ORIGINAL ARTICLE

Health Behavior of Non-Medical Student During the COVID-19 Pandemic

Henny Yulianita, Firdha Rizkiani, Dyah Setyorini, Irman Somantri, Ryan Hara Permana, Maria Komariah

Department of Fundamental Nursing, Faculty of Nursing, Universitas Padjadjaran, Bandung 45363, Indonesia

ABSTRACT

Introduction: The current Covid-19 pandemic has forced many people to take care of their health, including students. Students are a group of people who have an unhealthy lifestyle which can indirectly be at high risk of various health problems. This can be prevented by adopting healthy behavior. This study aims to obtain an overview of health behavior (knowledge, attitudes, and practices) in non-medical student during the Covid 19 pandemic. **Methods:** This study conducted a quantitative descriptive study with a population of non-medical student from 11 faculties at Universitas Padjadjaran. The sampling technique used by the researcher was quota sampling with a sample of 393 respondents. Data was collected using an online questionnaire. The research questionnaire was built based on indicators of health behavior made by the Indonesian Ministry of Health in 2011. The questionnaire has been tested and is valid with an Alpha coefficient reliability value of 0.814. **Results:** The results showed that 65.9% of respondents had good health behavior knowledge, 53.9% of respondents had positive health behavior attitudes, 58.3% of respondents had good health behavior practices. **Conclusion:** So it can be concluded that the health behavior for students needs to be maintained and the campus improves facilities that support health behavior.

Keywords: Health behavior, Students, Covid 19

Corresponding Author:

Henny Yulianita, M.Kep Email: h.yulianita@unpad.ac.id Tel: +62 8129724917

INTRODUCTION

Health behavior is one of the health promotion activities that applies the long-term vision of Healthy Indonesia 2025 with the aim of encouraging community independence to live healthy with the hope of creating proactive community behavior in maintaining and improving health (1). Health behavior contains procedures for behaving that can be done by a person or community to improve their health status (2). The implementation of health behavior is considered to be able to minimize the transmission of the Covid-19 disease (3). Health behavior that is formed from three domains, namely knowledge, attitude and practice. Based on the data obtained, the Covid 19 disease has caused 6.242.974 cases in the world with a mortality rate of 6.1% or as many as 378.485 people (4). Covid-19 infections in Indonesia reached 27.549 confirmed cases with 1.663 deaths as of 3 June 2020 (5).

Students are a group of people who have unhealthy

lifestyles, especially non-health students because they are considered less exposed to health information (6). This is related to increased activity during lectures such as crowded lectures, irregular eating patterns, lack of sleep, smoking behavior and rarely exercising (7, 17). Students are also identical with places to live far from their parents, such as in boarding houses or dormitories, so there is less supervision from parents regarding healthy lifestyles (8). This can increase the risk of contracting infectious diseases such as diarrhea, increase the risk of visiting health facilities, and not attending lectures because of illness (9,10).

Research conducted by Ariani (2018) on students living in boarding houses in the Padukuhan Karangmalang area of Yogyakarta showed that 53.1% of students living in boarding houses were in the category of poor health behavior (8). Based on data from the Pratama Clinic, the academic community of Universitas Padjadjaran obtained the results of student visits in 2020 in January as many as 58 students and in February the visits increased to 153 students. Diseases that many students suffer from are colds, dyspepsia, diarrhea, and diseases due to poor personal hygiene such as dermatitis. This study aims to obtain an overview of health behavior (knowledge, attitudes, and practices) in non-medical student during

the Covid 19 pandemic.

MATERIALS AND METHODS

This study used a quantitative descriptive method with non-medical student health behavior variables. The population of this study was 20.053 non-medical undergraduate students from 11 faculties at Universitas Padjadjaran University. The sampling technique used by the researcher was quota sampling with a sample of 393 respondents.

Instruments

The research questionnaire was built based on health behavior indicators made by the Ministry of Health of the Republic of Indonesia in 2011 (2). The instrument used was a modification of six indicators of health behavior in the household environment, namely washing hands with soap, consuming healthy food and drinks, using healthy latrines, throwing garbage in the trash, not smoking in the house, and eradicating mosquito larvae and two indicators health behavior in environmental education, namely not consuming drugs and not spitting everywhere. Before being distributed, the instrument was valid with an alpha coefficient of 0.814. Data collection was done online through Google Forms to minimize the risk of the spread of Covid-19.

Ethical considerations

This research has been approved by the Ethics Committee of Universitas Padjadjaran with registration number No. 393/UN6.KEP/EC/2020. Informed consent was carried out together with the research explanation on the first page before the respondent filled out the questionnaire. If the respondent did not agree to be involved in the study, then the respondent is welcome to click not willing. Respondents who were not willing were not sampled in the study.

Data analysis

Data analysis presented in the form of frequency distribution tables and percentages. The data that has been obtained in this study were analyzed using the median value obtained from the total score for each sub variable that has been filled in by all respondents to obtain a picture of healthy behavior in non-health students at Universitas Padjadjaran. The results of these calculations are interpreted as research results by including them into the categories of good knowledge and bad knowledge, positive and negative attitudes, good and bad practices.

RESULTS

A total of the 393 respondents participated in this study. Out of this, 261 respondents (66.4%) were female students, while male respondents are 132 people (33.6%). Most of the respondents (90.6%) accessed the research questionnaire while at home, and some

(9.4%) accessed the research questionnaire while in the boarding house or dormitory.

The finding of this study showed that among the 393 respondents, most respondents (65.9%) have knowledge of good health behavior and the remaining have less knowledge of health behavior (34.1%) (Table I).

212 respondents (53.9%) had a positive health behavior attitude and 181 respondents (46.1%) had a negative health behavior attitude. As for the practice of health behavior, most of the respondents (58.3%) had good practice of health behavior, and 164 respondents (41.7%) had bad practice of health behavior (Table I).

Table I: Knowledge, Attitude and Practice of Non-Medical Student of Universitas Padjadjaran on Health Behavior (N=393)

Variables	Frequency (f)	Percentage (%)
Knowledge		
Good Bad	259 134	65.9 34.1
Attitude		
Positive Negative	212 181	53.9 46.1
Practices		
Good Bad	229 164	58.3 41.7

DISCUSSION

Someone with good knowledge will produce better behavior because the knowledge he has can be used as the basis or reason for a behavior (11). Prihanti G, et al (2018) states that a person with sufficient knowledge of health behavior has a 50% chance to perform health behavior (12). The higher a person's knowledge about health behavior, the higher the possibility to perform health behavior (8). The Covid-19 pandemic has indirectly made the Indonesian people more concerned about their health so that it has an impact on efforts to maintain personal health by carrying out various prevention efforts such as washing hands with soap, consuming healthy food and drinks, and so on. This refers to the procedures for behaving in health behavior (3). The ease of accessing information about health behavior from various information media such as the internet can affect a person's knowledge about health behavior (13).

Attitude is a form of closed behavior that a person has due to stimulation of an object that is difficult to observe directly (11). Existing stimuli can shape a person's attitude through the involvement of feelings, emotions, beliefs and perceptions of the emerging stimulus (14). The ongoing Covid-19 pandemic has made everyone, including students, get a strong stimulus in forming positive attitudes towards health behavior due to the emergence of feelings of fear and the perception of the

importance of prevention efforts to protect themselves from the disease. The application of healthy living behavior in everyday life can form a habit because it is done repeatedly for a long time. As a result, a person will have experience in implementing good health behaviors so that these experiences can become new habits and help form positive health behavior attitudes (15).

Bloom states that practice is included in one of the domains of health behavior in addition to knowledge and attitudes (11). Knowledge of good health behavior will then help in forming a person's positive attitude towards health behavior in a person so that it can be realized in the practice of good health behavior (8).

The existence of health facilities can indirectly motivate a person to perform health behaviors. Ariani (2018) states that there is a relationship between health behavior and the availability of health facilities in student dormitories (8). In addition to health facilities, parental support is also one of the factors that play a role in the practice of health behavior in a person (16). Parents can act as role models and good supervisors for their children in implementing health behaviors. Students are a group of people who are in transition to adulthood so they need guidance and support from their parents so that their health behavior practices can develop into new good habits in the future (15).

CONCLUSION

This study was conducted to determine the description of health behavior in non-medical students at Universitas Padjadjaran which was based on the behavioral domain consisting of knowledge, attitudes, and practice. From the results of the study, it can be concluded that non-health students at Universitas Padjadjaran have good knowledge, attitudes and practices of health behavior. The results of this study break the assumption that non-medical students are less exposed to information about health so that it affects their attitudes and practices in implementing health behaviors.

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