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Analysis of Factors Affecting the Motivation of Elderly to Follow the Covid-19 Vaccine in Bedoro Sragen Village



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Abstract

The COVID-19 disease caused by the SARS-CoV 2 virus has worried the world. WHO (World Health Organization) declared Covid-19 a pandemic so that WHO implemented a world health emergency status. More than 800 thousand people in Indonesia have been infected with COVID 19 and the number who have died was over 25 thousand people. Central Java provincial government data showed that the number of positive confirmed cases of Covid-19 in Sragen Regency was 2,694. Data compiled from the Sragen District Health Office, there were 775,774 vaccination targets in the Sragen area, including 118,893 elderly people. As for the elderly target group, 49,987 people or 42.01% have been successfully vaccinated. To analyze the factors that influence the motivation of the elderly in participating in the Covid-19 vaccine in the Bedoro Subdistrict, Sambungmacan, Sragen. The method used in this research was an analytic survey with a cross sectional approach. The results showed that most of the respondents' education level was in the basic education category, namely 67 (50.4%). Most of the respondents' knowledge was in the sufficient knowledge category, namely 113 (85%). Most of the respondents' perceptions were in the category of sufficient perception, namely 114 (85.7%). Most of the family support was in the adequate family support category, namely 112 (84.2%). Most of the motivation was in the category of moderate motivation, namely 111 (83.5%). The factor that most influences the elderly to take the COVID 19 vaccination was family support ((Exp(B): 2,488). Family support was the factor that most influences the elderly to take the COVID 19 vaccination.

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INTRODUCTION

The COVID-19 disease caused by the SARS-CoV 2 virus has worried the world. WHO (World Health Organization) declared Covid-19 a pandemic so that WHO implemented a world health emergency status. Since February 2020, cases have continued to increase in Indonesia (Elgaputra et al., 2020). More than 800 thousand people in Indonesia have been infected with Covid 19 and the number who have died was over 25 thousand people (Anastasia, 2021).

Data from the Central Java provincial government showed that the number of positive confirmed cases of Covid-19 in the Sukoharjo Regency Health Office was 76, Sragen Regency Health Office was 2,694, Klaten Regency Health Office was 353, Karanganyar Regency Health Office was 2,125, Boyolali Regency Health Office was 1,801, Wonogiri Regency Health Office was 1,833. Meanwhile, the city of Solo (Surakarta) continued to increase with cumulative cases of almost touching 7,000 cases. To be precise, there were 6,955 Solo residents who have been confirmed positive for corona (Pemprof Jateng, 2021).

In order to prevent the wider spread of the virus, various efforts have been made by the Government. The Ministry of Health issued Guidelines for Prevention and Control of Coronavirus Disease (COVID-19), Circular Letter number HK.02.01/Menkes/2020 concerning self-isolation protocols in handling coronavirus disease (Covid-19), the decision of The Ministry of Health Number HK 01.07/Menkes/182/2020 concerning the Examination Network for the Testing Laboratory for Coronavirus Disease (Covid-19), as well as Decree of the Minister of Health of the Republic of Indonesia Number HK.01.07/Menkes/169/2020 concerning the establishment of referral hospitals for the management of certain emerging infectious diseases. Various protocols have also been issued, such as area and public transportation protocols, educational institution area protocols, health protocols, public communication protocols, protocols for entering Indonesian territory (airports, ports, PLBDN) (PUSLITBANG Sumber Daya & Pelayanan Kesehatan, 2021).

The struggle against the COVID-19 pandemic is not over. Until the end of April 2021, COVID-19 has infected at least 1.69 million people in Indonesia. Even so, we deserved to be optimistic considering the daily cases which were starting to show a decline entering March 2021. This very positive trend was

influenced by the government's decision to implement the community-based Micro PPKM (Implementation of Restrictions on Community Activities) policy at the smallest level. This decision turned out to have a positive impact because it directly involved the community in handling the COVID-19 pandemic. But a reduction in daily cases alone is not enough. Indonesia must be able to control the spread of COVID-19 so that the daily positivity rate drops below 5%. Currently, the daily positivity rate in Indonesia fluctuates in the range of 10-12%. With the transmission that continues to this day, public awareness in implementing health protocols and supporting vaccination programs must be maintained (Satgas penanganan covid 19, 2021).

The government has declared COVID-19 a non-natural national disaster through Presidential Decree Number 12 of 2020. The Chairperson of the PB IDI COVID-19 Vaccination Advocacy Team emphasized the importance of elderly community groups to get vaccinated immediately. The seriousness of COVID-19 was corroborated by the fact that the highest death rate, or risk of death, occurs in elderly patients. So it was very important that this group get the vaccine immediately. There shouldn't be any doubts about receiving vaccinations that are already available for the elderly, unless they were currently sick or if they have had COVID-19 before or simply cannot receive vaccines due to medical conditions (Satgas penanganan covid 19, 2021).

The COVID-19 Task Force said that 10.7 percent of positive confirmed cases of COVID-19 attacked the elderly or people aged 60 years and over. In fact, this age group recorded 48.8 percent of cases of patients who died from COVID-19. The elderly were also the age group with the largest number of deaths compared to other age groups. Of the total 37,154 COVID-19 patients who died in Indonesia as of March 2021, 18,131 were elderly. This means that the elderly need special attention in order to be protected from the various risks of COVID-19. One way was to maintain daily nutrition and administer vaccines for the elderly (Satgas Penanganan Covid 19, 2020).

The COVID-19 vaccination program for the category of elderly over 60 years old was started by the government on 8 of February, 2021, and can be carried out in health facilities, both in health centers and hospitals owned by the government and private companies. Vaccination for the elderly was a follow-up to the issuance of an Emergency Use

Authorization (EUA) from the Food and Drug Supervisory Agency (BPOM) for the vaccine (Satgas penanganan covid 19, 2021).

Currently the government was running a vaccination program for the elderly. The elderly in Indonesia currently reached 28.7 million people or 10.6 percent of the total population, but only 21.5 million people were targeted to receive vaccinations during this COVID-19 vaccination program for the elderly. Giving vaccines to the elderly must be done carefully and go through a rigorous screening process before the doctor decides to give approval for vaccination (Satgas penanganan covid 19, 2021).

The vaccination rate for the elderly in Indonesia in February 2022 was vaccine dose 1 of 74.39%, vaccine dose 2 of 51.98% and vaccine dose 3 of 5.53% (Ministry of Health RI, 2022). Vaccination coverage in Sragen Regency was in the top 10 in Central Java with a percentage of around 32%. Vaccination coverage was also one of the indicators of lowering the level of Community Activity Restrictions (PPKM). The coverage of vaccination doses for dropping from PPKM level 3 to 2 was as much as 50% of vaccination dose 1 and 40% of vaccination for the elderly (Miyos, 2022).

Based on data collected from the Sragen District Health Office, there were 775,774 vaccination targets in the Sragen area, including 118,893 elderly people. Vaccination coverage in general has reached 388,369 people, or 50.06%. As for the elderly target group, 49,987 people or 42.01% have been successfully vaccinated (Mega, 2022). However, the achievement of vaccination of the elderly has not reached the target of 100%. To be able to achieve more targets, there needs to be encouragement or motivation for the elderly and families with the elderly to take part in the Covid 19 vaccination program. Motivating the elderly to take part in vaccinations is a form of affection and protects against Covid-19

The motivation of the elderly and family will be stronger because it is influenced by needs, expectations and interests, family drives, the environment and also the media (Utami, 2015). Factors that influence the motivation of the elderly and family come from intrinsic and extrinsic factors. Intrinsic factors are factors that arise from within oneself, namely knowledge, age, perception, expectations, needs, education while extrinsic factors

consist of work, cultural status and environment (Fauzi, 2015).

A preliminary study conducted in February 2022 with Midwife at the Bedoro Village obtained the result that Midwife had taken part in data collection for the second time and only got 80 people, seeing that the potential was still over 2,000 people who had not been recorded, the Midwife said that so far there had been a lack of socialization vaccination. While interviews with the village Head of Bedoro obtained data that during data collection many were afraid of being vaccinated because there was information about post-vaccination reactions. The Village Head understands that there were still citizen who didn't want to take part in the Covid-19 vaccination because they were afraid. Based on these data, the researchers were interested in conducting research related to the factors that influence the elderly in participating in the Covid 19 vaccination in the Bedoro Village.

METHODS

The design of this research was analytic research. The method used in this study was an analytic survey with a cross sectional approach. The population that would be used in this study was all the elderly in the Bedoro Village as many as 1329 people. While the sample to be taken as research respondents was 10% of the total population, namely as many as 133 elderly (more than 60 years old). Inclusion criteria; Active elderly. And the elderly who still have families. Exclusion criteria: sick elderly and elderly who were not willing to be respondents. The measuring instrument used in this study was a questionnaire with a closed list of questions. Research instruments on respondents' identity include gender and age. Research questionnaire about education level, knowledge, perception, family support and motivation of the elderly following the Covid 19 vaccination. This research was conducted in the Bedoro Subdistrict, Sambungmacan District, Sragen. This research was conducted for 4 (four) months, from April to July 2022. Univariate analysis was carried out on each variable from the results of the study to determine the distribution, frequency and percentage of each variable studied. Bivariate analysis was carried out to determine the most influential variable, using the logistic regression analysis test, with a level of significance $\alpha = 0.05$ or a confidence level of 95%.

RESULTS

1. Gender

The frequency distribution of respondents' gender can be seen in the table below:

Table 1: Frequency Distribution of Respondents' Gender in the Bedoro Village, Sragen, June 2022

No	Level of education	F	(%)
1	Male	46	34,6
2	Female	87	65,4
Amount		133	100

Table 1 shows that most of the respondents are female, namely 87 (65.4%) and the least are male , namely 46 respondents (34.6%).

2. Age

The frequency distribution of respondents' age can be seen in the table below:

Table 2: Frequency Distribution of Respondents' Age in the Bedoro Village, Sragen, June 2022

No	Level of education	F	(%)
1	Young old (60-69 years old)	69	51.9
2	Middle age old (70-79 years old)	38	28.6
3	Old-old (80-89 years old)	19	14.3
4	Very old-old (≥ 90 years old)	7	5.3
Amount		133	100

Table 2 shows that most of the respondents are young old (60-69 years old), namely 69 (51.9%) and the least are Very old-old (≥ 90 years old) , namely 7 respondents (5.3%).

3. Education Level

The frequency distribution of respondents' educational level can be seen in the table below:

Table 3: Frequency Distribution of Respondents' Education Levels in the Bedoro Village, Sragen, June 2022

No	Level of education	F	(%)
1	Basic	67	50,4
2	Intermediate	47	35,3
3	High	19	14,3
Amount		133	100

Table 3 shows that most of the respondents have basic education, namely 67 (50.4%) and the least are in the higher education category, namely 19 respondents (14.3%).

4. Knowledge

The frequency distribution of student washing hands can be seen in the table below:

Table 4: Frequency Distribution of Respondents' Knowledge in the Bedoro village, Sragen in June 2022

No	Knowledge	F	(%)
1	Well	20	15
2	Sufficient	113	85
3	Not sufficient	0	0
Amount		133	100

Table 4 shows that most of the respondents' knowledge is in the sufficient category, namely 113 (85%).

5. Perception

The frequency distribution of students keeping their distance can be seen in the table below:

Table 5: Frequency Distribution of Respondents' Perceptions in the Bedoro Village, Sragen in June 2022

No	Perception	F	(%)
1	Well	19	14.3
2	Sufficient	114	85.7
3	Not sufficient	0	0
Amount		133	100

Table 5 shows that most of the respondents' perceptions are in the sufficient category, namely 114 (85.7%).

6. Family Support

The distribution of the frequency of students staying away from the crowd can be seen in the table below:

Table 6: Frequency Distribution of Respondents' Family Support in the Bedoro Village, Sragen in June 2022

No	Family support	F	(%)
1	Well	21	15.8
2	Sufficient	112	84.2
3	Not sufficient	0	0
Amount		133	100

Table 6 shows that some of the respondents' family support is in the sufficient category, namely 112 (84.2%).

7. Motivation

The distribution of student frequencies limiting mobilization and interaction can be seen in the table below:

Table 7: Frequency Distribution of Respondents' Motivation in the Bedoro Village, Sragen in June 2022

No	Motivation	F	(%)
1	Strong	22	16.5
2	Medium	111	83.5
3	Weak	0	0
Amount		133	100

Table 7 shows that most of the respondents' motivation is in the medium category, namely 111 (83.5%).

8. Factors Affecting Older People's Motivation in Taking the Covid-19 Vaccine

An analysis of the factors that influence the motivation of the elderly in taking the Covid-19 vaccine can be seen in the table below:

Table 8: Analysis of factors that influence the motivation of the elderly in taking the Covid-19 vaccine in the Bedoro Village, Sragen in June 2022.

No	Variable	Sig	Exp(B)
1	Level of education	.059	2.080
2	Knowledge	.888	1.094
3	Perception	.835	.864
4	Family support	.117	2.488

Table 8 shows that all variables have a significance value above 0.05. It can be said that there is no correlation between the independent variables (education, knowledge, perceptions, family support) with the motivation of the elderly to take vaccinations. The largest Odds ratio value is in the family support variable. It can be concluded that family support has 2.488 times more influence on the motivation of the elderly to take the Covid 19 vaccination.

DISCUSSION

1. Education Level

The results showed that most of the respondents' education level was in the basic category. A study shows that the education level of the elderly in Ngablak Hamlet was still relatively low, this can be influenced by economic and environmental factors where the majority of the elderly in ancient times did not prioritize education, while the education level of the elderly affects the knowledge of the elderly themselves because most of the elderly with this level of education those who are low tend to have low knowledge (Fitriani & Riniasih, 2021)

The elderly in this study had a basic level of education. However, this is not in line with the research because the elderly in this study have an intermediate level of knowledge. This can be due to family support in providing information and encouragement to the elderly so that the elderly knows more about the Covid 19 vaccine information.

2. Knowledge

The results showed that most of the respondents' knowledge was in the sufficient category. The results of research conducted by Fitriani and Riniasih (2021) show that there was no effect of health education about the Covid-19 vaccine on the motivation of the elderly. From the results of the health education that had been given there are still many respondents who did not know about the benefits, impacts and risks of not having the vaccine so that there are still respondents who were not motivated to vaccinate.

The level of knowledge of respondents about the covid 19 vaccination was still in the sufficient category even though socialization has been given. This is possible because the education of the residents is at the middle level and the atmosphere is not comfortable due to the stressor of the Covid case which allows the information received to be less than optimal.

3. Perception

The results showed that most of the respondents' perceptions were in the sufficient category. In a study, it was found that there were still quite a number of respondents who thought that the COVID 19 vaccine in circulation was unsafe, contained poison and could cause someone to become infected with the corona virus and even cause death, so the effectiveness of the vaccine was still in doubt. Based on the respondent's statement, this information can be trusted because it

was very much discussed in the community and there had been a lot of evidence spread on social media. This creates fear and lead to refusal to get vaccinated (Virgiana et al., 2021). The results of interviews with the Head of Bedoro Village obtained data that during data collection many were afraid of being vaccinated because there was information about post-vaccination reactions. In addition, there is an opinion from the community that if you are old, you should not need to be vaccinated because the elderly are already weak.

4. Family Support

The results showed that most of the respondents' family support was in the sufficient category. A study showed that most families agreed or supported, namely 70 respondents and only 54 of them took the second dose of vaccination and 16 of them did not take the second dose of vaccination. In this study, it was stated that there were several factors that influenced family support including the level of knowledge, cultural background, and practices in the family so that there was a lack of encouragement from family members to be able to accept and participate in vaccinations to completion (Hutomo et al., 2021).

This is in accordance with this research that the family does not fully support the elderly following the covid 19 vaccination, namely only in the middle category. Many factors cause families to not support the elderly in taking vaccinations, such as the busyness of family members and family members who sometimes go far away to migrate.

5. Motivation

The results showed that most of the respondents' motivation was in the medium category. Things that need to be studied in a person's motivation include encouragement from within oneself (intrinsic factors) and the environment (extrinsic factors) which greatly influence motivation. Intrinsic factors of motivation need to be supported by extrinsic factors (Fauzi, 2015). Encouragement from family members, environment and health workers can increase the motivation of the elderly to be able to take part in the co-19 vaccination program.

Factors that affect motivation are needs, encouragement and expectations. The results of research conducted by Dewi and Salim (2017) show that the percentage of most respondents agrees with 4 statements included in the need factor, namely mothers bringing babies to bring babies to get vaccines because they are needed by babies, mothers

need immunizations that are able to fight diseases in babies, to get vaccines because babies need health protection and giving vaccines is one of the basic needs (Dewi & Salim, 2017). Elderly people come to health services because they have a need and want to get the Covid 19 vaccine so they have immunity to fight the Covid 19 disease. Even though not yet 100% of the elderly follow the Covid 19 vaccination.

6. Analysis of factors that influence the motivation of the elderly in taking the Covid-19 vaccine

The factor that most influences the elderly to participate in the Covid 19 vaccination was family support. Research conducted by Utami (2014) showed that family support and mother's motivation in getting complete basic immunization for infants aged 0-12 months in West Nyabakan village in 2015, the mother group had a very close relationship. This is consistent with the results of this study that the variable that influences motivation, namely family support, has the closest relationship (Utami, 2015). Family support can come from various components such as instrumental support such as escorting the elderly to take the Covid-19 vaccination so that the elderly are more enthusiastic and motivated to take the vaccination.

CONCLUSION

1. Most of the respondents' educational level has been in the Basic education category.
2. Most of the respondents' knowledge has been in the category of sufficient knowledge.
3. Most of the respondents' perceptions has been in the category of sufficient perceptions.
4. Most of the family support in the family support category has been sufficient.
5. Most of the motivation in the category has been medium motivation.
6. The factor that most influenced the elderly to take the Covid 19 vaccination has been family support.

SUGGESTION

1. It is better if the Puskesmas or Kelurahan can provide facilities for the elderly who want to take part in the Covid 19 vaccination.
2. Health workers should be able to provide counseling about Covid-19 vaccination so that the elderly understands more about Covid-19 vaccination.
3. The family should always provide support to the elderly to take part in the Covid 19 vaccination.

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CONFLICTS OF INTEREST

The financial source for this research is from internal university grants. If there is a shortage of funds during the implementation of the research it is the independent responsibility of the researcher. During the research process starting from permits, preliminary studies, research data collection, everything went smoothly without any problems. This research activity was supported by the village administration and the community.

AUTHOR CONTRIBUTIONS

Tri Susilowati is as chief researcher and chief author of articles. In charge of coordinating the course of research and journal publishing. Erika Dewi Noorratri is as a member of the researcher and member of the article compiler. tasked with assisting the course of research and journal publishing.

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