

Determinant Factors of COVID-19 Vaccination Participation at Ndetundora Health Center, Ende, East Nusa Tenggara

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Received: 19 December 2022; Accepted: 10 January 2023; Available online: 16 July 2023

ABSTRACT

Background: The COVID-19 pandemic is one of the major public health problems today and the whole country is experiencing a pandemic. Vaccination is the government's effort to tackle the COVID-19 pandemic. The coverage of COVID-19 vaccination at the Ndetundora Health Center in 2021 is still low, namely as much as 14.80% for dose 1 and 7.04% for dose 2, then in 2022 the vaccination coverage will increase quite high, namely 75.16% for dose 1 and 53.23% for dose 2. The purpose of this study was to find out the public's interest in taking the COVID-19 vaccination in the working area of the Ndetundora Health Center, Ende Regency in 2022.

Subjects and Method: A cross-sectional study was conducted at the Ndetundora Health Center, Ende, East Nusa Tenggara, from September to October 2022. A total of 243 people were selected for this study. The dependent variable was the public's interest in taking the COVID-19 vaccination. The independent variables are age, gender, education, occupation, knowledge, attitude, community motivation and public communication. Data were collected using a questionnaire and analyzed using Chi-square.

Results: The results showed that someone with higher education increased their interest in taking the COVID-19 vaccination by 0.38 times compared to people with low education, and the results were statistically significant (OR= 0.38; 95% CI= 0.21 to 0.69; p= 0.001). Someone with motivation High motivation increase interest in taking the COVID-19 vaccination by 49.5 times compared to those with low motivation (OR = 49.5; 9% CI = 21.49 to 114.16; p < 0.001), good public communication will increase public interest in taking the COVID-19 vaccination 2.74 times compared to poor public communication (OR= 2.74; 95% CI= 1.20 to 6.25; p= 0.014).

Conclusion: Education, knowledge, attitudes, community motivation, and public communication have a significant effect on participation in the COVID-19 vaccination.

Keywords: public interest, vaccination, COVID-19.

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Cite this as:

Sani HL, Muntasir, Regaletha TAL (2023). Determinant Factors of COVID-19 Vaccination Participation at Ndetundora Health Center, Ende, East Nusa Tenggara. *J Health Promot Behav.* 08(03): 206-215. <https://doi.org/10.26911/thejhp.2023.08.03.05>.



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BACKGROUND

The COVID-19 pandemic is one of the main public health problems at the moment, almost all countries are experiencing this pandemic, both in developed and developing countries (Zaky et al., 2021). As of November 5, 2022, there were 6,517,630 confirmed cases of COVID-19 in Indonesia and recorded a total of 6,322,920 recovered cases and 158,807 deaths (Ministry of Health Republic of Indonesia Director General of P2P, 2020). The government has made various policies to protect the public from the transmission and impact of COVID-19 starting from large-scale social restrictions including restrictions on the schools, workplaces, places of worship, public places and transportation, providing social assistance, providing incentives for health workers, mask policies for all. and the policy of implementing health protocols in various places which continues to be echoed while waiting for the COVID-19 vaccine (Rusydi et al., 2021).

The government has made various intervention efforts to tackle the COVID-19 Pandemic (Covid-19 Handling Task Force, 2021). Intervention efforts are carried out not only through implementing health protocols but also other interventions, namely vaccination (Agustiniingsih et al., 2022). The COVID-19 vaccine is expected to reduce or break the chain of transmission, reduce morbidity and mortality and can achieve herd immunity in groups of people (Indah et al., 2022). Herd immunity occurs when the vaccination coverage is evenly distributed throughout the region, around 70% - 80% to reduce the spread of the disease (Arina et al., 2021).

Vaccines are the final solution for infectious diseases. The main obstacle to using the COVID-19 vaccine is public doubts about vaccines (Natsir et al., 2021). Implementation of vaccination in Indone-

sia, there are pros and cons at the community level (Ananda et al., 2022). Most stated that the possible side effects of this vaccine were a major worrying factor, as well as the lack of confidence in the government regarding its safety and efficacy (Monayo, 2022). Based on the official website of the Indonesian Ministry of Health, the target number of national vaccination targets is 234,666,020 while the number of vaccines that have been distributed throughout Indonesia as of 5 November 2022 is 205,184,682 in the first dose of vaccination, 171,979,021 in the second dose of vaccination and 65,344,938 in the second dose of vaccination. dose 3 and 608,210 in dose 4 vaccination (Ministry of Health, 2021).

The COVID-19 vaccine has been distributed evenly to every district/city in East Nusa Tenggara, one of which is in Ende district. The coverage of COVID-19 vaccination in Ende Regency was 95.80% for the first dose and 71.13% for the second dose. The COVID-19 vaccine has also been distributed evenly to each Puskesmas so that the community can reach or get the vaccine available at each community health center in Ende Regency. The health center that has experienced a significant increase in vaccination coverage from 2021 to 2022 is the Ndetundora Health Center. In 2021 the coverage of the first dose of vaccination is 14.80 and the second dose is 7.04% (Ende District Health Office, 2021). However, in 2022 the vaccination coverage at the Ndetundora Health Center has increased, namely the first dose of COVID-19 vaccination by 75.16% and the second dose by 53.23% (Ende District Health Office, 2022).

SUBJECTS AND METHOD

1. Study Design

A cross-sectional study was conducted in the working area of the Ndetundora Public

Health Center, Ende, East Nusa Tenggara from September to October 2022.

2. Population and Sample

The population in this study were all people in the working area of the Ndetundora Health Center, totaling 5,664 people. The sample in this study were 243 people. Determination of the sample is done by purposive sampling technique.

3. Study Variables

The dependent variable is the public's interest in taking the COVID-19 vaccination. The independent variables are age, gender, education, occupation, knowledge, attitude, community motivation and public communication.

4. Operational Definition of Variables

Public interest in the COVID-19 vaccination is the public's interest or tendency to participate in the COVID-19 vaccination, the instrument used is a questionnaire with a categorical measurement scale.

Age is the number of years counted from birth to the last birthday of the respondent, the instrument used is a questionnaire with a categorical measurement scale.

Gender is a biological difference between men and women, the instrument used is a questionnaire.

Education is a type of formal education that was last completed by respondents, the instrument used was a questionnaire with a categorical measurement scale.

Occupation is something that is done to earn a living or the livelihood of people who are busy with activities or daily work, the instrument used is a questionnaire with a categorical measurement scale.

Knowledge is something that the respondent knows or has regarding matters related to COVID-19 vaccination, the instrument used is a questionnaire with a categorical measurement scale.

Attitude is the reaction or response of the respondent to a question about the COVID-

19 vaccination. The instrument used is a questionnaire with a categorical measurement scale.

Community motivation is the encouragement or enthusiasm of respondents to vaccinate against COVID-19, the instrument used is a questionnaire with a categorical measurement scale.

Public communication is all information and knowledge about a pandemic, its causes, how to prevent it and how attitudes and responses are conveyed by the government to the community, the instrument used is in the form of a questionnaire with a categorical measurement scale.

5. Study Instruments

Data collection in this study consisted of primary data and secondary data. Primary data is data obtained directly through interviews using questionnaires directly with the community while secondary data is data derived from recapitulation of target data and vaccination coverage as well as COVID-19 vaccination documents that support this research at the Ende District Health Office and Public Health Center.

6. Data Analysis

Data analysis used in this research is univariate analysis and bivariate analysis. Univariate analysis is the frequency distribution of the research based on the characteristics of the respondents and the variables studied and bivariate analysis is the analysis conducted to see a relationship between the independent variables and the dependent variable. Then the results of the analysis will be presented in the form of diagrams and tables.

RESULTS

1. Sample Characteristic

The results of this research were carried out in the working area of the Ndetundora Health Center, Ende Regency in 2022. The subjects studied were the people who were

included in the working area of the Ndetundora Health Center as many as 243 respondents. Characteristics of respondents based

on age, gender, education and occupation can be seen in the following table 1.

Table 1. Characteristics of Respondents.

Characteristics	Categories	Frequency (n)	Percentage (%)
Age	Teenager	43	17.7
	Mature	130	53.5
	Elderly	70	28.8
Gender	Man	97	39.9
	Woman	146	60.1
Education	Low	136	56.0
	Tall	107	44.0
Occupation	Doesn't work	68	28.0
	Work	175	72.0
Community Interests	Not interested	71	29,2
	Interested	172	70,8
Knowledge	Not enough	37	15,2
	Enough	102	42,0
	Good	104	42,8
Society Motivation	Low	83	34,2
	Tall	160	65,8
Public Communication	Not enough	26	10,7
	Good	217	89,3

2. Bivariate Analysis

Table 2. Distribucy Frequency of children under five in Naibonat Village

Variables	Category	COVID-19 vaccine				OR	95% CI		p
		Uninterest		Interested			Lower Limit	Upper Limit	
		n	%	n	%				
Age	Teenager	7	2.9	36	14.8	-	-	0.061	
	Mature	38	15.6	92	37.9	-	-		
	Elderly	26	10.7	44	18.1	-	-		
Gender	Man	24	9.90	73	30.0	1.44	0.81	0.211	
	Woman	47	19.3	99	40.0	-	2.57		
Education	Low	51	21.0	85	35.0	0.38	0.21	0.001	
	High	20	8.2	87	35.8	-	0.69		
Occupation	Doesn't work	22	9.1	46	18.9	0.81	1.49	0.503	
	Work	49	20.2	126	51.9	-	0.44		
Knowledge	Low	19	7.8	18	7.4	-	-	0.001	
	Intermediate	32	13.2	70	28.8	-	-		
	Good	20	8.2	84	34.6	-	-		
Attitude	Not enough	2	0.8	6	2.50	-	-	<0.001	
	Enough	17	7.0	9	3.70	-	-		
	Good	52	21.4	157	64.6	-	-		
Motivation	Weak	62	25.5	21	8.6	49.5	21.49	<0.001	
	Strong	9	3.7	151	62.1	-	114.16		
Public Com-munications	Poor	13	5.3	13	5.3	2.74	6.25	0.014	
	Good	58	23.9	159	65,4	-	1.20		

Table 2 showed the results of the bivariate analysis using the chi-square test, a person with higher education increases their interest in taking the COVID-19 vaccination by 0.38 times compared to someone with low education, and the results are statistically significant (OR= 0.38; 95% CI= 0.21 to 0.69; $p = 0.001$). Someone with high motivation will increase their interest in taking the COVID-19 vaccination by 49.5 times compared to those with low motivation (OR = 49.5; 9% CI= 21.49 to 114.16; $p < 0.001$), good public communication will increase public interest in taking vaccinations COVID-19 by 2.74 times compared to poor public communication (OR= 2.74; 95% CI= 1.20 to 6.25; $p = 0.014$).

Gender (OR= 1.44; 95% CI= 0.81 to 2.57; $p = 0.211$), and occupation (OR= 0.81; 95% CI= 0.44 to 1.49; $p = 0.503$) also affect community participation in COVID-19 vaccination although statistically insignificant.

DISCUSSION

Public interest in participating in the COVID-19 vaccination is inseparable from the behavioral factors possessed by each individual. This study refers to the behavioral theory of Lawrence Green (1980) that behavior is influenced by three factors (Latifah, 2010), namely predisposing factors which can be seen from age, gender, education, occupation, knowledge, attitudes and community motivation. The second factor is the enabling factor, which includes the availability of health facilities or facilities. The third factor is the reinforcing factor, which includes the support of health workers or families and public communication.

The results showed that there was no relationship between age and people's interest in taking the COVID-19 vaccination in the working area of the Ndetundora Health Center, Ende district. This is based on chi-square analysis with a p -value of 0.061. The

results of this study are not in line with research conducted by Isnaini (2021) which states that there is a relationship between age and people's interest in taking the COVID-19 vaccination. The older a person is, the more likely they are to have a good perception of the COVID-19 vaccine (Zafirah, 2021). Factors that cause this could have been influenced by the level of education and social relations in the community that were lacking. In addition, as people get older, the fear of a disease is getting higher. So, this is what causes people not to be interested in taking the COVID-19 vaccination.

The results of the analysis found that there was no relationship between gender and people's interest in taking the COVID-19 vaccination in the Ndetundora Health Center work area, Ende Regency with a P -value of 0.211. The results of this study are in line with research conducted by Sakka & Indarjo (2022) which states that there is no relationship between gender and receiving COVID-19 vaccinations, these results are also in accordance with research by Ichsan (2021) that there is no relationship between gender and public willingness to participate in the COVID-19 vaccination. This is different from research by Yunus (2022) that there is a relationship between gender and receiving the COVID-19 vaccination. This is because respondents with male and female gender tend to behave unfavorably towards the COVID-19 vaccination. Factors that can cause this could be due to the respondent's poor knowledge, vaccination services that are not affordable for the community, especially people who are in remote villages and there are still news or hoax issues that are spreading so that people are still doubtful about the safety and effectiveness of the vaccine. Rahayu & Sensusiyati, 2021).

The results of the analysis found that there was a relationship between edu-

cation and people's perceptions of the COVID-19 vaccine in the working area of the Ndetundora Health Center, Ende Regency with a P-Value of 0.001. The results of this study are in line with research conducted by Isnaini (2021) which states that there is a relationship between education and people's interest in taking the COVID-19 vaccination with the resulting p-value of 0.003. Education that a person has certainly influences perceptions of receiving vaccines, where highly educated people tend to have positive perceptions of the COVID-19 vaccine so that they are interested in taking vaccinations (Astuti et al., 2021). However, most of the respondents had low education. This may be related to experience factors and good social community relations that are owned by the individual itself so that it influences perceptions and then affects the level of acceptance of a person in carrying out the COVID-19 vaccination.

The results of the analysis found that there was no relationship between work and people's interest in taking the COVID-19 vaccination in the working area of the Ndetundora Health Center, Ende Regency with a P-value of 0.503. The results of this study are not in line with research conducted by Ichsan (2021) which states that there is a relationship between work and people's willingness to receive COVID-19 vaccinations with the resulting p-value of 0.005. In this study the majority of respondents worked as farmers. This is because respondents who work as farmers tend to behave less well, especially due to non-compliance with vaccination procedures against COVID-19. They feel that when they work, they don't meet many people so they feel they are not easily exposed to COVID-19.

The results of the analysis showed that there was a relationship between knowledge about the COVID-19 vaccine and people's interest in taking the COVID-19

vaccination with a $p= 0.001$. The results of this study are in line with research conducted by Wulandari (2021) which states that there is a relationship between knowledge and acceptance of COVID-19 vaccinations and the results of this study are also in line with research by Yusfasari (2022) which states that there is a relationship between knowledge and willingness to vaccinate COVID-19. The higher one's level of knowledge, the better one's perception of the COVID-19 vaccine (Malik et al., 2020). This can affect a person's willingness to take the COVID-19 vaccination. In this study the level of public knowledge about the COVID-19 vaccine was mostly good. This is because there is already a lot of information that can be accessed by the local community regarding the COVID-19 vaccination so that the insight and understanding that the community has about the covid vaccine is also good and there are good social relations between the community and health workers from the Ndetundora Health Center considering that people around have a function as an effective delivery of messages or information to increase public knowledge.

The results of the bivariate analysis showed that there was a relationship between attitudes and people's interest in taking the COVID-19 vaccination in the working area of the Ndetundora Health Center, Ende Regency, with a P-Value of 0.000. The results of this study are in line with research conducted by Isnaini (2021) which states that there is a relationship between attitudes and people's interest in taking the COVID-19 vaccination and is in line with research by Yunus (2022) which states that there is a relationship between attitudes and acceptance of the COVID-19 vaccination. Based on the results of research in the field, the researchers found that the majority of respondents had a good

attitude and understanding of the importance of the COVID-19 vaccination. This is due to the high public awareness of the dangers of COVID-19 transmission supported by good public knowledge about COVID-19 so that it can influence a person's attitude in doing something.

The results of the analysis found that there was a relationship between community motivation and community interest in taking the COVID-19 vaccination, with a $p < 0.001$. The results of this study are in line with Sakka & Indarjo (2022) which states that there is a relationship between social support and community interest in taking the COVID-19 vaccination. This is due to the support or encouragement from people around and also health workers in carrying out the COVID-19 vaccination. This shows that people who receive support from health workers tend to have good behavior towards the COVID-19 vaccination. Meanwhile, people who do not get support from health workers tend to have unfavorable behavior towards the COVID-19 vaccination.

The results of this study also show that respondents who do not receive support from their families will tend to behave less well towards the COVID-19 vaccination. This is caused by several factors that affect family support including the level of knowledge, cultural background, and practices in the family so that there is a lack of encouragement from family members to be able to accept and participate in vaccinations completely. The support provided by community leaders can also shape good behavior, but on the other hand the lack of support from community leaders will shape bad behavior. Community leaders have an important influence because community leaders are people who play a major role in a community group and can influence other people

or groups according to their wishes (Sabrina & Husna, 2022). The results of research in the field also show that other motivations expressed by many people include the current need for a COVID-19 vaccine certificate.

The results of the bivariate test showed that there was a relationship between public communication and public interest in taking the COVID-19 vaccination with a $p = 0.014$. The results of this study are in line with research conducted by Sakka & Indarjo (2022) which states that there is a relationship between the availability of information and behavior towards COVID-19 vaccination.

Based on research, the majority of respondents have good public communication as much as 89.3%. This is because the information obtained by the public regarding the implementation of the COVID-19 vaccination is transparent and also easily accessible (Prajarto, 2021), for example, information obtained from television and social media. Information conveyed in detail, starting from information on vaccine procurement, halalness, benefits of vaccines, availability and safety of vaccines coupled with the many outreach or counseling conducted by puskesmas officers, announcements by local community leaders regarding the importance of carrying out the COVID-19 vaccination so that this can form community acceptance or rejection of COVID-19 vaccination and can shape public perception of COVID-19 vaccination for the better which can then influence a person's willingness to vaccinate COVID-19 (Dewi, 2021).

The results of research in the field also show that people who receive information about the COVID-19 vaccine have good behavior towards the COVID-19 vaccination. In this study, researchers assumed that the more there was or was adequate

information about the COVID-19 vaccine, the public would know more about the COVID-19 vaccine.

Based on the results of the study it can be concluded that the determinants of behavior related to people's interest in taking the COVID-19 vaccination in the work area of the Ndetundora Health Center, Ende Regency in 2022 are education ($p=0.001$), knowledge ($p=0.001$), attitude ($p=0.000$), motivation community ($p<0.001$) and public communication ($p<0.001$). Meanwhile, the unrelated variables were age ($p=0.061$), gender ($p=0.211$) and occupation ($p=0.503$).

Suggestions for the community health center to be more aggressive in disseminating information about the COVID-19 vaccination such as with routine counseling from the Puskesmas so that this information is expected to influence public knowledge.

AUTHOR CONTRIBUTION

Hafaf Luthfianti Sani as lead researcher, Muntasir, Tadeus A.L. Regaletha as supervisor in data analysis and article writing.

FUNDING AND SPONSORSHIP

This study is self-funded.

CONFLICT OF INTEREST

There is no conflict of interest in this study.

ACKNOWLEDGMENT

The author would like to thank all Ndetundora Health Center, Kupang District Health Office, Kupang, who have given time and opportunity to researchers.

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