

Factor Determinant Implementation Vaccines for the Elderly

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ABSTRACT

The elderly are vulnerable and at-risk groups exposed to the Covid 19 virus. However, the number of achievements immunization in the elderly is still relatively low compared to group age other. Various factors cause this thing. Destination study this to know the factors that influence implementation vaccine in advanced age. This research is an analytical research observation with an approach to a *cross-sectional study*. This research was carried out in the working area of Fakfak City Health Centre within six months for the elderly aged more than 60 years old as many as 30 selected respondents used consecutive sampling techniques. This study used a questionnaire instrument. Data analysis used linear logistic regression analysis. The study find that the distance factor to facility health, level of obtained information, and knowledge is a factor that influences the reception of vaccine in advanced age with a p-value <0.05. we recommend that the elderly, with all the limitations in access to the Covid-19 vaccine, can be facilitated by the government, including access to facility provider vaccination and access information. Future research could focus on the proper intervention on the problem enhancement knowledge, access information nor intervention for seniors who want to get vaccine however blocked by access distance to location vaccination.

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INTRODUCTION

The covid-19 pandemic situation is Keep going increase around the world. Enhancement of this covid-19 case resulted in more than 32 million people, and around one million died. In Indonesia, data from December 2020 shows more than 280 thousand people with Covid-19 cases and died around 10 thousand with increased daily cases of about 3000 to 4000 people (Martini et al., 2021).

To reduce the spread of the Covid-19 virus, the government applies protocol health and restrictions activity outside the home because there is not yet powerful medicine. Other efforts made government also give the Covid-19 vaccine that has passed various clinical trials. Vaccine, of course, has become a hope for big people worldwide as the primary weapon for eradicating Covid-19 transmission. Through multiple clinical trials, until with moment, this is obtained, that effectiveness can reach 90% to 100% (Mayasari et al., 2021)

The availability of vaccines for the whole world is limited because production eats time, then the decision gift vaccines are given by gradually. Stage first is given to officer health next to officer field other. On the other hand, those with a risk of being infected are old age over 60 years because the disease can be more severe and have a high mortality risk. Data says that those who are over 65 years old are 9% of the world population, but on the other hand, 30% - 40% of COVID-19 cases in the world are those over the age of 65, and about 80% of deaths consequence disease this, then group risk tall must be protected because this will many influences drop number pain and even death. So, the elderly above 60 years in Indonesia are included in the vaccination program (Luke & Triyani, 2020).

The Indonesian government targets vaccination to the elderly is 216 million old and about 1.6 million elderlies, or about 7.48%, who have already received an injection of the first Covid-19 vaccine data 01 April 2021 (Susilawati et al., 2022). Vaccination targets the elderly in Fakfak Regency, West Papua. According to The Fakfak District Health Office is 2800 people, the total dose of vaccines available at the stage. First, there are 400 elderlies; however new realized vaccine first is 145 older adults. Consequently, the policy gives rise to several responses from society, influencing the decision to accept the vaccine.

There are several influencing factors decision elderly covers age, level of education, work, knowledge, anxiety, information, support family, dependency, and physical and distance Health facilities (Sigalingging & Sherlly, 2021). Based on the description above, it looks like The Covid-19 pandemic is a significant health issue because besides causing physical health problems, it also causes several high deaths in the elderly. Destination study this for now the factors that influence implementation vaccine in advanced age.

RESEARCH METHOD

This research is a research analytic observational with a cross-sectional approach. This study began by measuring the dependent variable, the effect, while the independent variable was measured retrospectively. This research will be conducted in the working area of Fakfak City Health Centre. The research was carried out within six months, from preparation and intervention to data analysis. The sample in this study was elderly in the working area of the Fakfak Health Centre aged more than 60 years old as many as 30 selected respondents used consecutive sampling techniques. This study used a questionnaire instrument to collect data. Multivariate analysis in this study used multivariate linear logistic regression analysis.

RESULTS AND DISCUSSIONS

Results

A total of 30 respondents contribute to the study. Most respondents are manifold sex woman who has carried on age with education but no work. Mileage to Health facilities < 5 KM. Most respondents do not understand about the vaccine for age continue, though has informed previously by health workers and other information. Most respondents get support from families for doing vaccines. The data are presented in table 1 below

Table 1. Characteristics Sociodemographic respondents.

Variable	Frequency (n)	Percent (%)
Type Sex		
Man	8	26.7
Woman	22	73.3
Age		
Carry on Age	25	83.3
Carry on Age Old	5	16.7
Education		

Low	12	40
Tall	18	60
Work		
Not Working	25	83.3
Working	5	16.7
Distance To Health Facilities		
> 5 KM	12	40
< 5 KM	18	60
Knowledge About Vaccine		
Not Know	23	76.7
Know	7	23.3
Exposed Information About Vaccine		
Not Informed	10	33.3
Informed	20	66.7
Support Family		
Not Support	11	36.7
Support	19	63.3
Worry		
Worried	5	16.7
Not Worried	25	83.3
Implementation Vaccine		
Not Vaccine	15	50
Vaccine	15	50

Table 2. Determinant factor implementation vaccine in advanced age

Predictors	Estimate	SE	95% Confidence Interval		t	p
			Lower	Upper		
Type Sex	0.00777	0.177	-0.362	0.3778	0.0438	0.965
Age	0.18178	0.218	-0.274	0.6373	0.8324	0.415
Level of education	0.29994	0.218	-0.154	0.7544	1.3768	0.184
Work	-0.35695	0.250	-0.878	0.1637	-1.4302	0.168
Distance to facility health	-0.58540	0.179	-0.959	-0.2114	-3.2651	0.004
Exposure rate	-0.44348	0.195	-0.849	-0.0376	-2.2794	0.034
Information						
Knowledge	-0.79827	0.232	-1.283	-0.3136	-3.4358	0.003
Level						
Family						
Support	-0.23445	0.154	-0.555	0.0860	-1.5260	0.143
Worry	0.38644	0.294	-0.228	1,0006	1.3124	0.204

Based on linear regression test results, the distance factor to health facility, obtained information level, and knowledge is a factor that influences reception vaccine in advanced age with a p-value <0.05.

Discussion

Carry-on age is one vulnerable group with high morbidity moment COVID-19 pandemic. This is caused because her body's system immunity weakens with age (Silitonga et al., 2021). With increased age, then the body will experience drop consequences from the aging process like decreased organ function followed by decline immunity as protector working body not as strong as when still young. A study (Yuningsih, 2022) mentions that carry-on age suspected relates to the level of death. China's Centres for Disease Control reports that the Case Fatality Rate (CFR) in patients aged ≥ 80 years of 14.8%, with an overall CFR of 2.3%. This means CFR in patients carries an age taller than the overall CFR. More carry on again, level Dead carry on age affected by disease congenital (comorbid) owned. There were 7.3% of deaths in patients who had diabetes mellitus, 6.3% of patients with disease respiration chronic, 6% had disease hypertension, and 5.6%

of patients with cancer. Research results find that the distance factor to health facilities, level of obtained information and knowledge is a factor that influences reception vaccine. Research results in this are in line with the study (Aprilianingtyas, 2022), which discovered a connection between the level of knowledge and behaviour of COVID-19 prevention. The level of knowledge in question is in the form of knowledge about COVID-19, which includes symptoms, transmission, treatment, care, and efforts for COVID-19 prevention. Respondents who are not knowledgeable have possible behaviour COVID-bad prevention compared with respondents who know good.

Knowledge has a role important in determining the behaviour of someone. Knowledge will shape the next trust and give a base for making decisions that can influence somebody in behaviour. Someone who knows good about healthy behaviour will tend to do good behaviour. In other words, if somebody wants to increase behaviour healthy, then they need existence enhancement knowledge on Health (Sadif & Satnawati, 2022).

Lawrence Green's theory explained that there are influencing factors behaviour of somebody in the form of a predisposing factor, namely, knowledge. Somebody with good knowledge expected could apply good behaviour (Sari & Dewi, 2022). A study (Harianja & Eryando, 2021) explains that knowledge is a cognitive domain that becomes the basis for behaving healthily. According to (Ariestia, 2021), knowledge includes a very cognitive domain that takes effect in the shape of action. If application behaviour precautions are taken on positive knowledge and awareness behaviour, they will last long.

Distance is a one-factor supporter desire somebody could utilize service health determined by distance as a supporting factor. Remote access close chance utilize service health compared with the distance house far from Health facilities that serve covid-19 vaccine. Service health will be considered satisfying if the hope patient can fulfil, so that arises desire from the patient for a return visit to service health. One of them from the tangible dimension, namely in the form of Convenience reach location facility health (Muharry et al., 2022)

Access service health that has clear quality and standards, to ensure whole layer Public for getting service, because service becomes essential for ensuring aspect needs health or service excellent health needed including covid-19 vaccination (Ernawati et al., 2022). The distance can affect the frequency of on-site visits to service health (Society Health Centre and their networks); the more and more close distance the place stays elderly with centre service health, so more great amount visits the central service health that, as well otherwise. The elderly, on a variety of distances to each service health which also has an impact on costs of transportation and power for going through location facility health, also contribute to facility Preferred Health Service (Rahayu et al., 2021).

Various reasons become complications for the elderly to go to centres for vaccination, starting from not believing COVID-19, not believing in the vaccine, to being afraid to die after injecting the vaccine. That caused many factors, among them misinformation about COVID -19 being spread to all media (Syahbana et al., 2022).

Doubt vaccine, which refers to individuals who may refuse, postpone, or not be convinced with several vaccines, is a challenge to the success of the vaccination program (Agustarika & Mustamu, 2022). Health workers should convey information about the safety, effectiveness, manufacturing process, and method gift the COVID-19 vaccine. Including consequence side and preparation for overcoming it also need to be conveyed about must have vaccinations conducted by large for achievement immunity community (Kemala et al., 2021)

Various sources of information, from scientific proof to social media, give information contradictory to the covid-19 vaccine that confuses the Public general (Rumawas et al., 2022). COVID-19 vaccination may not be enough protection against disease in the elderly compared to young older adults, for example, in some influenza vaccines (Gunawan, 2021). More older adults are more likely to be infected with COVID-19, and if sick, they risk more death (Lubis et al., 2022). In older adults, weakness increases infection risk and decreases all form response immune. Besides

that, the older man has many diseases that enhance the possibility of infection During a pandemic (Dedu et al., 2022). seniors, including age susceptible to severe covid-19 infection, and become focus the main must upgrade immunity.

Not all public doubts affect vaccines; still, many aware societies will importance vaccination. People who do not believe in the vaccine are communities that still have low awareness and circulate wrong information related to the vaccine (Wilianarti & Wulandari, 2021). (Emaliyawati et al., 2021) say that misinformation about COVID -19, which has been spread to all media, is essential for power health and government to plan effective messages and policies before the vaccine is introduced.

Issue negative to COVID-19 vaccine makes the Public more afraid to participate in a vaccination program. The development of an accelerated vaccine has caused indecision between Public general (Elsi & Gusti, 2022). misunderstanding information makes the Public belief issues harmful about the vaccine. Like issue death, someone caused COVID-19 vaccine.

Destination from vaccine usually prevention infection, that is, sterilize immunity. However, the value of actually from an effective vaccine is preventing disease caused by infection. In the era of technology like now, people quickly look for information about health issues on various social media sites, like knowledge about vaccines. However, not all information was submitted Correct because many negative issues about the vaccine will make the Public more afraid to follow the vaccine (Yuliza et al., 2022).

Correct information about COVID-19 needs to be carried out by officials' health and government to provide correct information and not cause concern for society about COVID-19. The impact of wrong information will put a negative stigma on COVID-19.

CONCLUSION

The study found that the distance factor to facility health, level of obtained information, and knowledge is a factor that influences the reception of vaccine in advanced age. We recommend that the elderly, with all the limitations in access to the Covid-19 vaccine, can be facilitated by the government, including access to facility provider vaccination and access information. Future research could focus on the proper intervention on the problem enhancement knowledge, access information nor intervention for seniors who want to get vaccine however blocked by access distance to location vaccination.

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