| <b>Obedience behavior</b>   |    |      |
| Not obedience               | 71 | 56.8 |
| Obey                        | 54 | 43.2 |
| <b>Status in the market</b> |    |      |
| Seller                      | 57 | 45.6 |
| Buyer                       | 68 | 54.4 |

**Table 2.** Socio-demographic characteristics

| Components                           | Obedience of Wearing Mask |       |          |      | Total |     | p-value |
|--------------------------------------|---------------------------|-------|----------|------|-------|-----|---------|
|                                      | Obey                      |       | Not Obey |      | n     | %   |         |
|                                      | n                         | %     | n        | %    |       |     |         |
| <b>Age</b>                           |                           |       |          |      |       |     |         |
| 17–45 years old                      | 33                        | 50.8  | 32       | 49.2 | 65    | 100 | 0.159   |
| ≥ 46 years old                       | 38                        | 63.3  | 22       | 36.7 | 60    | 100 |         |
| <b>Last Education</b>                |                           |       |          |      |       |     |         |
| Low (no school-JHS Graduate)         | 42                        | 63.6  | 24       | 36.4 | 66    | 100 | 0.104   |
| High (SHS Graduate-College Graduate) | 29                        | 49.2  | 30       | 50.8 | 59    | 100 |         |
| <b>Gender</b>                        |                           |       |          |      |       |     |         |
| Male                                 | 21                        | 87.5  | 3        | 12.5 | 24    | 100 | 0.000   |
| Female                               | 50                        | 49.50 | 51       | 50.5 | 101   | 100 |         |
| <b>Income</b>                        |                           |       |          |      |       |     |         |
| Low income (<1.500.000–2.500.00)     | 61                        | 57    | 46       | 43   | 107   | 100 | 0.909   |
| High income (>2.500.000)             | 10                        | 55.6  | 8        | 44.4 | 18    | 100 |         |

### 3.2 Socio-demographic Characteristics

The largest age group is the age range of 17–45 years as many as 65 people (52%) compared to the range of 46 years and over (48%). Respondents in the age range of 17–45 years and the age of 46 years, the majority tend to be disobedient in wearing masks properly and correctly, namely 50.8% and 63.3%, respectively. The age of the respondent is statistically not significantly related to the behavior of compliance with wearing masks that are good and correct ( $p > 0.05$ ). In this study, respondents with the most recent education did not finish junior high school, which amounted to 66 people (52.8%), while respondents with higher education categories (high school graduates/equivalent-college graduates) were 59 people (47.2%). In the last education of respondents who are classified as low (no school-graduated from junior high school) the majority behave disobediently in wearing masks properly and correctly (63.6%), while respondents with the last education in the high category (graduated from high school/college-equivalent) tend to be obedient in wearing masks properly and correctly (50.8%). The last education was also not significantly related to the behavior of wearing masks that were good and right ( $p > 0.05$ ).

Female respondents dominated this study with 101 people (80.8%) and only 24 male respondents (19.2%). Female respondents (50.50%) were more obedient in wearing masks appropriately and accurately than male respondents (87.5%). Gender was substantially connected with excellent and proper mask compliance behavior ( $p < 0.05$ ). Respondents with incomes between  $> 1,500,000$  and  $2,500,000$  outnumber those with incomes beyond  $> 2,500,000$  by 107 respondents (85.6%) to only 18 people (14.4%). The

income of respondents who are classified as low (<1,500,000–2,500,000) and income that is classified as high (>2,500,000), the majority both tended to behave disobediently in wearing masks properly and correctly, namely 57% and 55.6% in a row. In this study, income was not significantly related to the behavior of adherence to wearing masks properly and correctly ( $p > 0.05$ ).

### 3.3 Components of the Health Belief Model

Table 2 demonstrates that in this research, the majority of traders and buyers (71 people, or 56.8%) reported a high perception of vulnerability to Covid-19 exposure. Respondents with a high perception of vulnerability were more likely to use masks appropriately and correctly (72.23%). The perception of vulnerability is substantially related to the wearing of excellent and proper masks ( $p < 0.05$ ). Perceptions of severity and perceived benefits of high merchants and buyers, each with 111 people (88.8%), also dominate in this study. Respondents with a high perception of severity and low perception of benefits, as well as respondents with a high perception of severity and low perception of advantages, are equally dominating in having disobedient conduct when wearing a proper and correct mask, 51.35% and 100%, respectively. According to the statistical results, respondents' perceptions of severity and perceived advantages in this study were also significantly related to good and correct mask adherence ( $p < 0.05$ ) (Table 3).

As many as 75 people (60%) of traders and buyers face significant barriers in effectively and correctly wearing masks. Respondents with a strong awareness of difficulties were more likely to be disobedient in properly and correctly wearing masks (42.6%). Perceived barriers were significantly associated with proper and correct adherence to wearing masks ( $p < 0.05$ ). Respondents who have high self-efficacy in wearing masks properly and correctly in this study amounted to 123 people (98.4%). The majority of respondents with high self-efficacy tend to behave disobediently in wearing masks properly and correctly (56.10%). Self-efficacy was not significantly related to adherence to wearing masks properly and correctly ( $p > 0.05$ ).

As many as 108 people (86.4%) have felt a desire or urge to take action to comply with properly and appropriately wearing a mask. Of respondents in this study who received high action cues, 50% responded faithfully while wearing correct and proper masks. Cues to act were significantly linked with correct and proper mask adherence ( $p < 0.05$ ). The majority of traders and buyers were likewise concerned about being exposed to Covid-19 (56%). Respondents with high danger perception (70%) wore masks appropriately and correctly. Threat perception was associated mask wearing behavior properly and correctly ( $p < 0.05$ ).

## 4 Discussion

Compliance is defined as a person's behavior in response to a policy, invitation, or command as demonstrated by actual action [17, 18]. Health protocols are government laws that must be followed to avoid the spread of Covid-19 and break the chain of transmission of Covid-19 during the Covid-19 pandemic [11, 15]. In this study, 43.2% of traders and buyers performed obediently in wearing masks appropriately and correctly.

**Table 3.** Components of the health belief model

| Component                  | Obedience of Wearing The Mask |       |          |       | Total |     | p-value |
|----------------------------|-------------------------------|-------|----------|-------|-------|-----|---------|
|                            | Obey                          |       | Not Obey |       | n     | %   |         |
|                            | n                             | %     | n        | %     |       |     |         |
| <b>Vulnerability</b>       |                               |       |          |       |       |     |         |
| Low                        | 52                            | 96.30 | 2        | 3.70  | 54    | 100 | 0.000   |
| High                       | 19                            | 26.77 | 52       | 72.23 | 71    | 100 |         |
| <b>Severity perception</b> |                               |       |          |       |       |     |         |
| Low                        | 14                            | 100   | 0        | 0     | 14    | 100 | 0.000   |
| High                       | 57                            | 51.35 | 54       | 48.65 | 111   | 100 |         |
| <b>Benefit perception</b>  |                               |       |          |       |       |     |         |
| Low                        | 14                            | 100   | 0        | 0     | 14    | 100 | 0.000   |
| High                       | 57                            | 51.35 | 54       | 48.65 | 111   | 100 |         |
| <b>Obstacle perception</b> |                               |       |          |       |       |     |         |
| Low                        | 0                             | 0     | 50       | 100   | 50    | 100 | 0.000   |
| High                       | 71                            | 42.6  | 4        | 32.4  | 75    | 100 |         |
| <b>Self efficacy</b>       |                               |       |          |       |       |     |         |
| Low                        | 2                             | 100   | 0        | 0     | 2     | 100 | 0.217   |
| High                       | 69                            | 56.10 | 54       | 43.90 | 123   | 100 |         |
| <b>Action clue</b>         |                               |       |          |       |       |     |         |
| Low                        | 17                            | 100   | 0        | 0     | 17    | 100 | 0.000   |
| High                       | 54                            | 50    | 54       | 50    | 108   | 100 |         |
| <b>Threat perception</b>   |                               |       |          |       |       |     |         |
| Low                        | 50                            | 90.91 | 5        | 9.09  | 55    | 100 | 0.000   |
| High                       | 21                            | 30    | 49       | 70    | 70    | 100 |         |

This result is consistent with Siahaineinia's research, which found that 46.4% of traders in Medan City's Morning Market follow health protocols [19]. According to Dessy's research, just 8.2% of traders in the Cibinong Market implement health protocols [8]. Individual compliance is impacted by the presence of social pressure, which can be quantified as acceptance, trust, or belief and eventually results in action [8]. The Health Belief Model (HBM) is based on the idea that it may provide an evaluation of a person's specific healthy behavior, in this case, the compliance behavior of wearing masks that are good and proper during the Covid-19 pandemic to avoid Covid-19 exposure [16].

The gender of the respondents was substantially correlated to their adherence to wearing appropriate and suitable masks. Meanwhile, age, last education, and income did not affect compliance with wearing masks properly and correctly. These results are consistent with Fadilah's research, which found no significant correlation between age

and education and community compliance with adopting new habits, but a substantial relationship between gender and community compliance with adapting new habits [15]. This research is further supported by Zainal's results that there is a strong association between respondents' gender and adherence to therapy for hypertension patients [20]. Perception of vulnerability is an individual's belief in his vulnerability that he would be exposed to or developed certain diseases that will influence his health status so that the individual will ultimately take and carry out healthy measures [21]. According to the results of this study, the perception of vulnerability is highly associated with compliance with wearing masks appropriately and correctly. This study supports Sari's research, which found a correlation between perceived vulnerability and compliance behavior in following health procedures for Ciracar, East Jakarta inhabitants [12]. The study's results are supported by prior vulnerability perception studies showing individuals will react and act healthily if they believe they are vulnerable to particular diseases [15, 21, 22].

The intensity of a specific disease that a person experience allows a person to feel the repercussions that will be gained later, which is a danger to himself, and this will eventually alter the person's drive to do a healthy activity [15, 23]. This study demonstrates a substantial association between the sense of severity and excellent and proper adherence to wearing masks. This study supports Siddiq's research, which found a correlation between the sense of severity or seriousness and local community compliance with mask use [24]. The results of this study are also directly proportional to Sari that there is a relationship between perceptions of vulnerability and compliance behavior in carrying out health protocols for residents in Ciracas, East Jakarta [12]. Perceptions of benefits and perceptions of barriers with good and correct adherence to wearing masks each have a significant relationship. The results of this study are in line with research conducted by Prastyawati that there is a significant relationship between perceived severity and preventive behavior for COVID-19 [25]. This is also consistent with Afro's study, which shows that perceived benefits and perceived barriers increase adherence to health protocols [1]. Individuals who believe that taking a healthy action will reduce their vulnerability to experiencing or contracting certain diseases, or will reduce the severity of the disease that has been experienced or faced, are more likely to carry out their actions consistently, which is a concept of perceived benefits [15, 21]. In addition, when someone takes preventive action and finds obstacles, the emergence of these obstacles will affect the small size of the effort to be made, someone who finds obstacles that are high enough, the lower the probability that the person will behave healthily [1, 15].

Self-efficacy, often known as self-confidence, refers to an individual's belief that he is capable of carrying out a beneficial action until the end [26]. In this study, there was no significant relationship between self-efficacy and excellent and proper adherence to wearing masks. This study supports Sidiq's results that there was no relationship between self-efficacy and local community compliance in the use of masks [24]. According to the Health Belief Model idea, cues to act can raise a person's sense of threat, and providing a cue to act is more effective than increasing benefits/benefits or lowering current barriers [16]. Cues to behave with good and proper adherence to wearing masks have a strong association in this study. The results of this study support Fadilah's research, which found a link between acting gestures and people's willingness to adopt new behaviors [15]. Sari's research also supports the results of this study, which show a correlation

between acting cues and compliance behavior in residents following health protocols [12]. Threat perception is a state in which a person believes that he has to defend himself when confronted with an unfavorable scenario to avoid being exposed to a sickness [27, 28]. In this study, there is a substantial association between perceived threat and adherence to wearing masks appropriately and correctly. These results are consistent with Ningsih's results that threat perception is directly related to Covid-19 preventive behavior [29]. Fernando's research adds to this study by demonstrating that the higher a person's impression of a threat, the more influential a person's attitude is to be more obedient in carrying out a command, such as properly and correctly wearing a mask [30].

## 5 Conclusion

The majority of traders and buyers at Mongging Market, Pamekasan Regency are disobedient when it comes to wearing proper masks. The factors of perceived vulnerability, perceived severity, perceived advantages, perceived obstacles, action cues, and perceived threats all have a significant correlation with traders' and buyers' compliance in wearing masks appropriately and correctly in Mongging Market. Meanwhile, only gender has a significant correlation with the compliance of Mongging Market traders and buyers in wearing masks appropriately and correctly on the individual characteristics component. The other three components, namely the respondent's age, last education, and income, are not substantially associated with compliance with wearing masks appropriately and correctly.

It is advised that health promotion officers at the Puskesmas in the East Pademawu region be re-educated on the necessity of wearing masks appropriately and correctly. To help reduce the spread of Covid-19 at the market, the regional authority that controls the Mongging Market is encouraged to provide amenities like hand washing and soap. As long as the Covid-19 pandemic has not been declared finished, all traders and buyers at Mongging Market are encouraged to constantly use masks appropriately and correctly.

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