

Does COVID-19 Significantly Affect the Quality of Life? The Impact Analysis of COVID-19 on Work, Financial, Quality of Worship, Emotional and Social Aspects

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Abstract

The COVID-19 outbreak spread rapidly throughout the country and threatened various aspects of life. This study aims to investigate the impact of COVID-19 on aspects of work, finance, quality of worship, mental health, and social. This study also aims to reveal the attitudes of the community towards government policies related to overcoming the impact of COVID-19 and prevention efforts that have been made by the community. An online cross-sectional study was conducted using a semi-structured questionnaire. A total of 1048 responses were received. Statistical analysis was performed using SPSS application version 22. The results show that the COVID-19 outbreak had an impact on community work which caused a decline in family finances, disrupted the quality of worship, caused mental health, and social disruption. This study also shows that 87.87% of participants agreed with government policies related to mitigating the impact of COVID-19 and 63% of participants always made prevention efforts suggested by the WHO or the government. The increasing cases of COVID-19 are likely to have a wider impact on people's lives. The community must be able to wisely anticipate the effects of COVID-19. The government must also be consistent in formulating and implementing policies that focus on alleviating public welfare problems.

Keywords

COVID-19, finance, quality of worship, mental health, social.

Introduction

The COVID-19 has been attracting the world's attention lately. Until July 27, 2020 a total of 15.785.641 people were infected with this virus, with 640.016 deaths spread across 206 countries (WHO, 2020b). Although this virus originated in Wuhan China, positive cases were most prevalent in America, followed by Brazil, India and Russian Federation (WHO, 2020b). This virus quickly spreads due to easy transmission between humans and anti-virus or clinically approved vaccines that have not been found (Chhikara et al., 2020; Ghinai et al., 2020; Shereen et al.,

2020). Because of the seriousness of this outbreak, on 30 January 2020 the World Health Organization (WHO) declared an international health emergency (Sohrabi et al., 2020; Zhang et al., 2020).

There are several studies on the impact of the COVID-19 outbreak on aspects of community life, for example mental health, economy or business, tourism, finance, social and others, but there is no specific description in the form of research data on the impact of COVID-19 of these aspects in Indonesia. Learning from the case that happened in Wuhan, when COVID-19 spread quickly, many companies stopped their business activities (Ayittey et al., 2020). This outbreak is also predicted to affect the global economy, especially for less developed countries (Mckibbin and Fernando, 2020).

Furthermore, the educational aspect was also affected by this outbreak; schools and colleges do not carry out classroom learning activities. Learning is carried out at home through online learning applications as well as access to relevant learning resources (JG, 2020; Schaffhauser, 2020; UNESCO, 2020). However, not all students are satisfied with this learning system (Caliskan et al., 2017). Another problem is the cancellation of mass gatherings in large numbers, such as the cancellation of the pilgrimage, and the cancellation of the Tokyo Olympics (Ahmed and Memish, 2020; Varun, 2020). The limitation of such associations certainly has a positive impact, namely suppressing the spread of the coronavirus (Lewnard and Lo, 2020; Memish et al., 2020). On the other hand, the policy has the potential to hamper the development of other sectors, such as tourism, politics, social etc. Mental health is another aspect that is most affected by this outbreak. Some studies revealed that the COVID-19 pandemic affected the psychological aspects of students (Cao et al., 2020). The COVID-19 affected the mental health of older adults (Yang et al., 2020). Anxiety is also experienced by health workers in charge of treating patients with symptoms of Covid-19 (Wang et al., 2020).

Next is the work aspect; workers in the four sectors most affected by this outbreak and experienced a decline in production were those working in the food and accommodation sector (144 million workers), retail and wholesale (482 million), service and business administration (157 million), and manufacturing (463 million) (Clarke, 2020). Workers are faced with the risk of dismissal due to lack of income for the company (Mufti, 2020). The problem is most felt by informal workers who earn daily income, so social assistance is needed by them (Blofield et al., 2020). Especially for civil servants and some company employees, work can be done at home (work from home), but for freelance workers such as servants and migrant workers, they can lose their jobs or reduce their salaries because professions such as restaurant waiters cannot work from home; they must stop working during the corona virus outbreak (Yue et al., 2020). According to Ilo, " Everywhere in the world or in any sector, this outbreak has a dramatic impact on the world's workforce" (Clarke, 2020).

The policy of Large-Scale Social Limitation forms the basis for the issuance of instructions from the Indonesian Ministry of Religion and respective religious authorities to carry out worship at home or online (Powell, 2020). The Council of Churches in Indonesia (CCI) has developed an online service to help its followers worship at home (Bhwana, 2020; JP, 2020a). In addition, Muslims are encouraged to pray at home, as well as Eid prayer and tarawih prayers in the month of Ramadan (Arbi, 2020; JP, 2020b; Mcbeth, 2020). Several major mosques in the world are also closed to prevent the spread of the COVID-19 virus (Ibrahim, 2020).

In this study, the writers analyzed in detail the impact of the COVID-19 outbreak on aspects of work, financial, Quality of Worship, emotional (psychological), and social on Indonesian society. The writers also surveyed community responses to government policies related to preventing the spread of the COVID-19 outbreak. These policies include: Large-scale Social Restrictions; an appeal not to return to their hometowns; an appeal to work and study from home; electricity cost relief only for 450 VA and 900 VA subsidies; appeal from religious authority to worship at home; policies regarding the beneficiaries of the Hope Family Program to 10 million recipient families; card of nine basic commodities given to 20 million recipients; pre-work card in the form of post-training incentive of Rp. 600.000 for 4 months; credit relaxation under Rp 10 billion for Micro, Small and Medium Enterprises; and guaranteeing the availability of staples, followed by ensuring the purchasing power of the people (EBTKE, 2020; Kemdikbud, 2020; Kemensetneg, 2020a, 2020b; Nugraheny, 2020; Setkab, 2020a, 2020b).

The writers also surveyed community efforts to prevent transmission of COVID-19. Based on WHO's recommendations, maintaining one's own health and that of others can be done by: washing hands regularly with soap and alcohol; maintain a minimum social distance of 1 meter from others; avoid to touch eyes, nose and mouth; covering mouth and nose with bent elbow or tissue when cough or sneeze; if fever, cough or difficulty breathing

stay at home first then contact your local health facility; and follow advice and information from health service providers (WHO, 2020a). The writers add several other suggestions including: using a mask when sick or when close to sick people, cleaning items with disinfectant and staying at home (CDC, 2020; UNICEF, 2020).

Based on the problems outlined above, the objectives of this study are to find out: 1) the impact of COVID-19 on aspects of work, financial, Quality of Worship, emotional (psychological), and social; 2) the community responses to government policies related to COVID-19 countermeasures; and 3) the efforts that have been made by the community to prevent the spread of COVID-19. The results of this study are expected to be utilized by the government to formulate more concrete policies related to the handling of the COVID-19 outbreak based on needs analysis at the community level.

Methods

Study Design and Participants

An online cross-sectional study was conducted using a semi-structured questionnaire. A total of 1048 responses were received. The writers distributed an instrument online starting from April 2 to 12, 2020 using the Google form application. The questionnaire was distributed through the WhatsApp and Facebook applications. When participants accept and click on the link, a series of questions will appear, starting from the general identity (without mentioning the name); questions about the impact of COVID-19 on aspects of life; questions about participant responses to government policies related to COVID-19 countermeasures; as well as questions about efforts that have been made by the community to prevent the spread of COVID-19. This questionnaire was anonymous so that the data generated is more reliable.

Instrument

The questionnaire developed by the writers consisting of 3 parts: 1) to find out the impact of COVID-19 on aspects of work consisting of 2 items, 3 items financial impact, 3 items Quality of Worship impact, emotional impact (psychological) 3 items, and social impact 1 item. The writers also added general questions related to concerns about being infected with COVID-19, the concern of people closest to being infected with COVID-19 and fears of lack of food and medicines. These aspects are assessed using a 3-point Likert scale (Always, Sometimes and Never); 2) the public response survey on the Indonesian government's policies related to the prevention of COVID-19 consists of 10 items with the choice of agree and disagree; 3) the survey of efforts that have been made by the community to prevent COVID-19 consists of 11 items which are summarized from WHO's recommendations, as well as other references (CDC, 2020; WHO, 2020b). These items are arranged using a 3-point Likert scale (always, sometimes and never).

Data analysis

The data were analyzed using SPSS 22.00. Descriptive statistics was used to find out: 1) how the impact of COVID-19 on work, financial, Quality of Worship, emotional (psychological), and social aspects; 2) public response to government policies related to the prevention of COVID-19; and 3) efforts to prevent COVID-19 carried out by the community. Furthermore, statistical analysis using the Kruskal-Wallis technique was used to determine differences in efforts that have been made to prevent COVID-19 based on educational level variables.

Results

The impact of the COVID-19 on Work, Financial, Quality of Worship, Social and Emotional Aspects

Table 1 explains that the COVID-19 epidemic affected all aspects of life that were the focus of this study. 1) Work; 56.1% of respondents considered this outbreak to prevent them from working, then 60.7% of respondents felt their work satisfaction was disrupted. 2) Financial; there were 53.6% of respondents stated that their income was reduced, 47.6% of respondents felt that the COVID-19 outbreak affected the financial security of the family, so that it affected 41.5% of respondents having difficulty meeting their needs. 3) Quality of Worship; only 19.8% of respondents thought this outbreak affected the quality of worship, 31.7% of respondents felt hampered to places of worship, and 32.5% of respondents thought COVID-19 disturbed peace and harmony in life. 4) Social; 49.7% of respondents claimed that the COVID-19 pandemic disrupted social relations with others (family and friends). 5) Emotional (psychological). On the emotional aspect, 20.8% of respondents had difficulty understanding themselves because of the COVID-19 outbreak, 22.5% of respondents said that COVID-19 prevented them from overcoming life's problems or challenges, and 19.8% of respondents claimed that the COVID-19 outbreak disturbed the psychological / mental health aspects. 6) General questions; 33.1% of respondents had difficulty concentrating

because of the COVID-19 outbreak, 23.2% of respondents found it difficult to think of generating ideas that could be applied to themselves or to groups because of the COVID-19 Pandemic, only 11.1% of respondents experienced sleep disturbance, half of respondents worried about being infected with COVID-19 (52.6%), 38% of respondents worried about dying due to this outbreak, the majority of respondents were worried if their relatives or close relatives were infected with COVID-19 (74.9%) , 46.3% were worried about lack of food and medicines (including masks, hand sanitizers and disinfectants), 38% of respondents knew how to prevent COVID-19, the rest 56.5% had little understanding and 5.5% did not understand how to prevent this outbreak.

Table 1: The Frequency and Percentage Analysis of the Impact of the COVID-19 Outbreak on Work, Financial, Quality of Worship, Social and Emotional Aspects

No	Items	Always		Sometimes		Never	
		Total	%	Total	%	Total	%
WORK							
1	The COVID-19 epidemic keep me from working	588	56.1	371	35.4	89	8.5
2	My job satisfaction is disrupted because of the COVID-19 outbreak	636	60.7	339	32.3	73	7.0
FINANCIAL							
3	My income is reduced because of the COVID-19 epidemic	562	53.6	262	25.0	224	21.4
4	The COVID-19 epidemic affected my family's financial security	499	47.6	416	39.7	133	12.7
5	Financial difficulties due to the COVID-19 outbreak made it difficult to meet daily needs	435	41.5	436	41.6	177	16.9
QUALITY OF WORSHIP							
6	The COVID-19 pandemic affected the quality of my worship	207	19.8	332	31.7	509	48.6
7	The COVID-19 pandemic prevented me from going to a place of worship	332	31.7	453	43.2	263	25.1
8	The COVID-19 pandemic disturbed peace and harmony in my life	341	32.5	435	41.5	272	26.0
SOCIAL							
9	COVID-19 interferes with my social relationships with others (family and friends)	521	49.7	418	39.9	109	10.4
EMOTIONAL (PSYCHOLOGICAL)							
10	Difficulty in understanding one's own situation because of the COVID-19 Pandemic	218	20.8	536	51.1	294	28.1
11	COVID-19 prevented me from overcoming life problems or challenges	236	22.5	564	53.8	248	23.7
12	The COVID-19 pandemic disturbed my psychological / mental health aspects	207	19.8	504	48.1	337	32.2
GENERAL QUESTIONS							
13	Difficulty concentrating because of the COVID-19 Pandemic	347	33.1	536	51.1	165	15.7
14	Difficulty in thinking generates ideas that can be applied to self or groups because of the COVID-19 Pandemic	243	23.2	604	57.6	201	19.2
15	The COVID-19 pandemic disturbed my sleep quality	116	11.1	336	32.1	596	56.9
16	Worried about being infected with COVID-19	551	52.6	416	39.7	81	7.7
17	Worried about dying from infection with COVID-19	398	38.0	400	38.2	250	23.9
18	Worried if family or friends become infected with Corona / COVID-19	785	74.9	227	21.7	36	3.4
19	Worried about lack of food and medicine because of COVID-19	485	46.3	448	42.7	115	11.0
20	Understand about COVID-19 and how to prevent it	398	38.0	592	56.5	58	5.5

Public Response to Government Policies Regarding the Mitigation of COVID-19

Table 2 shows that the majority of people agreed with government policies related to the prevention of the COVID-19 epidemic. There are 93.2% of respondents agreed with the Large Scale Social Limitation policy, 86.6% of respondents agreed to the government's appeal not to return to their hometowns, 87.9% of respondents agreed to the government's appeal for work and learning from home, 84.5% of respondents agreed the electricity fee waivers were only for 450 VA and 900 VA subsidies, 66.5% of respondents agreed with the religious authority's call to worship at home, 95.2% of the respondents agreed on policies regarding beneficiaries of the Family Hope Program, 93.6% of respondents agreed nine staple card program (nine-basic necessities), 89.3% of respondents agreed to the pre-work card program in the form of post-training incentives of Rp. 600.000 for 4 months, 90% of respondents agreed on a policy of granting credit relaxation under Rp. 10 billion for Micro, Small and Medium Enterprises, and 91.9% of respondents agreed that the government guaranteed the availability of staples, followed by ensuring the purchasing power of the people, especially the lower classes.

Table 2: The Survey of Community Responses to Government Policy

No	Items	Agree		Disagree	
		Total	%	Total	%
1	Large-scale Social Limitation Policy	977	93.2	71	6.8
2	Government's appeal not to return to hometown	908	86.6	140	13.4
3	Government appeals to work and learn from home	921	87.9	127	12.1
4	Electricity fee relief only for 450 VA and 900 VA subsidies	886	84.5	162	15.5
5	Appeal from religious authorities to worship at home	697	66.5	351	33.5
6	Policy regarding beneficiaries of the Family of Hope Program, which is provided to 10 million recipient families	998	95.2	50	4.8
7	The basic needs card, given to 20 million recipients, was given Rp 200.000 per person per month	981	93.6	67	6.4
8	The Pre-Employment Card is a post-training incentive of Rp. 600.000 for 4 months	936	89.3	112	10.7
9	Providing credit relaxation of under Rp 10 billion for Micro, Small and Medium Enterprises	943	90.0	105	10.0
10	Ensuring the availability of staples, followed by ensuring the purchasing power of the people, especially the lower classes.	963	91.9	85	8.1

Table 3: Efforts that have been made by the community

No	Items	Always		Sometimes		Never	
		Total	%	Total	%	Total	%
1	Clean your hands regularly and thoroughly by using hand sanitizer and soap	808	77.1	230	21.9	10	1.0
2	Maintain a distance of at least 1 meter between you and anyone who coughs or sneezes (Psychical Distancing)	697	66.5	324	30.9	27	2.6
3	Avoid to touch the eyes, nose and mouth	505	48.2	485	46.3	58	5.5
4	When Sneezing and Coughing cover with the elbows or tissue then the tissue is discarded	727	69.4	281	26.8	40	3.8
5	If you have a fever, cough or difficulty breathing stay at home first then contact your local health facility	440	42.0	298	28.4	310	29.6
6	Follow advice and information from health care providers	797	76.0	219	20.9	32	3.1
7	Use a mask when sick or when close to sick people	754	71.9	246	23.5	48	4.6
8	Avoid Direct Interactions with people (touching, shaking hands)	651	62.1	343	32.7	54	5.2
9	Avoid contact with sick people	778	74.2	217	20.7	53	5.1
10	Clean goods with disinfectant	428	40.8	478	45.6	142	13.5
11	Stay at home	679	64.8	322	30.7	47	4.5

Efforts by the Community to Prevent the Spread of COVID-19

Table 3 shows that the efforts made by the community to prevent the spread of COVID-19 have been maximized. There are 77.1% of respondents clean their hands regularly and thoroughly using hand sanitizers and soap; 66.5% of respondents maintain a distance of at least 1 meter between anyone who coughs or sneezes (Psychical Distancing); 48.2% of respondents avoid touching their eyes, nose and mouth; 69.4% of respondents said when sneezing and coughing covered with elbows or tissue then the tissue was thrown away; 42% of respondents said if they have fever, cough or difficulty breathing stay at home first then contact the local health facility; 76% of respondents followed advice and information from health care providers, 71.9% of participants used masks when sick or when close to sick people, 62.1% of respondents avoided Direct Interactions with people (touching, shaking hands), 40.8% of respondents cleaned goods with disinfectants and 64.8% of respondents chose to stay at home.

Table 4 explains the results of data analysis using the Kruskal Wallis technique to find out the differences in efforts that have been made by the community to prevent the COVID-19 outbreak based on educational level variables. The analysis results show a significance of 0,000, thus there are differences in the efforts made by the community in terms of education level.

Table 4. The results of data analysis using Kruskal Wallis

Variables	Category	M (SD)	Statistics	P
Different efforts have been made by the community based on their level of education	Never attended school	26.9 (5.7)	32.588	.000
	Elementary School	28.3 (4.5)		
	Middle School	26.9 (4.7)		
	Senior High School	27.5 (4.2)		
	3-year diploma	25.5 (5.2)		
	Bachelor degree	26.4 (5.6)		
	Postgraduate	29.6 (2.9)		
	Doctor	28.2 (3.7)		

Discussion

The COVID-19 epidemic has affected many aspects of people's lives in the world. For the aspect of work, the results prove that the COVID-19 outbreak is preventing people from working. Participants consisting of traders, drivers, laborers, farmers and fishermen, got a significant impact from this outbreak. For example traders, where a decrease in buyers due to social distancing policies. Especially for regions that implement Large-Scale Social Restrictions such as Jakarta, it is very difficult for online divers because they are not allowed to carry passengers (Adjie, 2020).

Almost all countries in the world today have a work from home policy for workers who can complete their work at home. Some studies prove that social distancing, one of which through work from home policies can reduce the spread of disease (Ahmed et al., 2018). Work from home is becoming an increasingly popular form of work in cities, driven by technological advances, lifestyle preferences, demographic changes and the rapid evolution of the knowledge economy (Zenkteleter et al., 2019). However, not all work can be done at home, especially those related to people directly, such as restaurant waiters, traders, drivers, and others. Although working from home is beneficial for some workers, there are studies that reveal that team performance becomes worse when many coworkers work from home (Lippe and Lippényi, 2020).

Obstructed employment will certainly have a direct impact on financial decline, especially for informal workers. Quite a lot of employees are fired or laid off (unpaid leave). There are 280 or 26.7% of respondents experienced a decrease in income, even though they still have to meet their living needs. This study proves that financial problems due to COVID-19 are more experienced by people earning <59.1 million (below per capita income, around \$ 3,700 per year). Respondents who earn less than 59.1 million are generally those who work as small traders, drivers, servants, laborers, farmers, fishermen, honorary employees. Whereas people who earn > 59.1 million (above per capita income) generally do not have a problem in decreasing income. They include working as employees in companies, employees of State-Owned Enterprises, middle to upper-scale business owners and government employees who are paid regularly. For small entrepreneurs (Micro and Small and Medium Enterprises) there is a decrease in the demand for goods that impacts the difficulty of employers to pay employee salaries. As a result, several employees were temporarily rested (unpaid leave) (Amindoni, 2020). Based on the scenario compiled by the Indonesian government, for example fishermen and farmers in West Kalimantan Province will experience a decline in income of up to 34% with endurance from October to November. Furthermore, a revenue reduction of up to 40% for motorcycle taxi drivers and public transportation drivers in North Sumatra Province (Prayogo, 2020). This

financial problem is not only experienced by the people of Indonesia, but people in other countries. a survey conducted by APA, as many as 57% of adults in America worry that COVID-19 has a negative impact on their finances (Canady, 2020).

This outbreak also affected the quality of community worship. One type of large worship that was not performed this year is the Umrah (MEE, 2020). Umrah is a worship that gathers a large number of people. Studies reveal that this worship has a great risk for the spread of infectious diseases, such as pneumococcal and meningococcal disease (Yezli, 2018; Yezli et al., 2019). There is some evidence that the place of worship is a place of distribution of COVID-19. For example hundreds of people who took part in the Tabligh Akbar activity at the Sri Petaling Mosque in Malaysia were infected with COVID-19 (Reuters, 2020). The Indonesian government continues to urge people to carry out worship at home. Some worship services can be held online, where each religious authority compiles guidelines for implementing worship online (TUCoC, 2020). As a country with a religious society, this plague certainly has a significant impact on the quality of worship. However, eliminating large mass gatherings in places of worship will have a positive impact on the reduction in the spread of COVID-19.

The analysis also revealed that COVID-19 affects the emotional aspects (psychological condition). Some researchers conducted studies on the impact of COVID-19 on the psychological condition of the community, especially anxiety. For example studies that reveal students' anxiety in dealing with the COVID-19 pandemic (Cao et al., 2020). A study revealed that public anxiety in dealing with this outbreak in the high category, even they need psychological help to overcome their mental health problems (Roy et al., 2020). This anxiety disorder is often under-realized and not quickly dealt with (Wedekind and Bandelow, 2005), so it can have an impact on quality of life and psychosocial functioning (Mendlowicz and Stein, 2000). The public is expected to overcome excessive anxiety towards COVID-19 by using appropriate coping strategies (Kasi et al., 2012; Pringle, 2020).

The writers also looked at the impact of COVID-19 on social aspects. 49.7% of respondents stated that COVID-19 interfered with their relationship with others. Social distancing policy is a major factor why social relations can be disrupted. However, whatever the conditions, every community in the world must follow this policy. So far social distancing is an effective way to stop the spread of disease (Sen-Crowe et al., 2020). Social distancing is not to cut off relations between people. Communities can still maintain physical distance while staying connected socially, emotionally, and spiritually (Sen-Crowe et al., 2020).

The Government of Indonesia has implemented several policies related to the prevention of COVID-19. The majority of people agree with the government policy. The only question where the percentage score is below 70% is related to the worship policy at home; there are still around 351 or 33.5% of respondents who disagree if worship is held at their respective homes. Every country in the world applies a policy of preventing the spread of COVID-19, there are the same policies but there are also different. Singapore implements several policies, one of which is the closure of workplaces and retail outlets unless needed to meet daily needs (STB, 2020). Regarding aspects of worship, Australia issued a policy during the Easter period, places of worship closed to the public; services are only broadcast by pastors and are streamed (AG, 2020). State and local governments of the USA have programs and offers to help those affected financially by the COVID-19 virus; The new federal law provides unemployment benefits for entrepreneurs and other workers, adds an additional allowance of \$ 600 per week, and offers other benefits (CareerOneStop, 2020; CFPB, 2020).

The majority of Indonesian people have made efforts to prevent the spread of COVID-19 in accordance with WHO recommendations or local health authorities. But specifically for the item "if you have a fever, cough or difficulty breathing stay at home first then contact your local health facility", there were 29.6% of respondents never did it at all. This can be attributed to the low awareness of the Indonesian people on health aspects (Mitra, 2012). Studies show that people tend to self-medicate when sickness which includes self-medication with modern and traditional / herbal medicines, rest, efforts without using drugs, and their combinations (Widayati, 2012). The low awareness of the community to utilize health facilities can be attributed to the low public perception of health itself (Napirah et al., 2016). Analysis results show that there are differences in the efforts made by the community based on education level variables. The finding does not conclude that people with high levels of education are better off than those with low levels of education. However, the high efforts that have been made by the Indonesian people to prevent the spread of COVID-19 indicate that the public's knowledge of the dangers of COVID-19 is quite good. Analysis shows that as much as 53.1% of respondents consider the information received as adequate.

Conclusion

The COVID-19 epidemic affected almost all aspects of people's lives. This outbreak prevents people from working, reduces income, disrupts the quality of worship, causes anxiety, emotional and mental health disorders and prevents social relations between humans. The Government of Indonesia has taken various measures to mitigate and reduce the impact of COVID-19 on aspects of life, such as social distancing policies, policies in economic and financial aspects, public transportation, financial assistance, subsidies on electricity costs, worship, and others. The majority of people agree with these policies. Awareness of the importance of preventing the spread of COVID-19 has also been maximally carried out by the community. This behavior if done correctly and consistently will inhibit the spread of COVID-19. But the most important thing is finding the disease vaccine as soon as possible.

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