

## **SOCIAL MOBILITY DURING THE COVID-19 PANDEMIC WITH THE SOCIAL HEALTH DETERMINANT APPROACH: A LITERATUR REVIEW**

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### **ABSTRACT**

Studies about the link between social mobility and the Covid-19 pandemic in Indonesia uses the social determinants of health approach. Social determinants of health discuss individual health which is influenced by several factors located in various layers of the environment, namely behavior and lifestyle, social and community influences, structural factors, as well as conditions and policies of socio-economic, cultural, political, and physical environment. This systematic review was made based on PRISMA with secondary data to previous journals and articles with specific keywords. A total of 28 study articles fulfilled the inclusion criteria and were analyzed. The results of this systematic reflection show that social mobility during the Covid-19 pandemic was influenced by factors that influenced the social determinants of health, namely behavior and lifestyle, social and community influences, structural factors, as well as socio-economic, cultural, political conditions and policies, and the physical environment. All of these factors will affect people's social mobility and will have an impact on public health during the Covid-19 pandemic.

**Keyword : social mobility, covid-19, social health determinant, mobility, systematic review**

### **INTRODUCTION**

During the pandemic, there are many changes and movements that hit society. These changes and movements begin with education, work, income acquisition, meeting, worship, etc. (Harahap, 2020). These changes and movements occur due to the Covid-19 virus. Covid-19 is a virus that can spread or be transmitted through the air (airborne disease). One of the activities that can facilitate the spread of this virus is mobility. Therefore, the Indonesian government issued a policy to limit or reduce mobility (Yazid, Lie, and Jovita, 2020). The policy issued by the government has an impact on the loss of

work and financial decline due to the reduction in labor thus can cause a decline in social mobility (Wati, 2021).

Social mobility is a movement of transfer from one social class to another social class. Mobility is defined as an increase and decrease in terms of social status and income aspects that can be experienced by several individuals or all group members. Mobility is influenced by social determinants of health (Narwoko, 2004 in Harahap, 2020). Social mobility can occur influenced by several factors, such as demography, social status, political situation, the desire to see other areas, and economic conditions. During the Covid-19 pandemic, the factor that tends to influence social mobility is the economic situation. The economic condition of the community during a pandemic tends to decline. Many people have experienced reduced wages and lost their jobs due to the pandemic. A decrease in the family's economic status will also have an impact on the health status of the family. Reduced family income can lead to decreased family health. This is due to the lack of family income so that families also tend to pay less attention to the health condition of the family and focus more on fulfilling the economy. People who experience symptoms of the disease tend to choose private treatment rather than coming to health facilities due to the high number of Covid-19 cases and the lack of family income.

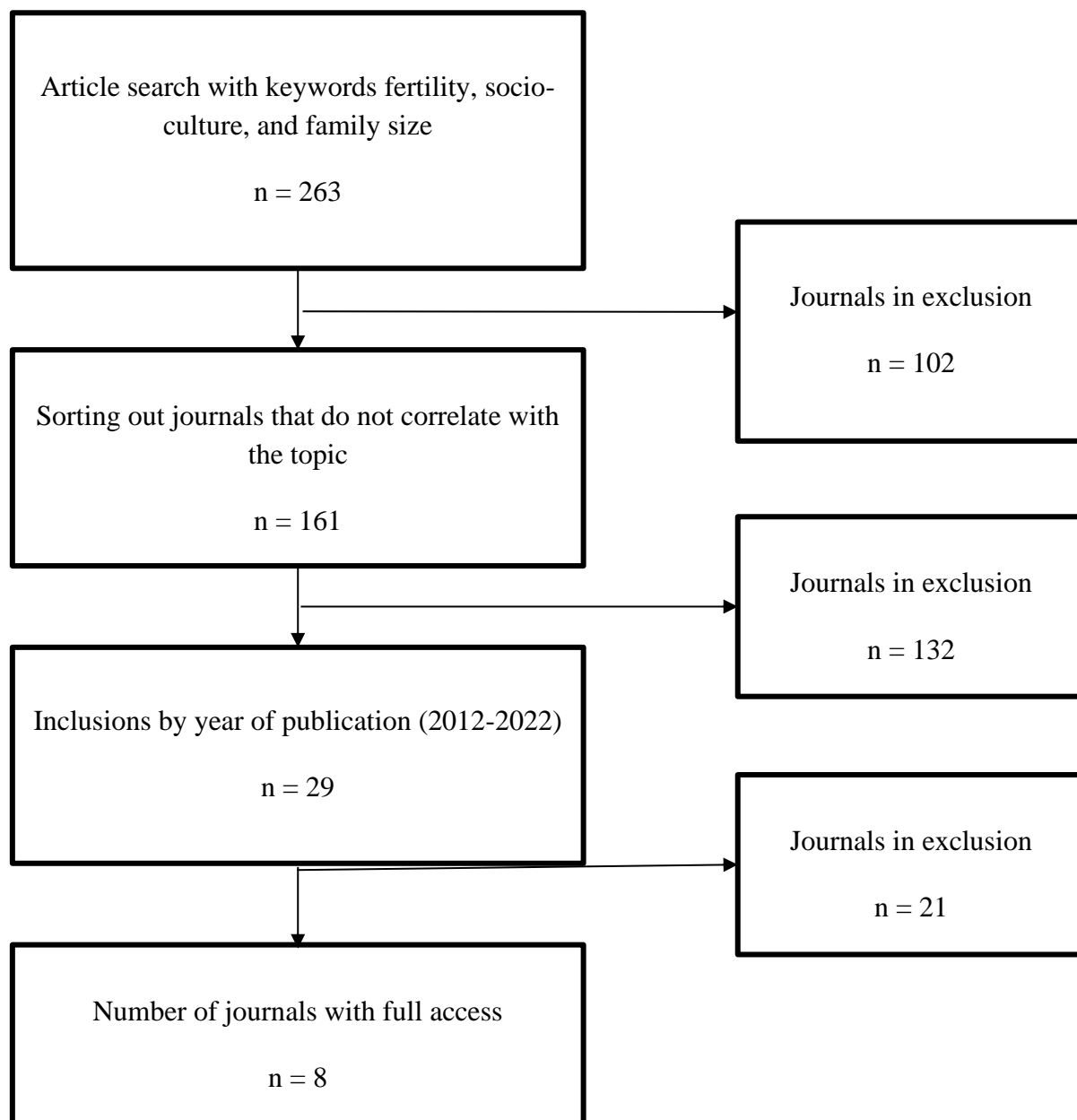
According to WHO (2022), social determinants of health are a condition in which people are born, grow, live, work, and old, including the conditions of the health system. Health is influenced by several factors located in various layers of the environment, namely behavior and lifestyle, social and community influence, structural factors, as well as the conditions and policies of the socioeconomic, cultural, political, and physical environment (Dahlgren and Whitehead, 1991 in Laksono & Rachmawati, 2017). These factors will later affect the social mobility of the community. Therefore, this literature review aims to find out more clearly related to social mobility during the Covid-19 pandemic using the social determinant of health approach in the community.

## METHODS

The Researcher designed this review literature study following the Choice of Reporting Items for Systematic Review Statements and Meta-Analys (prisma). The Researcher identified studies by searching on Google Scholar, Pubmed, ScienceDirect, and Science in September and October 2022 for articles published in Indonesian and English languages with the time span from 2012 to 2022. The research strategy uses keywords that have been set. The keywords used are social mobility, covid-19, social health determinant, and mobility.

The researcher uses inclusive criteria to determine qualified articles: 1) Complete scientific articles, 2) English / Indonesian languages, 3) published in the range of 2012 to 2022, 4) Discusses related to social mobility during the Covid-19 pandemic using a social determinant of health approach. As for the exclusion criteria, the researcher excludes

incomplete scientific articles that only display abstracts and articles that are published before 2012. The researcher reviewed all of the complete scientific articles from all abstracts that meet the requirements. The search for scientific articles was carried out during September 2022. Based on the inclusion criteria, the number of articles we found was 28 articles.



**Figure 1.** Studies identification process

## RESULT

No.	Author (year)	Title	Research Design	Result
1.	Ghiffari, Rizki Adriani (2020)	Dampak Populasi dan Mobilitas Perkotaan terhadap Penyebaran Pandemi Covid-19 di Jakarta	Pearson Correlation	Mobility within the city and mobility from outside the city, has a moderate effect on the spread of the COVID-19 disease. Meanwhile, the variable human development index, population growth, vulnerable age population, poor population also have a low effect on the spread of this disease. It requires the ability to detect and respond to large-scale disease outbreaks, as well as effective restrictions on population mobility to control the spread of this disease.
2.	Harahap, Siti Rahma (2020)	The Process of Social Interaction on The Pancemic Covid 19	Qualitative methods	Knowledge of Social Interaction and Social Process is something that can make a person gain a dynamic view of people's lives both individually and in groups. It is undeniable that these two things have structural and processual aspects. Where there are social groups, culture, social institutions, stratification, power which have a certain degree of dynamics which give rise to different patterns of behavior and life, especially in situations and circumstances which increasingly have a large impact and influence on the real life of society. Today's society is faced with a situation where structurally and processually changes

				<p>affect the pattern of life. The Covid 19 Virus Pandemic has actually been able to shift the civilization of people's lives which affect social interaction and social processes. Both in terms of culture, the wheels of the organization of social institutions, leadership patterns in controlling power all have an effect due to the Covid 19 virus outbreak pandemic.</p>
3.	<p>Irwan, Mopangga, A., Mokodompis, Y. (2021)</p>	<p>Influence of Beliefs and Attitude to 5M Behavior (Wearing Mask, Washing Hands, Keeping Your Distance, Avoiding Groups, Reducing Mobility) During The Covid-19 Pandemic</p>	<p>Cross Sectional</p>	<p>Based on the results of the study there is an influence of people's beliefs and attitudes towards 5M behavior (wearing masks, washing hands, keeping distance, staying away from crowds, and reducing mobility). There are still many people in Dungaliyo Village who don't believe in the existence of Covid-19 because they believe that Covid-19 is not a serious virus because the symptoms it causes are common symptoms or symptoms that existed before the existence of this coronavirus. Most of the people in Dungaliyo Village have a negative attitude with a lack of 5M behavior. One example of a negative attitude is not keeping their distance because they feel bad staying away from other people, and seeing other people not keeping their distance from each other so that makes them also not keeping their distance and not doing the 5M behavior. People are more likely to be negative by not adhering to health protocols and tend not to care about the data on Covid-19 cases, which are increasing day by day. The reason they don't use masks when leaving the house and not comply with other</p>

				health protocols is that there are no direct sanctions or strictness from the government regarding the health protocol itself.
4.	Wati, Mei Kumala (2021)	Social Assistance for Labour in the Middle of Covid-19 Pandemic: An Analysis to Government's Social Policy	Descriptive Methods	Based on the results of the study, it can be concluded that most of the people who have experienced restrictions on social mobility during COVID-19 in the Cilacap Selatan sub-district area are mostly late adults, namely ages 36-45 years and the majority are female. Respondents based on education indicated that the highest education was elementary school and respondents based on work indicated that most of the respondents did not work. Most of the people who had restricted social mobility during COVID-19 in the South Cilacap sub-district experienced moderate anxiety, followed by severe anxiety, then mild and moderate anxiety.
5.	Joyosemito, I. S., Nasir, N. M. (2021)	Gelombang Kedua Pandemi menuju Endemi Covid-19: Analisis Kebijakan Vaksinasi dan Pembatasan Kegiatan Masyarakat di Indonesia	-	The model demonstrates that the second wave of the COVID-19 Pandemic in Indonesia is expected to reach its peak at the end of July and in early August 2021 active cases will begin to decline. The magnitude of the decline in active cases in the second wave will take more than a month to reach the peak level of the first wave in early September. At the end of December 2021 the COVID-19 pandemic in Indonesia was under control with active case sizes of 6,406 (min), 10,150 (mean) and 14,432 (max). Therefore, it is estimated that the COVID-19 pandemic in Indonesia

				will turn into endemic in mid-2022. Vaccinations must be consistently carried out according to targets without the need to choose the type of vaccine used in order to create herd immunity and help the process of controlling COVID-19. Meanwhile, the policy of limiting community activities through PPKM can continue to be implemented, especially in areas with high cases of COVID-19 until the situation is under control. Meanwhile, the implementation of the protocol.
6.	Yazid, S., Lie and Jovita, L. D. (2020)	Dampak Pandemi terhadap Mobilitas Manusia di Asia Tenggara	-	The Covid-19 pandemic has resulted in changes in people's mobility patterns around the world, including in Southeast Asia. As an effort to flatten the curve, people are now being asked to do their activities at home and not make unnecessary trips. So far this effort is still considered as the most effective effort. Social restrictions are expected to minimize the transmission of the Covid-19 virus from human to human. However, on the other hand, the handling which is more focused on the citizens of their respective countries makes migrant workers and refugees the most vulnerable group. The pattern of mobility of migrant workers and refugees has also changed. As a result of Covid-19, the number of migrant workers returning to their countries has increased, while refugees have found it increasingly difficult to obtain asylum protection. Reflecting on the phenomenon of labor migration in Southeast Asia, the mobility of

				migrant workers abroad is generally based on economic factors and is a solution for the country in overcoming the problem of unemployment. With the current conditions, it can be said that problems that have previously begun to find solutions, will later return to previous conditions and may even get worse than before. Especially if you remember when the borders began to open, it will still take time for people's mobility to return to normal conditions, especially with the fear of a new wave of transmission of Covid 19.
7.	Retnaningsih, Hartini. (2020)	Social Assistance for Labour in the Middle of Covid-19 Pandemic: An Analysis to Government's Social Policy	-	The Covid-19 pandemic has impacted most Indonesians' lives, including workers. Many people have decreased income and even lost their jobs. It will affect the quality of their life, and in the end, it will reduce their level of welfare. The government has made various social policies to help people who are affected by the Covid-19 pandemic. The goal is, people can survive in the middle of a pandemic that erodes their quality of life. One type of social assistance provided by the Government is social assistance for workers. However, workers, in this case, are limited to those with an income of IDR 5 million and below, and their status is registered in the Institution of Social Security Employment. This paper examines this matter with a qualitative approach and is based on a literature study. The results show that the social assistance provided by the Government still does not fulfill the



				<p>sense of social justice for other workers, that is informal workers with lower income and are not registered in the Institution of Social Security Employment. This paper recommends that in the future, the Government should also care for informal workers who need social assistance more than formal workers who have a clear status and income. Through the budget and control function, the Indonesian Parliament should encourage the Government to make social policies that fulfill a sense of justice for all workers affected by the Covid-19 pandemic.</p>
8.	Vermonte, P., & Wicaksono, T.Y. (2020)	Karakteristik dan Persebaran Covid-19 di Indonesia: Temuan Awal	-	<p>This article found that the proportion of foreign nationals in the first week was relatively high, but over time this proportion has decreased. This initial evidence indicates that the spread of the virus through foreign nationals, as previously suspected, was relatively limited. The low proportion of COVID-19 sufferers in Bali seems to confirm that the transmission of COVID-19 disease originating from foreigners to the local population is relatively not as big as initially thought. Although it should be noted that the low number of tests in Bali also very likely explains the low proportion of COVID-19 sufferers in this province. The largest proportion of COVID-19 patients in Indonesia are in the 50-59 year age range, which as a whole amounts to 20.9 percent of the total positive cases of COVID-19. However, there are variations between provinces. Figures in this age range</p>

				are consistent with risk factors found in many countries. The delay factor in testing specimens and reporting until the appearance of symptoms from the time of exposure to the COVID-19 virus makes it difficult to estimate the distance between exposure to the virus and the manifestation of the initial symptoms. Based on available data, from the emergence of positive cases of COVID-19 to the spread of clusters, the time interval from exposure to the virus to initial symptoms is estimated to be shorter, at least shorter than 10 days. This figure is shorter than the findings in Italy.
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**Table 1.** Literature Research Result

## DISCUSSION

The social determinants of health (SDH) are the non-medical factors that influence health outcomes. They are the conditions in which people are born, grow, work, live, and age, and the wider set of forces and systems shaping the conditions of daily life. These conditions are shaped by the distribution of money, power and resources at the global, national and local levels. Social determinants of health are largely responsible for inequities in health-unjust and should be avoided differences in health status, both seen within a country and between countries (Laksono & Rachmawati, 2017).

Dahlgren and Whitehead (1991 in Laksono & Rachmawati, 2017) put forward a "Rainbow Model of Social Determinants of Health" which states that individual health is influenced by several factors located in various layers of the environment, namely behavior and lifestyle, social and community influences, factors structural factors, as well as socio-economic conditions and policies, culture, politics, and the physical environment.

Individual behavior and lifestyle can improve or harm health, in this case, namely the choice to exercise mobility. Mobility is defined as an increase or decrease in terms of social status and income that can be experienced by several individuals or all group members (Narwoko, 2004 in Harahap, 2020). Social mobility occurs when a social class

moves to another social class. An open social class society is a society that has a high level of mobility. Communities with closed social classes are people who have a low level of mobility (Horton et al., 1992 in Kamilatunnisa, 2018).

During the Covid-19 pandemic, various changes occurred from various sectors in society, including the mobility sector. Changes that occur are due to the ease of spreading or transmitting the Covid-19 virus through the air (airborne disease) so that the mobility sector also experiences changes because it can accelerate the spread of the Covid-19 virus.

In terms of behavior and lifestyle, many things influence a person's decision to do mobility. The decision to move is influenced by age and exposure to information about Covid-19. People who are in a relatively young age group have a high level of mobility (Vermonte & Wicaksono, 2020). This high level of mobility is influenced by information that this age group is relatively not a vulnerable and dangerous group if exposed to the Covid-19 virus. Most of the relatively young age group are in good health without any co-morbidities that could worsen their health condition when exposed to the Covid-19 virus. In addition, the relatively young age group has a stronger immune system than the older age group. The amount of information exposure also influences the decision to do mobility. A lot of exposure to information allows a person to get more information about the Covid-19 virus such as symptoms, spread, prevention, and so on so that it is possible to identify symptoms in oneself and those around them, prevent or confirm cases to the hospital.

The belief that one will not contract the Covid-19 virus also influences one's decision to move. The results of the BPS survey during September 2020 showed that there were still people who believed or were very sure that they would not contract Covid-19. This could have an impact on neglecting 5M (one of which is reducing mobility) (Irwan, et al., 2021). This belief can arise from feeling healthy and strong, not belonging to a vulnerable group, not many positive cases or deaths due to the Covid-19 virus in the surrounding environment, etc.

The fear that individuals have, especially in vulnerable groups and having co-morbidities with a higher risk of contracting Covid-19 and having a more severe impact, makes these groups choose to reduce mobility. People who live with vulnerable or dangerous groups and live with health workers also choose to reduce mobility. Besides that, friendship and family patterns that ignore the Covid-19 pandemic also make someone choose to keep mobilizing.

In addition to behavioral and lifestyle factors, social and community factors also influence a person's decision to mobilize. Social and community influences include community norms, social values, community institutions, social networks, etc.

Many factors influence the incidence of mobility when associated with social and community influences. The fear of being seen as an anti-social person, not wanting to establish friendships, and being ostracized from the community makes it feel like someone is being forced to attend many events or activities in many places when the Covid-19 virus

is circulating. Events or activities such as mourning, visiting, organizing weddings, religious events (Eid al-Fitr, Eid al-Adha, Christmas, etc.), get-togethers (arisan, extended family gathering, youth group, bukber, New Year's Eve) etc. This was proven when Indonesia experienced the first wave of COVID-19, namely after the Christmas and New Year holidays in January 2021, then in June 2021 the second wave began. One of the factors considered to have contributed to triggering this second wave was the high mobility of people during the Eid al-Fitr holiday in May 2021. A month after the Eid al-Fitr holiday, the number of additional cases continued to increase significantly and on June 21 2021, the accumulation positive cases reached two million cases (Committee for Handling COVID-19 and National Economic Recovery, 2021b in Joyosemito & Nasir, 2021).

Many people (including public figures, community leaders, regional leaders) who serve as role models for the community continue to mobilize. Apart from that, the circulation of hoax news and conspiracy theories on social media is not uncommon for people to believe them. This is one of the triggers for people's distrust of Covid-19 (Irwan et al., 2021). This distrust then causes people to continue to choose to mobilize.

Other factors that can influence a person's decision to mobilize are structural factors. Structural factors include the residential/housing environment, food availability, energy availability, working conditions, school conditions, clean water supply and environmental sanitation, access to quality health services, access to quality education, and decent employment opportunities.

Many factors influence the incidence of mobility when viewed from structural factors. Like the number of positive confirmed cases in the environment. For example, what happened in DKI Jakarta, mobility experienced a significant decline when there was a surge in positive confirmed cases in the environment. It is assumed that the psychological impact of an increase in positive confirmed cases significantly influences the behavior of residents in avoiding travel and crowds (Ghiffari, 2020).

Conditions at schools or workplaces that do not allow online activities to be carried out force people to continue to mobilize. For example, schools or offices in rural areas cannot access the internet. This limitation inevitably causes people to continue to mobilize. Another example is the existence of several jobs that do require the perpetrator to perform mobility such as drivers, small traders in the market, transporters, etc. Workers like this still have to work outside the home to earn income (Harahap, 2020).

Besides that, the unavailability of food at home and the absence of facilities to support online shopping (especially in villages) also require people to continue to mobilize.

Socio-economic conditions and policies, culture, politics, and the physical environment are also factors that influence a person's choice in mobilizing. the Government of Indonesia issued policies to limit or reduce mobility, starting from closing borders and prohibiting entry, large-scale social restrictions (PSBB), imposing restrictions on community activities (PPKM), to banning homecoming (Yazid, Lie and Jovita, 2020).

The PSBB that has been implemented includes calls for study, work and worship activities from home, restrictions on activities in public places or facilities, restrictions on socio-cultural activities, and restrictions up to the cessation of modes of transportation (Yazid, Lie and Jovita, 2020). Physical Distancing recommendations, PPKM policies, and PSBB help reduce the level of population mobility during a pandemic, as happened in DKI Jakarta. Since the implementation of the recommendations for physical distancing, PPKM, and PSBB, data on population mobility in public facilities such as trade and service facilities, transportation facilities, offices, and recreation have decreased. This is due to temporary restrictions on several modes of public transportation, WFH activities, restrictions and even prohibitions on visiting tourist attractions, etc. (Ghiffari, 2020).

The implementation of social restrictions has forced most industrial players to temporarily close their production activities. This causes workers to be forced to stay home with uncertainty about when or whether they will return to work. The policy which is considered to prioritize citizens rather than foreign workers has drawn controversy due to the lack of Covid-19 tests and health facilities provided by the government for foreign workers (Yazid, Lie and Jovita, 2020). Migrant workers who previously worked in other countries are now returning to their countries of origin due to workplace closures (Yazid, Lie and Jovita, 2020).

So, the social restriction policies in the form of physical distancing, PPKM, and PSBB apart from having a positive impact also have a negative impact on many people such as losing jobs and decreasing financially due to a reduction in workforce so that it can lead to a decrease in social mobility (Wati, 2021).

## CONCLUSION

During the Covid-19 pandemic, there was a change in mobility patterns that occurred in society. This change was preceded by the issuance of a policy from the government to limit mobility. With this policy, people experience financial loss and decline due to a reduction in workforce. In terms of behavior and lifestyle, there are many things that cause a person to finally decide to do mobility. On the other hand, there are some people who feel they cannot be infected with Covid-19. Friends and family patterns that ignore the Covid-19 pandemic make someone choose to mobilize. Social and community factors will also influence a person's decision to mobilize. Structural factors such as the residential environment, workplace conditions, and access to quality health services also influence a person's willingness to mobilize. To reduce mobility, basically the government must be able to impose sanctions on people who violate it. The large number of people who continue to do mobility because the government is still not strict enough against perpetrators of violations. Therefore, it is necessary to apply strict sanctions to perpetrators of violations during a pandemic so that people can comply more with applicable regulations.

## REFERENCES

Amelia, Kiki, Ridwan M. Thaha, dan Masni. 2014. Determinan Sosial Kesehatan dan Perilaku Terhadap Kejadian Kematian Bayi di Kecamatan Ujung Tanah Kota Makassar. Universitas Hasanuddin Makassar.

Ariyanto, A. M. and Elidar. 2018. Membangun Sistem Pencegahan dan Pengendalian Penyakit Zoonosis dan Penyakit Infeksi Emerging (PIE) di Kabupaten Ketapang Kalimantan Barat melalui Pendekatan One Health. RATEKPIL dan Surveilans Kesehatan Hewan.

BPS. 2019. Statistik Mobilitas Penduduk dan Tenaga Kerja. Jakarta.

Dinas Kesehatan Daerah Istimewa Yogyakarta. 2018. Mengenal Penyakit Infeksi Emerging (PIE). Available at: <https://dinkes.jogjapro.go.id/berita/detail/penyakit-infeksi-emerging-reemerging-menular-wabah-klb-pie-ptm-mengenal-penyakit-infeksi-emerging-pie> (Accessed: 20 September 2022).

Disdukcapil Kota Pariaman. 2019. Profil Perkembangan Kependudukan Kota Pariaman.

Fedryansyah, M. Kebijakan Sosial Dalam Pembangunan. Social Work Journal, Vol. 6, No. 1: 1 - 153.

Ghiffari, R. A. 2020. Dampak Populasi dan Mobilitas Perkotaan Terhadap Penyebaran Pandemi Covid-19 di Jakarta. Jurnal Tunas Geografi, Vol. 9, No. 1: 81 - 88. Available at: <http://jurnal.unimed.ac.id/2012/index.php/tgeo> (Accessed: 21 September 2022).

Harahap, S. R. 2020. Proses Interaksi Sosial Di Tengah Pandemi Virus Covid 19, Jurnal Al-Hikmah, 11(1), pp. 45–53. Available at: <https://journal.iainlangsa.ac.id/index.php/hikmah/article/view/1837/1128> (Accessed: 14 September 2022).

Irwan, Mopangga, A., & Mokodompis Y. 2021. Pengaruh Kepercayaan dan Sikap Terhadap Perilaku 5M (Memakai Masker, Mencuci Tangan, Menjaga Jarak, Menjauhi Kerumunan, Mengurangi Mobilitas) Selama Pandemi Covid-19. *Journal Health and Science: Gorontalo Journal Health & Science Community*, Vol. 5, No. 2: 302 - 312.

Joyosemito, I.S., & Nasir, N.M. 2021. Gelombang Kedua Pandemi Menuju Endemi Covid-19: Analisis Kebijakan Vaksinasi dan Pembatasan Kegiatan Masyarakat di Indonesia. *Jurnal Sains Teknologi dalam Pemberdayaan Masyarakat*, Vol. 2, No. 1: 55 - 66. Available at: <http://ejurnal.ubharajaya.ac.id/index.php/JSTPM> (Accessed: 21 September 2022).

Kamilatunnisa. 2018. MOBILITAS SOSIAL PEKERJA K3L UNIVERSITAS PADJAJARAN, *Jurnal Pekerjaan Sosial*, 1(2), pp. 67–76.

Kemendes RI. 2015. Definisi Operasional Profil Kesehatan Tahun 2015. Available at: <https://pusdatin.kemkes.go.id/resources/download/lain/Definisi-Operasional-Profil-Kes-2015.pdf> (Accessed: 14 September 2022).

Kemendes RI. 2016. PERMENKES NOMOR 59 TAHUN 2016 TENTANG PEMBEBASAN BIAYA PENYAKIT INFEKSI EMERGING TERTENTU. Jakarta. Available at: [www.bphn.go.id](http://www.bphn.go.id).

Kemendes RI. 2020. KEPUTUSAN MENTERI KESEHATAN REPUBLIK INDONESIA NOMOR HK.01.07/MENKES/413/2020 TENTANG PEDOMAN PENCEGAHAN DAN PENGENDALIAN CORONAVIRUS DISEASE 2019 (COVID-19), KEMENDES RI. Available at: [https://infeksiemerging.kemkes.go.id/download/KMK\\_No.\\_HK.01.07-MENKES-413-2020\\_ttg\\_Pedoman\\_Pencegahan\\_dan\\_Pengendalian\\_COVID-19.pdf](https://infeksiemerging.kemkes.go.id/download/KMK_No._HK.01.07-MENKES-413-2020_ttg_Pedoman_Pencegahan_dan_Pengendalian_COVID-19.pdf).

Laksono, A.D. & Rachmawati, T. 2017. Tantangan Determinan Sosial Kesehatan Ibu & Anak di Indonesia.

Matury, H.J.E. 2020. Perbandingan Kasus Fatal Akibat Covid-19 Pada Beberapa Negara Asia Tenggara. *Jurnal Inovasi Kesehatan Masyarakat*, 1(2), pp. 24 - 29.



Menteri Kesehatan RI. 2020. Keputusan Menteri Kesehatan Republik Indonesia Nomor HK.01.07/MENKES/413/2020 Tentang Pedoman Pencegahan dan Pengendalian Coronavirus Disease 2019 (Covid-19). Jakarta.

Notoatmodjo, S. 2014. Ilmu Perilaku Kesehatan. Jakarta: Rineka Cipta. Biomass Chem Eng, 49(23-6).

Pemerintah Pusat RI. 2009. UNDANG-UNDANG REPUBLIK INDONESIA NOMOR 36 TAHUN 2009 TENTANG KESEHATAN. Jakarta. Available at: [https://infeksiemerging.kemkes.go.id/download/UU\\_36\\_2009\\_Kesehatan.pdf](https://infeksiemerging.kemkes.go.id/download/UU_36_2009_Kesehatan.pdf) (Accessed: 14 September 2022).

Presiden Republik Indonesia. 1994. Peraturan Pemerintah Republik Indonesia Nomor 27 Tahun 1994 Tentang Pengelolaan Perkembangan Kependudukan.

Pusat Analisis Determinan Kesehatan Sekjen Kemenkes RI. 2016. RENCANA AKSI KEGIATAN PUSAT ANALISIS DETERMINAN KESEHATAN 2016-2019. Jakarta. Available at: <https://e-renggar.kemkes.go.id/file2018/e-performance/1-401734-4tahunan.pdf> (Accessed: 13 September 2022).

Putra, A. 2021. Gambaran Karakteristik Klinis Pasien COVID-19 Pada Santri Di Pondok Pesantren Al-Izzah Kota Batu. Available at: <http://repository.itsk-soepraoen.ac.id/680/> (Accessed: 7 September 2022).

Retnaningsih, H. 2020. Bantuan Sosial bagi Pekerja di Tengah Pandemi Covid-19: Sebuah Analisis terhadap Kebijakan Sosial Pemerintah, Aspirasi: Jurnal Masalah-Masalah Sosial, 11, pp. 215–227. doi: 10.22212/aspirasi.v11i2.1756.

Rokhmayanti et al. 2019. PETUNJUK PRAKTIKUM SURVEILANS KESEHATAN MASYARAKAT. Available at: [http://eprints.uad.ac.id/24403/1/Buku Praktikum Surveilans Kemas 2018-2019\\_2.pdf](http://eprints.uad.ac.id/24403/1/Buku_Praktikum_Surveilans_Kemas_2018-2019_2.pdf) (Accessed: 7 September 2022).



Vermonte, P., & Wicaksono, T.Y. 2020. Karakteristik dan Persebaran Covid-19 di Indonesia: Temuan Awal. CSIS Commentaries. Available at: [https://scholar.google.com/scholar?hl=id&as\\_sdt=0%2C5&q=definisi+kasus+positif+covid&btnG=#d=gs\\_qabs&t=1663698075911&u=%23p%3DVMeoqAUxKnwJ](https://scholar.google.com/scholar?hl=id&as_sdt=0%2C5&q=definisi+kasus+positif+covid&btnG=#d=gs_qabs&t=1663698075911&u=%23p%3DVMeoqAUxKnwJ) (Accessed: 21 September 2022).

Wati, M. K. 2021. GAMBARAN KECEMASAN PADA MASYARAKAT YANG PERNAH MENGALAMI PEMBATASAN MOBILITAS SOSIAL SELAMA COVID-19 DI WILAYAH KECAMATAN CILACAP SELATAN. Fakultas Ilmu Kesehatan UMS.

WHO. 2020. Pertanyaan jawaban terkait COVID-19 untuk publik. Available at: <https://www.who.int/indonesia/news/novel-coronavirus/qa/qa-for-public> (Accessed: 7 September 2022).

Yazid, S., Lie and Jovita, L. D. 2020. Dampak pandemi terhadap mobilitas manusia di Asia Tenggara, [journal.unpar.ac.id](http://journal.unpar.ac.id). doi: 10.1126/science.abb4218.