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Analysis of Community Behavior in Banyumas Regency During the 2021 Covid-19 Emergency PPKM Period

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Abstract

The COVID-19 pandemic forces the public to follow health protocols to prevent the virus from spreading. Compliance with these protocols is influenced by factors such as education level and gender. This study aims to analyze the relationship between education level and gender with compliance to health protocols in Banyumas Regency during the COVID-19 Emergency Community Activity Restrictions (PPKM in bahasa) period. The research data was sourced from a survey by the Central Bureau of Statistics (BPS in bahasa) on health protocol compliance in Indonesia The study uses a descriptive quantitative method, where data was analyzed to examine the relationship between education, gender, and compliance. The results show a significant difference in compliance between males and females, with females being more compliant. Respondents with higher education levels also showed better compliance than those with lower education levels. This means that education and gender influence people's compliance in following health protocols. This finding is expected to help the government formulate policies to increase public compliance during the pandemic.

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1. INTRODUCTION

The COVID-19 pandemic requires the public to implement health protocols as the main step to prevent the spread of the virus. Governments around the world are implementing various health protocols such as the use of masks, social restrictions, quarantine and lockdown to stop the spread of the virus. This health protocol is carried out to reduce the spread of the virus and has an impact on daily life, especially with regard to work, education and social interactions. Education plays an important role in forming individual health awareness. According to Law on the Education System No. 20 of 2003, education is "a conscious and planned effort to create an atmosphere of learning and learning so that students actively develop their potential to have religious spiritual strength, self-control, personality, intelligence, morals. noble and the skills needed by himself and society." Research conducted by (Damayanti & Sofyan, 2022) shows that people with a higher level of education are better able to understand the importance of health protocols and are more compliant with the regulations set because they have good knowledge so they understand the right way to prevent the transmission of Covid-19.

Apart from education, gender can also influence health behavior. According to the Indonesian Ministry of Health (2002), gender is a biological-anatomical characteristic 141 | Analysis of Community Behavior in Banyumas Regency During the 2021 Covid-19

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(especially the reproductive and hormonal systems) followed by physiological characteristics of the body that determine whether a person is male or female. Research conducted by (Nawangsari, 2021) states that women have a better understanding of disease prevention through reading and discussing disease prevention than men. Based on research conducted by (Natalia Saylensky Dewa, Wulan Pingkan Julia Kaunang, 2022) it is stated that there are differences in COVID-19 prevention behavior based on gender in the community of Wulauan Village, North Tondano District. Women tend to show better prevention behavior than men in the context of preventing COVID-19. This shows that gender influences people's behavior in efforts to prevent pandemics. This shows that women have a higher level of compliance with their own and their family's health compared to men who often tend to ignore health protocols. (Hutauruk, 2020) Obedience is the behavior of obeying an instruction ordered by an authority owner. Generally, a person's obedience occurs due to orders received from parties who have more authority than themselves, because the higher the status of a person's authority figure, the more people will obey the orders given by the authority figure.

Research on compliance with health protocols conducted by (Riyadi & Larasaty, 2020) stated that individuals who have a high level of education will tend to comply with health protocols because of their knowledge about the risks and how to stop the spread of COVID-19. Apart from that (Lianira Mutmaina et al., 2022) analyzed the influence of gender and education on compliance with health protocols in preventing Covid-19 in the community in RW 03 Sadeng Village in 2022. The results of this research show that gender and level of education influence community compliance. in implementing health protocols. Men tend to be less compliant than women, while respondents with higher education show better levels of compliance than respondents with less education.

This research will analyze two main factors that are thought to influence the level of compliance with health protocols, namely education and gender. This research uses secondary data including the results of a survey carried out by the Central Statistics Agency (BPS). This data will provide a comprehensive understanding of the level of community compliance in various regions of Indonesia. This research aims to analyze community behavior based on gender and education level in Banyumas Regency during the COVID-19 Emergency PPKM period.

2. RESEARCH METHOD

This research is quantitative research with a positivism paradigm, trying to analyze the level of compliance with health protocols based on the level of education and gender of the community. According to several experts, quantitative research has various but complementary definitions. According to Martono (2023), a quantitative research method is a research procedure in which data is collected using numbers.

According to (Sutriani & Octaviani, 2019) secondary data analysis is the process of compiling, categorizing data, looking for patterns or themes with the aim of finding out its meaning. Data analysis in this research is a comparative data analysis method using the Kendall Tau Correlation test. The data obtained is data from the Banyumas Central Statistics Agency (BPS). The data taken is data on gender and level of education with Hypothesis (H1): There is a significant influence on compliance with the COVID-19 health protocol between gender and level of education.

3. RESEARCH RESULTS AND DISCUSSION

This research was carried out in Banyumas Regency with a focus on analyzing data taken from the Banyumas Regency Central Statistics Agency website. The data used in this research covers the period 13 to 20 July 2021 with a total of 1265 respondents who can

provide a representative picture of the situation and conditions in the Banyumas area during the COVID-19 Emergency PPKM period. By utilizing official data sources, this research aims to obtain valid and reliable information to assess the level of public compliance with health protocols during that period.

Apart from that, obtaining data requires a survey of respondents. This survey covers various groups of society taking into account gender differences to identify patterns and trends that may emerge. This survey involved 1,265 respondents with the majority of participants being women, totaling 729 people and male respondents totaling 536 people. This data shows fairly balanced participation and views between men and women.

3.1 Research result

The following data shows the level of compliance with health protocols based on gender:

Table 1. Protocol for using 1 mask

	Woman	Man	Total	Percentage
Rarely	6	6	12	0.95%
Sometimes	39	51	90	7.11%
Often	684	479	1163	91.94%
Total	729	536	1265	100%

Based on table 1, it shows that the level of compliance "Rarely" in complying with the protocol of using 1 mask is equal for women and men. The majority level of compliance "Sometimes" in complying with the protocol of using 1 mask was carried out by men, 51 respondents. The "Frequently" level of compliance in complying with the protocol of using 1 mask was mostly carried out by women, 684 respondents.

Women and men still often comply with the protocol of using 1 mask. This is supported by research conducted by (Ridwan et al., 2020) where it is said that masks are personal protective equipment that covers the user's mouth and nose when interacting with other people whose health status is unknown. This research provides a strong basis for why wearing masks can reduce the risk of transmitting COVID-19. The data in table 1 shows that there are significant differences between men and women in complying with the health protocol for using masks. Research conducted by (Chrisnanda et al., 2022) states that women tend to focus more on protecting themselves and others by wearing masks, considering their dominant role in handling most of the care responsibilities within the family.

Table 2. Protocol using 2 masks

	Woman	Man	Total	Percentage
Rarely	94	104	198	15.65%
Sometimes	174	167	341	26.96%
Often	461	265	726	57.39%
Total	729	536	1265	100%

Based on table 2, it shows that the compliance level of "Rarely" in complying with the protocol of using 2 masks was mostly carried out by men, totaling 104 respondents. The majority level of compliance "Sometimes" in complying with the protocol of using 2 masks was carried out by women as many as 174 respondents. The "Frequently" level of compliance in complying with the protocol of using 2 masks was mostly carried out by women as many as 461 respondents.

Women and men still often comply with the protocol of using 2 masks. This is in line with research conducted by (Fitriasari, 2021) which states that the correct way to use a

mask consists of two layers, namely one surgical mask covered with a cloth mask. Using a two-layer mask is more effective in preventing transmission of the Covid-19 virus compared to using just one layer of mask. Table 2 shows that women are more compliant in implementing health protocols using 2 masks compared to men. This was revealed by research conducted by (Elon et al., 2022) that women tend to have better health awareness than men, not only in terms of concern but also in terms of knowledge about health.

Table 3. Protocol for washing hands with soap

	Woman	Man	Total	Percentage
Rarely	8	24	32	2.55%
Sometimes	108	135	243	19.20%
Often	613	377	990	78.25%
Total	729	536	1265	100%

Based on table 3, it shows that the compliance level of "Rarely" in complying with the protocol for washing hands with soap was mostly carried out by men as many as 24 respondents. The majority level of compliance "Sometimes" in complying with the protocol for washing hands with soap was carried out by as many as 135 respondents. The majority level of compliance with "Frequently" in complying with the protocol for washing hands with soap was carried out by women as many as 613 respondents.

Women and men still often comply with the protocol of washing their hands with soap. According to (Simanjuntak et al., 2020) women pay more attention to their own health so they are more compliant with health protocols in preventing COVID-19. Women are more compliant in using masks, maintaining hygiene and maintaining distance. In line with (Istiarini, 2021) assumes that community compliance in washing hands is good enough because people always wash their hands using running water using soap for a duration of 60 seconds or using *hand scrub* with a duration of 30 seconds

Table 4. Protocol for maintaining distance

	Woman	Man	Total	Percentage
Rarely	18	31	49	3.87%
Sometimes	189	157	346	27.65%
Often	522	348	870	68.77%
Total	729	536	1265	100%

Based on table 4, it shows that the level of compliance "Rarely" in complying with the protocol for maintaining distance was mostly carried out by men as many as 31 respondents. The majority level of compliance "Sometimes" in complying with the protocol for maintaining distance was carried out by women as many as 189 respondents. The majority level of compliance "Frequently" in complying with the protocol for maintaining distance was carried out by women as many as 522 respondents.

Women and men still often comply with social distancing protocols. In line with research (Riyadi & Larasaty, 2020), which states that women are more compliant in following and implementing health protocols as an effort to protect himself from being exposed to the Covid-19 virus and taking precautions to break the chain of its spread. In accordance with research (Yuliza et al., 2012) which shows the relationship between distance keeping behavior and gender where women have good distance keeping behavior 3.4 times compared to men and women practice PHBS more and often than men. This shows

that women have a tendency to be more obedient and follow the implementation of health protocols compared to men. Women are more likely to care about their health than men.

Table 5. Protocol for avoiding crowds

	Woman	Man	Total	Percentage
Rarely	7	15	22	1.74%
Sometimes	102	117	219	17.31%
Often	620	404	1024	80.95%
Total	729	536	1265	100%

Based on table 5, it shows that the compliance level of "Rarely" in complying with the protocol for avoiding crowds was mostly carried out by 15 male respondents. The majority level of compliance "Sometimes" in complying with the protocol for avoiding crowds was carried out by as many as 117 respondents. The majority level of compliance "Frequently" in complying with the protocol for avoiding crowds was carried out by women as many as 604 respondents.

Women and men still often comply with the protocol of avoiding crowds. According to Pratama and Hidayat (2020), limiting contact with other people is the best way to reduce or break the chain of disease spread coronavirus 2019 or what is often called COVID-19. This is also supported by research conducted (Pratama & Hidayat, 2020), male and female informants in the research revealed that social distancing needs to be implemented to reduce the positive number of corona so that the pandemic situation ends quickly and people can live normally again.

This research aims to obtain a comprehensive picture of the level of compliance with health protocols in various community groups. The survey was conducted involving respondents from various levels of education to ensure diverse representation. This survey was attended by 1,265 people from various levels of education. A total of 531 respondents came from elementary to high school levels, including students from primary to secondary levels and the other 734 respondents were students from tertiary level. This diverse participation helps provide a broader and more comprehensive picture. The following data shows the level of compliance with health protocols based on education level:

Table 6. Protocol using 1 mask

	SMA	PT	Total	Percentage
Rarely	21	21	42	3.36%
Sometimes	86	229	314	24.86%
Often	424	484	908	71.78%
Total	531	734	1265	100%

Based on table 6, it shows that the level of compliance "Rarely" in complying with the protocol of using 1 mask is balanced by respondents at high school level and respondents at tertiary level. The majority of respondents with a tertiary education level in complying with the protocol of using 1 mask were the majority of respondents with a tertiary education level. The "Frequently" level of compliance in complying with the protocol of using 1 mask was mostly carried out by respondents with a tertiary education level, 484 respondents.

Respondents with a high school education level and below and respondents with a tertiary level still often comply with the protocol of using 1 mask. This is supported by research (Djupri & Sulistia, 2021), which found that there is a relationship between the level of education and the discipline of wearing masks among residents of RT 05 RW 05, Bintaro Village. He also stated that, education influences the learning process, the higher a person's

education, the easier it is for that person to receive information. A person's higher education will get information both from other people and the mass media. The more information you receive, the more knowledge you gain about health.

Table 7. Protocol using 2 masks

	SMA	PT	Total	Percentage
Rarely	5	7	12	0.95%
Sometimes	51	41	92	7.27%
Often	475	686	1161	91.78%
Total	531	734	1265	100%

Based on table 7, it shows that the level of compliance "Very rarely" in complying with the protocol of using 2 masks was mostly carried out by 7 university respondents. The "Sometimes" level of compliance in complying with the protocol of using 2 masks was mostly carried out by respondents with a high school education level of 41 respondents. The "Frequently" level of compliance in complying with the protocol of using 2 masks was mostly carried out by respondents with a tertiary education level of 686 respondents.

Respondents with a high school level of education and below and respondents with a tertiary level still often comply with the protocol of using 2 masks. This research is in line with previous research, namely according to (Purnamasari & Anisa Ell Raharyani, 2020) in the journal the level of public knowledge and behavior regarding Covid-19, it is said that through the process of gaining knowledge, knowledge which is a fundamental factor that influences a person's behavior can become better. The results of this research are also in line with research (Hutagaol & Wulandar, 2021) on the relationship between knowledge and compliance with using masks for 55 teenagers at the Salemba Adventist College High School, which shows a specific relationship between the level of knowledge and compliance with using masks. Most of the respondents, who are teenagers who are still studying at high school, have a high level of knowledge about Covid-19, so they also found a high level of compliance with wearing masks based on the survey results.

Table 8. Protocol for washing hands with soap

	SMA	PT	Total	Percentage
Rarely	15	18	33	2.61%
Sometimes	119	130	249	19.68%
Often	397	586	983	77.71%
Total	531	734	1265	100%

Based on table 8, it shows that the level of compliance "Rarely" in complying with the protocol for washing hands with soap was mostly carried out by respondents with a tertiary education level, 18 respondents. The majority level of compliance with "Sometimes" in complying with the protocol for washing hands with soap was carried out by respondents with a higher education level, 130 respondents. The majority of respondents with a tertiary education level in complying with the protocol for washing hands with soap were the majority of respondents with a tertiary education level.

This level of compliance is in line with research conducted by (Hutapea & Hutapea, 2021) that students comply with washing their hands with soap properly (at least 40 seconds, running water) and often, especially before and after carrying out activities, where this is shown through the data It was found that there were no students who never washed their hands. However, of the 87 students, there were still those who only did it sometimes, namely 33 students (38%) and 54 students (62%) often did this activity. Compliance with

maintaining hand hygiene is an important prevention and transmission measure to implement, washing hands with soap and running water can kill bacteria, viruses, germs and also disease (Sinaga et al., 2020).

Table 9. Protocol for maintaining distance

	SMA	PT	Total	Percentage
Rarely	24	27	51	4.03%
Sometimes	148	200	348	27.51%
Often	359	507	866	68.46%
Total	531	734	1265	100%

Based on table 9, it shows that the level of compliance "Rarely" in complying with the protocol for maintaining distance was mostly carried out by respondents with a tertiary education level, 27 respondents. The majority level of compliance "Sometimes" in complying with the protocol for maintaining distance was carried out by respondents with a higher education level of 200 respondents. The majority of respondents with a tertiary education level in complying with the protocol for maintaining distance were carried out by 734 respondents with a higher education level.

Respondents with a high school education level or below and respondents with a tertiary level still often adhere to the protocol for maintaining distance. This is also supported by research conducted by (Tetartor et al., 2021), stating that factors related to the implementation of health protocols include education, knowledge and attitudes. Based on the data in table 9, it is stated that respondents with a tertiary education level are more compliant with the protocol for maintaining distance compared to respondents with a high school education level or below. This is also supported by the statement (Widayanti, 2020), that many people still do not comply with health protocols. This is influenced by various factors, with minimal knowledge being the main cause. As a result, Covid-19 cases due to contact with confirmed patients are increasing day by day.

Table 10. Protocol avoid crowd

	SMA	PT	Total	Percentage
Rarely	12	11	23	1.82%
Sometimes	100	123	223	17.63%
Often	419	600	1019	80.55%
Total	531	734	1265	100%

Based on table 10, it shows that the level of compliance "Rarely" in complying with the protocol for avoiding crowds was mostly carried out by 12 respondents with a high school education level. The majority level of compliance "Sometimes" in complying with the protocol for avoiding crowds was carried out by respondents with a higher education level of 123 respondents. The "Frequently" level of compliance in complying with the protocol for avoiding crowds was mostly carried out by respondents with a tertiary education level of 600 respondents.

Respondents with a high school education level or below and respondents with a tertiary level still often adhere to the protocol of avoiding crowds. This was also stated by (Widyakusuma Putra & Manalu, 2020) that knowledge and education have a correlation with people's behavior in implementing health protocols. The data in table 10 shows that there is a difference in that respondents with a tertiary education level are more compliant in implementing health protocols to avoid crowds. This is also in line with research conducted by (Lailatul K & Khuzaifah, 2021) on students in Poso which stated that the

respondents were very good at implementing health protocols where respondents avoided 3c namely *crowded places*, *contact situation* And *closed spaces*.

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3.2 Discussion

3.2.1 The Influence of Gender on the Level of Compliance with Health Protocols

Based on the results of the correlation analysis, the relationship between gender and the level of compliance with health protocols shows a very weak correlation with a value of -0.128. This means that gender differences (male or female) do not have a big influence on a person's level of compliance in implementing health protocols. Even though this correlation is weak, the results of statistical tests show that the relationship remains significant so that H1 is accepted and H0 is rejected, with a p-value of 0.00, which is smaller than the significance level of 0.05. This means that, even though the effect is small, the data shows that there is a real relationship between gender and compliance with health protocols, not just a coincidence.

Gender has a weak influence on compliance with health protocols, this result is still important because it shows that there are other factors that are more dominant in influencing compliance behavior, so they need to be considered in health policy. Research conducted by (Riyadi & Larasaty, 2020) states that marital status has a significant influence on the level of community compliance in implementing health protocols. In other words, someone who lives with their partner will have a tendency to always be obedient and adhere to the implementation of protocols. This is because they do not want to be exposed to the Covid-19 virus and transmit it to their partners. In line with research conducted by (Halimatuzzahro' et al., 2021), there were eight variables analyzed and reduced to two main factors, namely Perceptions About COVID-19 and Perceptions About Health Protocols. The research results show that a person's perception has a significant influence in shaping and changing health behavior, including the level of compliance with health protocols. In line with research (Mauidhah et al., 2021) states that parents' age will be a factor that influences parents' decision to obey. In this case, health protocol campaigns may need to target aspects other than gender to more effectively increase compliance in society, such as educational factors, individual awareness, or the broader social environment.

3.2.2 The Influence of Education Level on the Level of Compliance with Health Protocols

Based on the results of correlation analysis, the relationship between level of education (X2) and level of compliance with health protocols (Y) is very weak, with a correlation value of -0.009. This correlation value, which is close to 0, indicates that there is no significant relationship between a person's level of education and how compliant they are in implementing health protocols. This means that high or low education does not significantly influence compliance behavior with health protocols.

Apart from that, the p-value of 0.73 indicates that the relationship between these two variables is not significant, so H1 is rejected and H0 is accepted. Since the p-value is greater than 0.05, this indicates that the observed differences or relationships may be just a coincidence and not strong enough to be considered a generally accepted fact. These results indicate that the educational level factor does not have an important role in influencing the level of compliance with health protocols because there are still other factors that are more dominant. According to (Diana et al., 2021), people have different perceptions of the risks of COVID-19. If someone believes that COVID-19 is dangerous, they tend to be more careful in maintaining their health during the pandemic, because they realize that COVID-19

can have an impact on themselves and the people around them. In addition, research by (Afrianti & Rahmiati, 2021) found that other variables, such as age, knowledge, attitudes and motivation, also have a significant influence on people's compliance with health protocols. These results are in line with research (Lianira Mutmaina et al., 2022), which shows that there is a significant relationship between respondents' attitudes and compliance with health protocols in preventing COVID-19 in the RW 03 Sadeng Village community. Furthermore, (Fadeli, 2021) stated that culture also has an important role in shaping people's compliance behavior with health protocols. Therefore, to increase public compliance, other, more effective approaches are needed, such as increasing awareness or more comprehensive campaigns that target other factors such as attitudes, environment, or individual motivation in maintaining health. Based on several previous studies, there are external factors that influence health protocol level, namely age, knowledge, attitudes, motivation and culture.

4. CONCLUSION

The research results show that the relationship between gender and the level of compliance with health protocols is very weak, with a correlation value of -0.128, although it is statistically significant (p-value 0.00). This shows that gender differences influence compliance, but the effect is very small. On the other hand, the analysis of education level shows a very low correlation (-0.009) and is not statistically significant (p-value 0.73), which means that education level does not have a role in influencing a person's compliance with health protocols.

Overall, neither gender nor education level had a dominant influence on the level of compliance. Therefore, other, more effective approaches are needed, such as health campaigns that focus on increasing individual awareness and supporting the social environment. Supervision by health workers is also needed to encourage more positive behavioral changes in complying with health protocols in the community.

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