



The Relationship of Knowledge About Covid-19 with the Behavior of Preventing the Danger of Covid-19 on Traders at The Oesapa Market, Kupang City

Emanuel F.S Adii¹, Sidarta Sagita², Dyah Gita Rambu Kareri³, Conrad Liab, Hendricson Folamauk⁴

¹ Faculty of Medicine and Veterinary Medicine, University of Nusa Cendana

² Department of Public Health and Community Medicine, Faculty of Medicine and Veterinary Medicine, University of Nusa Cendana

³ Department of Medical Rehabilitation, Faculty of Medicine and Veterinary Medicine, University of Nusa Cendana

⁴ Department of Tropical Medicine, Faculty of Medicine and Veterinary Medicine, Nusa Cendana University

ABSTRACT

Background: The World Health Organization or WHO announced that, on December 31, 2019 there was a cluster case of pneumonia with an unknown etiology or cause in Wuhan City, Hubei Province, China. Until February 11, 2020, WHO officially announced the name of this new virus, namely Covid-19 or coronavirus disease 2019. To reduce the spread of Covid-19, it is very necessary to have good knowledge about Covid-19. Knowledge about Covid-19 is very important during a pandemic like this, so when our knowledge is good, preventive behavior against the dangers of Covid-19 is also good and thus will reduce the number of additional Covid-19 patients. Good Covid-19 prevention behavior is an action that a person takes to prevent the danger of contracting Covid-19 such as wearing a mask, washing hands, keeping a distance, staying away from crowds, and reducing mobility.

Research Objectives: Analyzing the relationship between knowledge about Covid-19 and the behavior of preventing the danger of Covid-19 on traders at the Oesapa Market, Kupang City..

Research Method: This research used descriptive analytic research with cross sectional. Sampling using the technique of accidental sample and obtained 40 research subjects.

Results: From the test results using the Contingency C test, there is no relationship between knowledge about Covid-19 and the behavior of preventing the danger of Covid-19, namely with a p value =0.291.

Conclusion: There is no significant relationship between knowledge about Covid-19 and the behavior of preventing the danger of Covid-19 on traders at the Oesapa Market, Kupang City.

KEYWORDS: Behavior, Covid-19, Knowledge, Prevention.

INTRODUCTION

The World Health Organization (WHO) announced that, on December 31, 2019, there was a cluster of pneumonia cases with an etiology or cause that was not yet known in Wuhan City, Hubei Province, China.¹ Over time, on January 7, 2020, it was finally discovered that the virus causing this disease was a coronavirus, referred to as novel corona, which was a new virus that had never been identified before.¹ Coronaviruses are a family of viruses transmitted from animals to humans (zoonosis), and previously there were at least two types of coronaviruses known to cause disease in humans: Middle East Respiratory Syndrome (MERS-CoV) and Severe Acute Respiratory Syndrome (SARS-CoV). However, on February 11, 2020, WHO officially announced the name of this new virus as Covid19 or coronavirus disease 2019.¹ Covid-19 spreads from human to human through droplets (from sneezing, talking) and contact with objects or people who have been infected or contaminated with Covid-19.² The main clinical symptoms that appear when exposed to Covid-19 are fever, cough, and difficulty breathing, along with other symptoms such as worsening shortness of breath, fatigue, myalgia, gastrointestinal symptoms such as diarrhea, and other respiratory tract symptoms.³ The average incubation period of Covid-19 is 5–6 days, with the longest incubation period being 14 days. In severe cases, it can cause pneumonia, acute respiratory syndrome, kidney failure, and even death.³

The official World Health Organization website on May 18, 2021, reported that the number of positive Covid-19 cases worldwide had reached 163,321,489 people, with the number of deaths reaching 3,386,825 people.⁴ The official Covid-19 Task

Force website on May 18, 2021, also showed that Indonesia had 1,753,101 confirmed cases, with 87,829 active cases, 1,616,603 recoveries from confirmed cases, and 48,669 deaths from confirmed cases. Currently, DKI Jakarta has the highest number of confirmed cases, with a total of 419,848, while the province with the lowest number of cases is North Maluku, with 4,444 confirmed cases. Meanwhile, the province of East Nusa Tenggara (NTT) has reached 15,685 Covid-19 cases.⁵

Knowledge is the result of human perception or a person's awareness of a certain object, which is produced by the human senses, including sight, smell, taste, hearing, and touch.² Knowledge of Covid-19 patients can be defined as the awareness or understanding patients have about their illness, including knowledge of the disease itself, its prevention, treatment, and complications.⁶ Knowledge about Covid-19 is very important during a pandemic such as this, because when our knowledge is good, then preventive behavior against the dangers of Covid-19 will also be good, thereby reducing the increase in the number of Covid-19 patients.⁶ Knowledge plays a very important role in shaping comprehensive behavior, as it forms a person's beliefs, which in turn shape how they perceive reality, provide a basis for decision-making, and determine their behavior toward a certain object, thereby influencing how they act.⁷

Behavior is an action or activity of humans that will affect human health, the environment, health services, and even future generations.⁸ Preventive behavior against Covid-19 refers to activities or actions carried out by individuals to avoid the risk of contracting Covid-19, such as wearing masks, washing hands, maintaining physical distance, avoiding crowds, and reducing mobility.⁸ Factors that may influence a person's preventive behavior against Covid-19 include knowledge, attitude, level of education, and socioeconomic status, and are also affected by the availability of health services, hospitals, pharmacies, as well as government policies and regulations established to prevent Covid-19.⁸

A study conducted by Emy et al. (2020) on 150 residents in Sumerta Kelod Village, Denpasar, Bali, showed that the community in Kelod Village had good knowledge about Covid-19, with 70% falling into the good category. Furthermore, the distribution of community behavior also indicated that residents had complied with health protocols during the Covid-19 pandemic, resulting in the community being categorized as having a low risk of cases, at 85.33%.⁹

A study conducted by Putri et al. (2020) on 83 traders at Petisah Market, Medan City, found a significant relationship between knowledge and preventive behavior against Covid-19, with a correlation value of 0.004.¹⁰ Meanwhile, a study conducted by Imanuel et al. (2020) in Batu Gantung Subdistrict, Ambon City, on 50 respondents also showed a significant relationship between knowledge and community behavior regarding Covid-19, with a correlation value of 0.065.¹¹ In contrast, a study conducted by Patimah et al. (2020) on the community in Garut Regency, with a correlation value of 0.06 (>0.05), indicated that there was no significant relationship between Covid-19 knowledge and preventive behavior against the spread of Covid-19, as 76 respondents (52%) were found to have good knowledge, but most of them (61%) still had poor behavior.¹² Based on the above description, the researchers are interested in examining the relationship between knowledge of Covid-19 and preventive behavior against the dangers of Covid-19 among traders at Oesapa Market, Kupang City.

METHOD

The type of research used in this study is descriptive-analytic research with a cross-sectional design to determine the relationship between knowledge about Covid-19 and preventive behavior against the dangers of Covid-19 among traders at Oesapa Market, Kupang City. The research location was Oesapa Market, Kupang City, with the research subjects being traders. Sampling in this study was carried out using the accidental sampling technique, by selecting research subjects who were willing to participate as samples randomly and who met the inclusion criteria. The sample size was determined using Lemeshow's formula, and the required number of research subjects was 40 people.

The research procedure was carried out by first providing informed consent to all traders who met the inclusion criteria and explaining the purpose, objectives, and mechanisms of this study. After agreeing to become respondents, the researcher distributed the questionnaires and, if needed, read the questionnaires aloud, then explained how to fill them out and allowed respondents to ask questions if there was anything they did not understand. Respondents were given time to complete the questionnaire, which was then collected for the researcher to assess the relationship between knowledge about Covid-19 and preventive behavior against its dangers. This study was conducted face-to-face using a questionnaire that had been tested for validity

and reliability, and it took place from November to December 2021. The knowledge questionnaire consisted of 10 questions with a nominal scale, while the behavior questionnaire also consisted of 10 questions with a nominal scale. The analysis used in this study included univariate and bivariate analyses. Univariate analysis was used to determine the distribution of each variable, namely the level of knowledge and preventive behavior against Covid-19, while bivariate analysis was used to determine the relationship between the two variables—knowledge about Covid-19 and preventive behavior against its dangers—by using the Contingency Coefficient Correlation test (C) with a significance level of $p = 0.05$.

RESULT

This study was conducted from November to December 2021 at Oesapa Market, Kupang City, with a total of 40 respondents. Data collection was carried out face-to-face by distributing questionnaires. In addition to distributing them, the researcher also conducted the study by reading aloud the questions contained in the questionnaire. The characteristics of the respondents in this study included gender, age, and education.

Respondent’s characteristics :

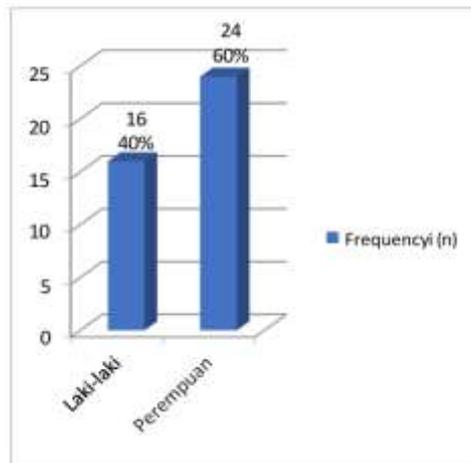


Image 4.1 Respondent’s Gender Characteristics

Based on gender data, it was shown that there were 16 male respondents (40.0%). Meanwhile, the majority were female respondents, totaling 24 people (60.0%).

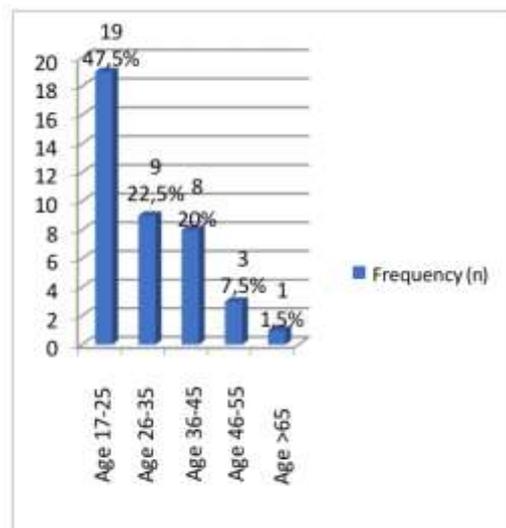


Image 4.2 Respondent’s Age Characteristics

Based on age data, the largest number of respondents were aged 17–25 years, totaling 19 people (47.5%). Respondents aged 26–35 years numbered 9 people (22.5%), those aged 36–45 years numbered 8 people (20.0%), and those aged 46–55 years numbered 3 people (7.5%). Meanwhile, the smallest group was respondents aged >65 years, with only 1 person (3.5%).

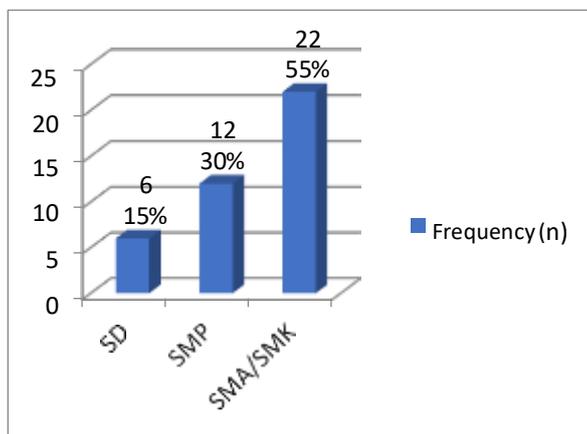


Image 4.3 Respondent's Education Characteristics

Based on education data, all respondents had attended formal schooling. The largest proportion of respondents had completed their education at the senior high school/vocational high school (SMA/SMK) level, totaling 22 people (55.0%). This was followed by respondents whose last education was at the junior high school (SMP) level, totaling 12 people (30.0%). Meanwhile, the number of respondents whose last education was at the elementary school (SD) level was 6 people (15.0%).

Univariate Analysis

The results of the univariate analysis below aim to determine the distribution of knowledge and preventive behavior against Covid-19 among traders at Oesapa Market, Kupang City.

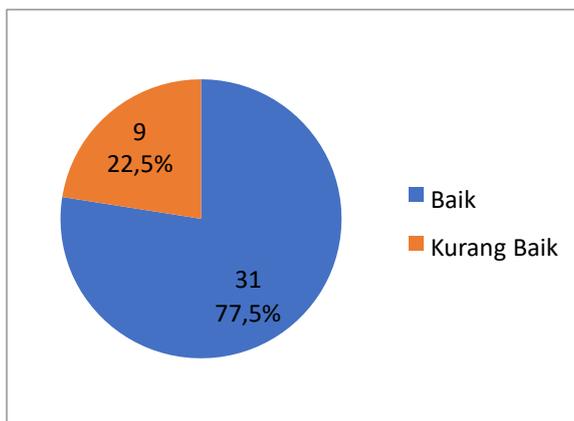


Image 4.4 Knowledge of Covid-19

Based on the distribution level of knowledge about Covid-19 among traders at Oesapa Market, Kupang City, it was shown that 31 respondents (77.5%) had good knowledge, while 9 respondents (22.5%) had poor knowledge.

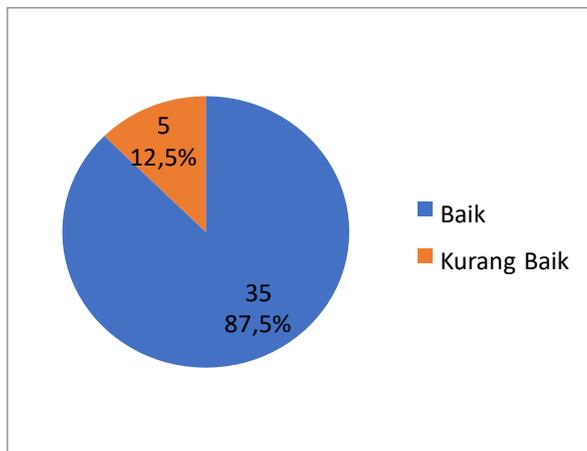


Image 4.5 Behavior of Covid-19 Prevention

Based on the distribution level of preventive behavior against the dangers of Covid-19 among traders at Oesapa Market, Kupang City, it was shown that 35 respondents (87.5%) demonstrated good behavior, while 5 respondents (12.5%) demonstrated poor behavior.

Bivariate Analysis

Table 4.6 shows that out of 40 respondents studied, 26 respondents had good knowledge with good behavior, 5 respondents (12.5%) had good knowledge with poor behavior, 9 respondents (22.5%) had poor knowledge with good behavior, and no respondents had poor knowledge with poor behavior.

The statistical test results obtained a pvalue of 0.291 (>0.05), which means that the null hypothesis is accepted. In other words, there is no significant relationship between knowledge about Covid-19 and preventive behavior against its dangers.

DISCUSSION

In Table 4.1, it can be seen that there were 16 male respondents (40.0%), while female respondents numbered 24 (60.0%). Having good knowledge is expected to shape good behavior as well. According to data from the Central Statistics Agency (Badan Pusat Statistik, 2020), women tend to be better at implementing Covid-19 prevention protocols.²⁵ This is based on the different characteristics possessed by each gender, where women are generally more nurturing, gentle, and feel a greater sense of responsibility for the wellbeing of those around them. Meanwhile, men tend to have characteristics such as being aggressive, adventurous, and even risk-taking. As a result of these differences in traits, women are generally more cautious, more inclined to practice healthy living behaviors, and more likely to avoid violating established regulations.²⁷

In Table 4.2, it can be seen that the largest number of respondents were aged 17– 25 years, totaling 19 people (47.5%), followed by those aged 26–35 years with 9 people (22.5%), those aged 36–45 years with 8 people (20.0%), and those aged 46–55 years with 3 people (7.5%). Meanwhile, the smallest group was respondents aged >65 years, with only 1 person (3.5%).

Table 4.6 Bivariate Analysis

	Behaviour				Total		p	X ² Contingency Coefficient
	Proper		Improper		n	%		
Knowledge	n	%	n	%	n	%		
Proper	26	65,0	5	12,5	31	77,5	0,291	0,198
Imprope	9	22,5	0	0	9	22,5		
Total	35	87,5	5	12,5	40	100		

Knowledge tends to improve as a person's perception and thinking patterns develop with age. However, as age increases—particularly beyond 65 years—the ability to receive information and memory capacity begin to decline.²³ In this study, not all adults possessed high levels of knowledge, and conversely, younger individuals did not always have lower levels of knowledge. This may be because, aside from age, knowledge is also influenced by other factors such as access to information and personal interest.

The advancement of technology has also had a positive impact on the dissemination of information, which can now be accessed through social media, electronic and print media, or through counseling and seminars conducted by health workers.³⁰ This is in line with a study conducted by Wiwin (2021), which showed that the entire community in Kupang City had already been exposed to information regarding Covid-19. In the present study as well, it was found that the majority of traders demonstrated good knowledge.

Interest also plays a significant role in shaping a person's knowledge. Regardless of whether an individual is an adult or still young, if they lack the interest to broaden their insights, their knowledge will not improve. Interest is most unstable during early adolescence (12–18 years), then increases in late adolescence (18–22 years), continuing to rise in young adulthood, with its peak between the ages of 15–30 years.²⁹ In addition to information and interest, knowledge may also be influenced by physical, psychological, and environmental factors.²⁹

In Table 4.3, it can be seen that 22 respondents (55.5%) had completed senior high school/vocational school (SMA/SMK), followed by 12 respondents (30.0%) with junior high school (SMP) education, while only 6 respondents (15.0%) had completed elementary school (SD). Knowledge about Covid-19 is essential during the pandemic. Good community knowledge will influence a person's behavior, particularly in terms of Covid-19 prevention. In the results of this study, although some respondents' last education was only at the elementary level, most still had good knowledge about Covid-19. This is because knowledge is not only influenced by education level but also by experience and social environment.¹¹ Likewise, having a higher level of education does not always guarantee good knowledge.

Generally, higher education levels are supported by a higher level of knowledge, and it is expected that the higher a person's education, the easier it is for them to access information about issues, including health issues related to Covid-19.⁷ Based on this study, knowledge about Covid-19 among traders at Oesapa Market, Kupang City, showed that 31 respondents (77.5%) had good knowledge, while 9 respondents (22.5%) had poor knowledge. Knowledge is the result of information perceived through the senses about a particular object; when someone receives information, it is then analyzed, processed, and stored, resulting in what is called knowledge.¹²

Good knowledge about Covid-19 is highly necessary to reduce the spread of the virus during the pandemic. Good knowledge means understanding the causes and characteristics of Covid-19, its signs and symptoms, necessary examinations, transmission processes, and prevention efforts.¹⁴ The better one's knowledge about Covid-19, the better their preventive behavior should be. However, a person with good knowledge does not always demonstrate good behavior.²³ This was also proven in this study, where some respondents had good knowledge but still demonstrated poor behavior, while others with poor knowledge nevertheless showed good behavior. This can be influenced by several factors such as education level, age, mass media, environment, and economy.⁸ Based on the distribution of Covid-19 preventive behavior among traders, it was found that 35 respondents (87.5%) demonstrated favorable behavior, while 5 respondents (12.5%) demonstrated unfavorable behavior. The results of this study indicate that although most respondents had favorable behavior, such behavior may shift to unfavorable behavior depending on the responses triggered by stimuli, whether from within or outside the individual (Wawan & Dewi, 2010).²³

This study also showed that some respondents with good knowledge still demonstrated unfavorable behavior, while some with poor knowledge nevertheless showed favorable behavior. This is influenced by both internal and external factors, where internal factors include race, gender, physical condition, and personality, while external factors include environment, education, and economy (Sunaryo, 2004).¹²

Based on the results of the study, as many as 5 respondents (12.5%) had good knowledge but demonstrated unfavorable behavior. The researcher assumes that economic factors greatly influence traders' behavior, as the demands of material needs drive individuals to continue striving to fulfill their occupational responsibilities. This is consistent with a study conducted by Ermayanti (2020), which found that the majority of the community in West Sumatra (87%) did not comply with health protocols due to work demands, even though their knowledge about Covid-19 was categorized as good.²⁹



Family support is also a factor that can influence the formation of an individual's behavior in reducing the spread of Covid-19, since family is the closest environment for every individual, with strong relationships between family members and shared responsibility for the well-being and health of both the individual and the family as a whole.²⁸ With family support, a person can also receive information, advice, and motivation to consistently practice healthy living behaviors, particularly during the Covid-19 pandemic.²⁷

The environmental factor refers to everything surrounding an individual—physical, biological, and social aspects—which has a significant influence on the process of forming knowledge and behavior within that individual. This is because of reciprocal interactions within the environment itself.³ The environment strongly affects the formation of behavior: when an individual lives in a supportive environment, favorable behavior is more likely to develop, whereas in an unfavorable environment, individuals also tend to adapt to and adopt poor behaviors (Lawrence Green, 1991).²²

A total of 9 respondents (22.5%) had poor knowledge but demonstrated good behavior. The researcher assumes that this is influenced by government regulations, which made traders afraid of violating the rules. Thus, even though their knowledge about Covid-19 was lacking, the demands of compliance with regulations encouraged them to practice good preventive behavior.

In shaping good behavior, several factors play a role, and reinforcement is needed so that such behavior can become habitual. This reinforcement may come from external encouragement, either from the government through reinforcement in the form of strict sanctions for those who violate Covid-19 prevention protocols, or from health workers who continuously provide education about the dangers of Covid-19 to traders.¹²

This study aimed to examine and analyze the relationship between knowledge about Covid-19 and preventive behavior against Covid-19 among traders in Oesapa Market, Kupang City. The results of the bivariate analysis showed that there was no significant relationship between knowledge and preventive behavior against Covid-19 among traders in Oesapa Market, Kupang City. These findings are consistent with the study conducted by Patimah et al. (2020) on the community in Garut Regency, which obtained a correlation value of 0.06 (>0.05), indicating that there is no significant relationship between Covid-19 knowledge and preventive behavior against the spread of Covid-19.²²

CONCLUSION

1. The characteristics of trader respondents in Oesapa Market, Kupang City are consisting of 16 males (40.0%) and 24 females (60.0%). For the most age group is 17–25 years with a total of 19 people (47.5%). For the last education level, most respondents are with last education Senior High School/Vocational High School (SMA/SMK) with a total of 22 people (55.0%).
2. The distribution of knowledge about Covid19 among traders in Oesapa Market, Kupang City describes that most traders have good knowledge.
3. The distribution of prevention behavior of Covid-19 among traders in Oesapa Market, Kupang City describes that most traders have good prevention behavior.
4. There is no relation between knowledge about Covid-19 and prevention behavior of Covid-19 among traders in Oesapa Market, Kupang City which is shown by the acceptance of H_0 where the significance value is $p=0.291$ or $p>0.05$.

SUGGESTION

1. The researcher hopes that the government and health authorities can work together to ensure equitable dissemination of information about Covid-19 by providing education regarding the prevention of Covid-19 transmission to traders.
2. Future researchers are encouraged to explore other aspects in order to assess additional factors that may influence individual behavior, particularly regarding Covid-19 prevention behavior.

REFERENCES

1. Moudy, J., Syakurah, R. A. & Artikel, I. Higeia Journal Of Public Health. 4, 333–346 (2020).
2. Sari, D. N. A. S. Pengetahuan Dan Sikap Mahasiswa Kesehatan Tentang Pencegahan Covid-19 Di Indonesia. 11,158–264 (2020).
3. Ariyanti, R. Hubungan Pengetahuan Tentang Covid-19 Dengan Kepatuhan Physical Distancing Di Tarakan. 8, 102–111 (2020).



4. Who.1021 . Covid 19 Worldwide Dashboard- Who Live World Statistics. Covid19.Who.Int, Diakses Pada 18 Mei1021.
5. Covid-19.Go.Id.1021. Situasi Virus Covid-19 Di Indonesia. <https://Covid19.Go.Id/>, Diakses Pada 18 Mei1021
6. Ngronggah, D. I. Dengan Kepatuhan Penggunaan Masker Sebagai Upaya Pencegahan Penyakit Covid-19. 10, (2020).
7. Saputra, A. W. & Simbolon, I. Hubungan Tingkat Pengetahuan Tentang Covid- Untuk Mengurangi Penyebaran Covid-19 Di Kalangan Mahasiswa Berasrama Universitas Advent Indonesia. 1–7.
8. Wonok, M. J. Gambaran Perilaku Masyarakat Tentang Pencegahan Covid- 19 Di Desa Tumani Kecamatan Maesaan Kabupaten Minahasa Selatan. 9, 147–156 (2020).
9. Emy, N. P. E. D., Nugraha, I. M. A. D. P., Wisnawa, G. A., Agustina, N. P. D. & Diantari, N. P. A. Gambaran Pengetahuan Masyarakat Tentang Covid-19 Dan Perilaku Masyarakat Di Masa Pandemi Covid-19. J. Keperawatan Jiwa Vol. 8 No., 485– 490 (2020).
10. Tetartor, R. P., Anjani, I., Simanjuntak, M. R. & . D. Faktor- Faktor Yang Berhubungan Dengan Kepatuhan Pedagang Dalam Pelaksanaan Protokol Kesehatan Covid-19 Di Pasar Petisah Kota Medan Sumatera Utara. J. Kesmas Dan Gizi 3, 114–122 (2021).
11. Widyakusuma Putra, Y. I. & Manalu, N. V. Tingkat Pengetahuan Dengan Perilaku Warga Dalam Menjalankan Protokol Kesehatan Di Masa New Normal Pandemi Corona. Coping Community Publ. Nurs. 8, 366 (2020).
12. Patimah, I. Hubungan Tingkat Pengetahuan Dengan Perilaku Pencegahan Penularan Covid-19 Pada Masyarakat Relationship Between Knowledge Level And Behavior To Prevent Covid-19 Transmission In The Community. 12, 52–60 (2021).
13. Prastyowati, A. Mengenal Karakteristik Virus Sars-Cov-2 Penyeba Penyakit Covid-19 Sebagai Dasar Upaya Untuk Pengembangan Obat Antivirus Dan Vaksin. Biotrends 11, 1–10 (2020).
14. Lubis, D. A. S. Hubungan Tingkat Pengetahuan Dengan Sikap Dan Perilaku Terhadap Pencegahan Infeksi Covid-19 Pada Mahasiswa Semester 6 Fakultas Kedokteran Usu. (2021).
15. Silalahi, A. Perubahan Pola Hidup Pada Situasi Covid-19. 1–12 (2020) Doi:10.13140/Rg.2.2.10961.76646.
16. Purwaniati, P. & Asnawi, A. Target Kerja Obat Covid-19: Review. J. Farmagazine 7, 30 (2020).
17. Athena, A., Laelasari, E. & Puspita, T. Pelaksanaan Disinfeksi Dalam Pencegahan Penularan Covid-19 Dan Potensi Risiko Terhadap Kesehatan Di Indonesia. J. Ekol. Kesehat. 19, 1– 20 (2020).
18. Fitriani, N. I. Virologi, Patogenesis, Dan Manifestasi Klinis.11, 1–9 (2020).
19. Otálora, M. M. C. Wellness And Healthy Magazine. Parq. Los Afectos. Jóvenes Que Cuentan1, 124–137 (2020).
20. Suprayitno, E. Pengetahuan Dan Sikap Masyarakat Dalam Pencegahan Covid-19. J. Heal. Sci. (Jurnal Ilmu Kesehatan) 5, 68–73 (2020).
21. Tulandi, V. A. 121 Gambaran Perilaku Pencegahan Covid-19 Kecamatan Tombariri Kabupaten Minahasa. 9, 121–127 (2020).
22. Rosidin, U., Rahayuwati, L. & Herawati, E. Perilaku Dan Peran Tokoh Masyarakat Dalam Pencegahan Dan Penanggulangan Pandemi Covid -19 Di Desa Jayaraga, Kabupaten Garut. 5, 42–50 (2020).
23. Mujiburrahman, Riyadi & Ningsih. Pengetahuan Berhubungan Dengan Peningkatan Perilaku Pencegahan Covid-19 Di Masyarakat. J. Keperawatan Terpadu1, 130–140 (2020).
24. Dike, D. Pengetahuan Dan Sikap Dalam Pencegahan Covid-19. J. Heal. Sci. Res.1, 1–9 (2017).
25. Penyakit Covid-19 Sebagai Dasar Upaya Untuk Pengembangan Obat Antivirus Dan Vaksin. Biotrends 11, 1–10 (2020).
26. Lubis, D. A. S. Hubungan Tingkat Pengetahuan Dengan Sikap Dan Perilaku Terhadap Pencegahan Infeksi Covid-19 Pada Mahasiswa Semester 6 Fakultas Kedokteran Usu. (2021).
27. Gannika, L. Tingkat Pengetahuan Dan Perilaku Pencegahan Coronavirus Disease1019 (Covid-19) Pada Masyarakat Sulawesi Utara. 16, 83–89 (2020).
28. Pertiwi, G. S. & Budiono, I. Indonesian Journal of Public Health and Nutrition Perilaku Physical Distancing Masyarakat Pada Masa Pandemi Covid-19 Gunungpati adalah Kelurahan Sumurrejo Berdasarkan data Puskesmas Gunungpati Faktor yang Berhubungan dengan Perilaku Physical Distancing Masyarakat pada Masa Pandemi covid-19 ” di wilayah Karanggeneng. 1, 90–100 (2021).



-
29. Vita, C.. Analisis Faktor Perilaku Pencegahan Covid 19 Pada Mahasiswa Sekolah Tinggi Ilmu Kesehatan Hang Tuah Pekanbaru Tahun 1020. 3, (2021).
 30. Emayanti. “ Faktor-Faktor Yang Mempengaruhi Perilaku Kesehatan Masyarakat Sumatera Barat Dalam Mematuhi Protokol Kesehatan ”. 1– 70 (2020).
 31. Soo, W. Faktor-Faktor Yang Mempengaruhi Pengetahuan Masyarakat Di Kota Kupang Mengenai Covid-19. 4, 1–23 (2021).

Cite this Article: Aadi, E..F.S., Sagita, S., Rambu Kareri, D.G., Hendricson Folamauk, C.L. (2025). The Relationship of Knowledge About Covid-19 with the Behavior of Preventing the Danger of Covid-19 on Traders at The Oesapa Market, Kupang City. International Journal of Current Science Research and Review, 8(9), pp. 4701-4709. DOI: <https://doi.org/10.47191/ijcsrr/V8-i9-34>