

The Relationship between Family Knowledge and Family Compliance Behavior in Assistance Rules in the Ponek Room of RSUD dr. Abdul Rivai

Meiske Paimbong¹, Hestri Norhapifah², Widya Astutik³, Ridha Wahyuni⁴

¹Mahasiswa Program Studi S-1 Ilmu Kebidanan ITKES Wiyata Husada Samarinda

^{2,3,4}Dosen Program Studi S-1 Ilmu Kebidanan ITKES Wiyata Husada Samarinda

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ABSTRACT

PONEK services are an effort to support the accelerated reduction of MMR and AKN through the provision of integrated services for mothers and newborns. The success of PONEK requires reliable management in the form of family rules that accompany patients in the hospital. Preliminary study of RSUD dr. Abdul Rivai still has a companion family who violates the rules regarding discipline in the PONEK Room. Objective: Knowing the relationship between family knowledge and family compliance behavior with the mentoring rules. Methods: This type of analytic survey research is cross sectional design. The population is the accompanying family of patients at Ponek RSUD dr. Abdul Rivai numbered 250 people, with a sample of 154 people. Data analysis using chi-square. Result: Most family knowledge about mentoring rules is good (55, 8%) and the behavior of family obedience to the mentoring rules is the most obedient (63.6%). There is a relationship between the level of family knowledge and the behavior of family compliance with the mentoring rules (p value: 0.000). Conclusion: knowledge is a factor related to family obedience behavior in mentoring rules.

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Corresponding Author:

Meiske Paimbong
Midwifery Study Program,
ITKES Wiyata Husada Samarinda
Jl. Kadrie Oening No. 77 Samarinda, Kalimantan Timur, 75124, Indonesia.
Email: meiske120682@gmail.com

INTRODUCTION

Hospital is a health service institution that provides complete individual health services that provide inpatient, outpatient and emergency services (Law No. 44 of 2009 concerning Hospitals). One of the services available at the hospital is the Comprehensive Emergency Neonatal Obstetrics Service (PONEK). Ponek is an effort made to support the acceleration of reducing the Maternal Mortality Rate (MMR) and Infant Mortality Rate (AKN) through the provision of integrated services for mothers and newborns (Ministry of Health RI, 2018). The success of PONEK is the availability of competent health workers, reliable infrastructure, facilities and management. Reliable management includes hospital policies or family regulations that accompany patients at the hospital (Supriyanto, 2012).

The patient accompanying family rules as the implementation of patient safety, where the application of patient safety objectives in the inpatient room, there are still a number of things that need attention, one of which is reducing the risk of infection from outside patients or visitors (Tutiany et al, 2017). Families who visit without complying with the rules can be a source of infection that spreads to patients in the Ponok Room, while patients in the Ponok Room are vulnerable or easily exposed to infectious diseases that cause AKI and AKN (Latif, 2021). For this reason, it is necessary to have family obedience behavior to implement mentoring rules in the Ponok Room. Supported by Regulation of the Minister of Health Number 3 of 2020 concerning Hospital Classification and Licensing,

Compliance as individual behavior that is in accordance with advice or obedience to orders or rules and discipline, namely obedience to do something recommended or determined. There are several factors that influence compliance, including knowledge (Kamidah, 2015). Knowledge is the result of knowing and this occurs after people have sensed a certain object. Sensing occurs through the five human senses, namely: the senses of sight, hearing, smell, taste and touch. Most of human knowledge is obtained through the eyes and ears (Notoatmodjo, 2017).

Knowledge of the patient's family regarding family rules accompanying patients at the hospital, especially in the Ponok Room will make the patient's family comply with the applicable regulations. It is known that the disobedience of the patient's family in carrying out the rules at the hospital is due to a lack of understanding of the applicable rules (Lestari et al, 2021).

According to previous research conducted by Awwad (2015) showed that there is a relationship between knowledge and compliance. Sari's research (2021) shows that there is a significant relationship between knowledge and behavior. Jankowska's research (2016) shows that there is a relationship between knowledge and compliance.

Preliminary study at dr. Abdul Rivai obtained data on the number of inpatient visits to the PONEK Room in 2022, namely in January there were 287 patients, in February there were 253 patients, in March there were 234 patients, in April there were 265 patients and in May there were 250 patients, while there were 5 outpatients in January. February 17 patients, March 9 patients, April 10 patients and May 17 patients. Obtained data on the infection rate of inpatients at the ponok room from January to May 2022 were 82 patients (1.48%). The results of interviews with 10 inpatient companions in the PONEK Room found that 2 people (20%) said they knew about all the accompanying procedures in the PONEK Room at RSUD dr. Abdul Rivai, while 8 people (80%) said they only knew about the number of companions,

The results of observations regarding companion behavior found that 8 people (80%) violated the rules regarding the number of companions where there appeared to be more than 1 patient companion. In addition, it appears that 2 people (20%) of the patient's companions violated the entry ban for children under 12 years of age and the prohibition on smoking in smoke-free areas. In addition, the management team's review also often found family non-compliance, especially in terms of visiting hours and the number of patient companions. The rules that apply after the pandemic, the patient's family may accompany a maximum of 2 people in the room, but the management team often finds a patient's family of more than 2 people. The Management Team also often finds families of smoking patients in the Ponok Room area of RSUD dr. Abdul Rivai. Efforts are made by reprimanding directly to the patient's family. Hospital Management dr. Abdul Rivai also always tries to evaluate family compliance through direct observations in each treatment room.

Hospital management team dr. Abdul Rivai provided information about the RSUD order based on the Guidelines for Information Provision of Patient Rights and Obligations through the Decree of the Director of RSUD dr. Abdul Rivai No. 445/019/TU-1/I/2017 concerning Enforcement of Guidelines for Providing Patient Information and Education at RSUD dr. Abdul Rivai which is documented in the patient's medical record status at RM. 09, namely the Form for Providing Information and Patient Education on material no. 9 with oral/discussion methods,

demonstrations, writing and evaluating the response of the patient/patient's family. Furthermore, education providers and education recipients sign the form.

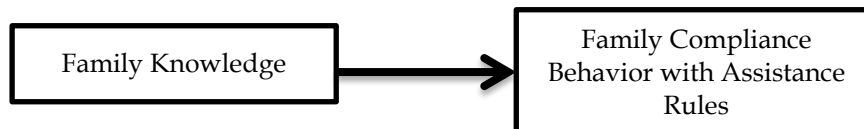
RESEARCH METHOD

Types and Research Design

The type of research used in this research is quantitative with analytic survey research to study the relationship of family knowledge about mentoring rules to family obedience behavior in the PONEK Room of Abd Hospital. Rivai. Analytical surveys are surveys or studies that try to explore how and why health phenomena occur. Then analyze the dynamics of the correlation between phenomena or between risk factors and effect factors. The research design uses a cross-sectional design that is used to examine an event at the same time. Cross-sectional is a cross-sectional study with causal or risk and effect variables or cases that occur on the research object that are measured and collected simultaneously,

Research Concept Framework

The research concept framework is a framework for the relationship between concepts that you want to observe or measure through the research that will be carried out (Nursalam, 2018). The conceptual framework will assist researchers in linking findings with theory. The conceptual framework in this study can be seen in the following figure:



Population and Sample

a. Research Population

Population is a generalization area consisting of objects/subjects that have certain qualities and characteristics determined by researchers to study and then draw conclusions (Sugiyono, 2020). The population in this study were the accompanying families of patients in the inpatient room at the Comprehensive Emergency Neonatal Obstetric Service (PONEK) RSUD dr. Abdul Rivai in May 2022 numbered 250 people.

b. Research Sample

According to Notoatmodjo (2017) that the sample is the object to be studied and is considered to represent the entire population where in taking research samples using certain techniques. The sample in this study was the patient's accompanying family in the inpatient room at the Comprehensive Emergency Neonatal Obstetric Service (PONEK) RSUD dr. Abdul Rivai, with the sample size calculation formula using the slovin formula in Notoatmodjo (2017) as follows:

$$n = \frac{N}{1 + N(d^2)}$$

$$n = \frac{250}{1 + 250(0,05^2)}$$

$$n = 153.85 \text{ is rounded to } 154$$

$$n = 154$$

Information :

N = Population size

n = sample size

d = desired level of confidence/accuracy (0,05)

Based on the sample calculation, the sample is the accompanying family of the patient in the inpatient room at the PONEK Room at RSUD dr. Abdul Rivai numbered 154 people. The sampling technique used in this study is non-probability sampling, namely a sampling technique that provides equal opportunities for each element or member of the population to be selected as a sample. This sampling technique uses purposive sampling which is a sampling technique, in which the researcher determines sampling by establishing special characteristics that are in accordance with the research objectives so that they are expected to be able to answer research problems (Notoatmodjo, 2017).

Location and Time of Research

- a. Research sites
This research was conducted at the Comprehensive Emergency Neonatal Obstetric Service (PONEK) RSUD dr. Abdul Rivai.
- b. Research time.
This research was conducted for 1 month from 15 September to 21 October 2022, where the average inpatient was in the PONEK Room at RSUD dr. Abdul Rivai in one month can fulfill a sample of around 154 patients.

Data Collection Procedures

The data collection carried out by the researcher used several steps sequentially, namely, Making a preliminary study permit to the academic ITKES Wiyata Husada Samarinda. The researcher submitted a preliminary study permit application letter to dr. Abdul Rivai who was handed over to the administration. After getting a letter of approval from the Head of RSUD dr. Abdul Rivai, then the researcher conducted a preliminary study. The researcher asked for help from the relevant authorities in the Ponek Room at RSUD dr. Abdul Rivai, then the researcher explained the aims, objectives and benefits of the research. Researchers conducted a preliminary study. The preliminary study is outlined in a research thesis and the researcher carries out guidance and thesis examination. After that the researcher collected research data using valid instruments. In the process of distributing questionnaires in this study, the researcher visited the accompanying family of the patient in the inpatient room at the Ponek Room of RSUD dr. Abdul Rivai to fill out the questionnaire through the google form. Identify the results of data collection. Preparation of research reports.

RESULTS AND DISCUSSIONS

Univariate analysis

a. Age

Characteristics of the age of the respondents in the PONEK Room at dr. Abdul Rivai, can be seen in the following table

Table 1. Age Characteristics of Respondents in PONEK Room RSUD dr. Abdul Rivai

Age	f	Percentage (%)
17-25 years	29	18,8
26-35 years	65	42,2
36-45 years	38	24,7
46-55 years	17	11
56-65 years	5	3,2
Amount	154	100

Source: Primary Data, 2022

Based on table 4.1 above, it is known that the age of the respondents in the PONEK Room at RSUD dr. Abdul Rivai in this study the majority of respondents aged between 26-35 years amounted to 65 respondents (42.2%), while the least number of respondents aged between 56-65 years were 5 respondents (3.2%).

b. Gender

Characteristics of the sex of respondents in the PONEK Room at RSUD dr. Abdul Rivai, can be seen in the following table:

Table 2. Gender Characteristics of Respondents in PONEK Room RSUD dr. Abdul Rivai

Gender	f	Percentage (%)
Man	90	58,4
Woman	64	41.6
Amount	154	100

Source: Primary Data, 2022

Based on table 4.2 above, it is known that the sex of the respondents in the PONEK Room at RSUD dr. Abdul Rivai in this study the majority of respondents were male, 90 respondents (58.4%), while there were 64 female respondents (41.6%).

c. Education

Characteristics of respondents' education in the PONEK Room of dr. Abdul Rivai, can be seen in the following table:

Table 3. Educational Characteristics of Respondents in the PONEK Room of RSUD dr. Abdul Rivai

Education	f	Percentage (%)
SD	23	14,9
JUNIOR HIGH SCHOOL	14	9,1
SENIOR HIGH SCHOOL	69	44.8
D3	13	8,4
S1	33	21,4
S2	2	1,3
Amount	154	100

Source: Primary Data, 2022

Based on table 4.3 above, it is known that the education of the respondents in the PONEK Room at RSUD dr. Abdul Rivai in this study most of the respondents graduated from high school by 69 respondents (44.8%), while at least 2 respondents had graduated from Masters (1.3%).

d. Profession

Characteristics of the work of respondents in the PONEK Room of RSUD dr. Abdul Rivai, can be seen in the following table:

Table 4. Job Characteristics of Respondents in the PONEK Room RSUD dr. Abdul Rivai

Profession	f	Percentage (%)
IRT	28	18,2
Self-employed	6	3,9
Private sector employee	56	36,4
PNS/BUMN/POLRI/TNI	34	22,1
Farmers/Fishermen/Laborers	22	14,3
Student/Student/Not Working	7	4,5
Pastor	1	0.6
Amount	154	100

Based on table 4.4 above, it is known that the respondent's occupation is in the PONEK Room of RSUD dr. Abdul Rivai in this study most of the respondents worked as private employees by 56 respondents (36.4%), while at least 1 respondent was a priest (0.6%).

e. Family Income

Characteristics of family income in respondents in the PONEK Room at RSUD dr. Abdul Rivai, can be seen in the following table:

Table 5. Characteristics of Family Income in Respondents at PONEK Room RSUD dr. Abdul Rivai

Income	f	Percentage (%)
≤ 1,000,000	14	9,1
≤ 5,000,000	102	66,2
≤ 10,000,000	19	12,3
≥ 10,000,000	19	12,3
Amount	154	100

Based on table 4.5 above, it is known that the income of the respondent's family in the PONEK Room at RSUD dr. Abdul Rivai in this study the majority of respondents earning ≤ 5,000,000 amounted to 102 respondents (66.2%), while at least ≤ 1,000,000 there were 14 respondents (9.1%).

Knowledge

To identify the level of family knowledge about mentoring rules in the PONEK Room at RSUD dr. Abdul Rivai, can be seen in the table below:

Table 6. Frequency distribution of the level of family knowledge about discipline assistance in the PONEK Room at RSUD dr. Abdul Rivai

Knowledge	f	Percentage (%)
Well	86	55,8
Not good	68	44,2
Amount	154	100

Source: Primary Data, 2022

Based on table 4.6, it is known that the distribution of the frequency of family knowledge about the mentoring rules in the PONEK Room at RSUD dr. Abdul Rivai, most of the respondents had good knowledge, 86 respondents (55.8%), while 68 respondents (44.2%) had poor knowledge.

Family Compliance Behavior

To identify the behavior of family compliance with the mentoring rules in the PONEK Room at RSUD dr. Abdul Rivai, can be seen in the table below:

Table 7. Frequency distribution of family adherence to rules and regulations assistance in the PONEK Room at RSUD dr. Abdul Rivai

Family Compliance Behavior	f	Percentage (%)
obey	98	63,6
Less Compliant	56	36,4
Amount	154	100

Source: Primary Data, 2022

Based on table 4.7, it is known that the frequency distribution of family obedience behavior in the mentoring rules in the PONEK Room at RSUD dr. Abdul Rivai most of the respondents behaved obediently by 98 respondents (63.6%), while less obedient by 56 respondents (36.4%).

Bivariate Analysis

To analyze the relationship between the level of family knowledge and the behavior of family compliance with the mentoring rules in the PONEK Room at RSUD dr. Abdul Rivai, can be seen in the table below:

Table 1. The relationship between the level of family knowledge and the behavior of family compliance with the mentoring rules in the PONEK Room at RSUD dr. Abdul Rivai

No	Knowledge	Family Compliance Behavior				Total	%	<i>p-value</i>
		obey		Less Compliant				
		n	%	n	%			
1	Well	72	46,8	14	9,1	86	55,8	*0.000
2	Not good	26	16,9	42	27,3	68	44,2	
Amount		98	63,6	56	36,4	154	100	

Based on table 4.8 it is known that of the 86 respondents with good knowledge, the highest proportion of obedient behavior to the mentoring rules was 72 respondents (46.8%), but there were those whose behavior was not obedient to the mentoring rules totaling 14 respondents (9.1%). Whereas for respondents who had poor knowledge, there were 68 respondents with the highest proportion of non-compliant behavior towards the mentoring rules totaling 42 respondents (27.3%), and there were 26 respondents (16.9%) obeying the mentoring rules. . Statistical test results obtained $p \text{ value} = 0.000 < \alpha : 0.05$ so that H_a is accepted, that is, there is a relationship between family knowledge and family obedience behavior in the mentoring rules in the Ponek Room at RSUD dr. Abdul Rivai.

Discussion

a. Age

Based on the results of the research on the age of the respondents in the PONEK Room at RSUD dr. Abdul Rivai in this study the majority of respondents aged between 26-35 years amounted to 65 respondents (42.2%), while the least number of respondents aged between 56-65 years were 5 respondents (3.2%). In accordance with the results of Indraswari's research (2021) it shows that the majority of respondents are between 20-30 years old. Fajriyah's research (2021) shows that the majority of respondents are aged between 20-30 in sub-districts/villages in Pekalongan Regency. Permatasari's research (2021) showed that most of the respondents were aged >20 years in the 4th grade students of FK UPNVJ. Likewise, Abubakar's research (2017) shows that most of the respondents are aged between 20-30 years at the Surabaya Hajj Hospital.

Age is a person's age from birth to birthday. The more mature the age, level of maturity and ability to receive information the better (Mubarak, 2016) a person will be more mature and mature in thinking and working. In terms of public trust, someone who is more mature is trusted than someone who is immature. This is an experience and maturity of the soul (Budiman and Riyanto, 2018). Therefore, it can be concluded that the age of the respondents between 26-35 years is classified as mature, which means that the level of maturity and ability to receive information is getting better, so that it affects the knowledge they acquire and can increase their compliance.

b. Gender

Based on the results of the research on the gender of the respondents in the PONEK Room at RSUD dr. Abdul Rivai in this study the majority of respondents were male, 90 respondents (58.4%), while there were 64 female respondents (41.6%). According to the results of Yabiy's research (2021) it shows that the majority of respondents are male. Alya's research (2020) shows that the majority of respondents are male at the Majenang Regional General Hospital. Indraswari's research (2021) shows that the majority of respondents are male. Fajriyah's research (2021) shows that the majority of respondents are male in sub-districts/villages in Pekalongan Regency.

It was concluded that there were more male respondents than female respondents because the proportion of respondents used in this study was not the same, because the respondents used were dominated by male gender.

c. Education

Based on the results of research on the education of respondents in the PONEK Room of RSUD dr. Abdul Rivai in this study most of the respondents graduated from high school by 69 respondents (44.8%), while at least 2 respondents had graduated from Masters (1.3%). In accordance with the results of Awwad's research (2015) it shows that most of the respondents graduated from high school. Fajriyah's research (2021) shows that most of the respondents graduated from high school in sub-districts/villages in Pekalongan Regency. Abubakar's research (2017) shows that most of the respondents graduated from high school at the Hajj Hospital in Surabaya. Yabiy's research (2021) shows that most of the respondents graduated from high school.

The process of changing the attitude and behavior of a person or group is an effort to mature humans through teaching and training efforts (Budiman and Riyanto, 2018). The higher a person's education, the faster they receive and understand information so that their knowledge is also higher (Sriningsih, 2011). orderly.

d. Profession

Based on the results of the respondent's occupational research in the PONEK Room of RSUD dr. Abdul Rivai in this study most of the respondents worked as private employees by 56 respondents (36.4%), while at least 1 respondent was a priest (0.6%). According to Alya's research results (2020), it shows that the majority of respondents work as private employees. Awwad's research (2015) shows that most of the respondents work as private employees. Indraswari's research (2021) shows that the majority of respondents work as private employees. Fajriyah's research (2021) shows that the majority of respondents work as private employees in sub-districts/villages in Pekalongan Regency. Likewise, Abubakar's research (2017) shows that most of the respondents work as private employees at the Hajj Hospital in Surabaya.

Work can provide knowledge, professional skills and learning experience at work so as to be able to make decisions. The longer a person works, the more knowledge he will gain (Budiman and Riyanto, 2018). It was concluded that the respondents were mostly private employees so they had knowledge, professional skills and learning experience at work so they were able to make decisions because the amount of information obtained made good knowledge and could increase compliance.

e. Family Income

Based on the results of research on the income of the respondent's family in the PONEK Room of dr. Abdul Rivai in this study the majority of respondents earning $\leq 5,000,000$ amounted to 102 respondents (66.2%), while at least $\leq 1,000,000$ there were 14 respondents (9.1%). According to Alya's research results (2020) it shows that most respondents earn between 3,000,000-5,000,000. Alya's research (2020) shows that most of the income respondents match the UMK. Awwad's research (2015) shows that most of the respondents' income is according to the UMK. Indraswari's research (2021) shows that shows that most of the respondents' income is according to the UMK.

Economic status will determine the availability of the facilities needed to receive information. If the economic status is low, it is difficult to increase knowledge. (Budiman and Riyanto, 2018). It was concluded that the respondents had an income of $\leq 5,000,000$, which belonged to a fairly good economic level, so they were able to obtain good facilities in receiving information that could increase their knowledge so that it had an impact on compliance with the rules.

The results of this study are supported by Awwad's research (2015) which shows that there is a relationship between knowledge and compliance. Sari's research (2021) shows that there is a significant relationship between knowledge and behavior. Jankowska's research (2016) shows that there is a relationship between knowledge and compliance. Knowledge as the output of knowing that occurs after sensing through information obtained or carried out by someone on a related object, where sensing occurs based on the five senses in the form of hearing, sight, smell, touch and taste, but the results of this knowledge are more dominantly obtained from the five senses . eyes and ears (Indraswari, 2021).

Knowledge of the patient's family regarding family rules accompanying patients at the hospital, especially in the Ponék Room will make the patient's family comply with the applicable regulations. It is known that the disobedience of the patient's family in carrying out the rules at the hospital is due to a lack of understanding of the applicable rules (Lestari et al, 2021). In this case there is a change in behavior towards the target or the community so that he wants to act or behave as expected. This method can be taken for example by the existence of regulations or laws that must be obeyed by community members. This method will produce fast behavior, but these changes will not necessarily last long because the changes in behavior that occur are not or have not been based on self-awareness (Eko, 2016).

The researcher assumes that there is a relationship between family knowledge and family obedience behavior in the mentoring rules in the Ponék Room of RSUD dr. Abdul Rivai. This is because the family knows about the rules for assisting in the Ponék Room at RSUD dr. Abdul Rivai will comply with these regulations. Therefore, it can be concluded that there is a relationship between family knowledge and family obedience behavior in the mentoring rules in the Ponék Room of RSUD dr. Abdul Rivai. So that the higher the family's knowledge, the more obedient to the mentoring rules, and conversely, the lower the family's knowledge, the less obedient to the assistance rules.

CONCLUSION

From the results of research and discussion regarding the relationship of family knowledge to family obedience behavior in the mentoring rules in the Ponék Room of RSUD dr. Abdul Rivai, it was concluded that: The characteristics of the majority of respondents aged between 26-35 years were 65 (42.2%), male sex was 90 (58.4%), high school graduate education was 69 (44.8%) , employment of private employees by 56 (36.4%) and family income \leq 5,000,000 by 102 (66.2%). The family's knowledge of the mentoring rules in the PONEK Room at RSUD dr. Abdul Rivai is mostly good at 86 (55.8%), while less is 68 (44.2%). The behavior of family obedience to the mentoring rules in the PONEK Room at RSUD dr. Abdul Rivai was most obedient at 98 (63.6%), while less obedient at 56 (36.4%). There is a relationship between the level of family knowledge and the behavior of family compliance with the mentoring rules in the PONEK Room at RSUD dr. Abdul Rivai (p value = 0.000 < α : 0.05).

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