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JURNAL SYNTAX TRANSFORMATION

THE RELATIONSHIP BETWEEN MOTIVES AND COMMUNITY WORK WITH THE SUCCESS OF COVID-19 VACCINATION AT PUSKESMAS DARUSSALAM BIG ACEH

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ABSTRACT
Covid-19 is an infectious disease caused by a new type of coronavirus with the most common symptoms being fever, weakness, coughing, convulsions and diarrhea. The disease caused by this new virus became known after the discovery of an outbreak in Wuhan, China, in December 2019 and now the virus has spread to many countries around the world. According to WHO in March 2022 the number of cases of corona virus infection in the world has reached 441,186,679 people. The purpose of this study was to determine the relationship between motives and people's work on the success of the Covid-19 Vaccination at the Darussalam Aceh Besar Health Center. This research method is an analytic survey research using a cross sectional approach, the sampling technique was accidental sampling with a total sample of 49 people. The research instrument is a questionnaire. Data analysis used univariate and bivariate analysis with the SPSS statistical program. Research Results: The statistical test results with the Chi-square test showed a p-value of 0.706 > 0.05, so there was no motive relationship to the success of the Covid-19 vaccination in the community at the Darussalam Aceh Health Center The Great Year is 2022. The results of the statistical test using the Chi-square test show a p-value of 0.020 <0.05, so there is a work relationship with the success of the Covid-19 vaccination in the community at the Darussalam Aceh Besar Health Center. The conclusion is that there is an influence of work on the success of the Covid-19 vaccination, because people who work are usually required to obey orders from their superiors and follow government regulations. Suggestions so that people can understand the dangers of the Covid-19 virus and can comply with vaccines as recommended by the government.
Keywords: Motive, Occupation, Vaccination Success, Covid-19

Introduction

Covid-19 is an infectious disease caused by a new type of coronavirus with the most common symptoms being fever, weakness, cough, seizures and diarrhea. The disease caused by this new virus was known after the discovery of an outbreak in Wuhan, China, in December 2019

and now the virus has spread in many countries around the world. This virus can spread rapidly through small droplets from the nose or mouth when sneezing or coughing (Fadli, 2021).

Covid-19 or *Corona Virus Disease* in 2019 is an infectious disease caused by a *new type of* coronavirus.*Coronaviruses* (CoV) are a large family of viruses that can cause a variety of mild to severe symptoms. In terms of symptoms, this family of viruses often attacks the human respiratory system. At least, there are two types of *coronaviruses* that have also attacked the Indonesian people and the spread cases are quite high, namely East Respiratory Syndrome Coronavirus (SARS-CoV) and *Severe Acute Respiratory Syndrome Coronavirus (SARS-CoV*). And lately, a new *coronavirus* has emerged called COVID-19 disease. According to WHO based on Global Surveillance guidelines, the definition of COVID-19 can be classified into three parts, namely: (1) suspected cases, (*2) probable cases,* and (3) confirmed cases or patients who have tested positive through laboratory tests. While in Indonesia, the definition of COVID-19 case classification is divided into: (1) patients under surveillance or PdP, (2) people under monitoring or OdP, and (3) people without symptoms or OTG (Kemekes RI, 2021)

According to the latest figures from the World Health Organization (WHO), as of Friday March 4, 2022 at 00:20:56, the number of cases of coronavirus infection in the World has reached 441,186,679 people. While the dead were 5,996,078 people, and 63,053,584 people were actively positive (still sick), and 372,137,017 patients were declared cured. Until now, Europe is the continent with the highest number of COVID-19 cases at 158,060,201 cases, while the United States is the country with the highest number of cases in the world at 80,770,604 people. The number of coronavirus cases in Indonesia was 5,667,355 people, while those who died were 149,268 people, and those who recovered 4,986,391 people. Based on world data on March 20, 2022, the total doses that have been given have reached 11 billion people, with the administration of dose 1 vaccine as many as 5,039,958,087 people (64.6%), and those who have been fully vaccinated as many as 4,497,967,731 people (57.7%), and the boster vaccine that has been given as many as 1,465,586,707 people (18.8%) (WHO, 2022). Health problems are currently in the spotlight and attention of the world *is Covid-19 disease, this disease is caused by a virus called* Corona Virus Disease-19 or more popularly known as *Covid-19*. Covid-19 is thought to spread through small droplets (droplets) from the nose or mouth when patients cough or sneeze, or accidentally inhale droplets from patients infected with Covid-19. Droplets from patients then fall on objects around them, if they touch objects that have been contaminated with these droplets, then touch the eyes, nose or mouth (facial triangle), they can be infected with Covid-19 (Ministry of Health RI, 2021).

Coronavirus disease 2019 Covid-19 or previously called SARS-CoV2. Covid-19 in humans attacks the respiratory tract, especially in the cells lining the alveoli. Covid-19 has glycoproteins in *enveloped spikes* or S proteins. To be able to infect "humans", the S protein of the virus will bind to the ACE2 receptor on the plasma membrane of human body cells. Inside the cell, this virus will duplicate the genetic material and proteins needed and will form new virions on the cell surface (Zhang et al., 2020)

Similarly, SARS-CoV after entering the cell, this virus will release RNA genomes into the cytoplasm and golgi of the cell will then be translated into two lipoproteins and structural proteins to be able to replicate (De Wit et al., 2016)

Viral factors with an immune response determine the severity of this Covid-19 infection. The cytopathic effects of the virus and its ability to defeat the immune response are factors in the severity of viral infection. An inadequate immune system in response to infection also determines the severity, on the other hand an excessive immune response also contributes to tissue damage. When the virus enters the cell, the viral antigen will be presented to the Antigen *Presentation Cell* (APC). The presentation of cells to APC will respond to the humoral and cellular immune systems mediated by T cells and B cells. In SARS-CoV IgM will disappear on day 12 and IgG will last longer (Xing et al., 2020)

The virus can evade the immune system by inducing double-membrane vesicles that do not have *pattern recognition receptors* (PRRs) and can replicate within these vesicles so that they cannot be recognized by immune cells (Wang et al., 2020)

Patients confirmed with Covid-19 potitive with mild clinical symptoms showed an immune response to an increase in T cells, especially CD8 on days 7-9, in addition to follicular helper T and Antibody Secreting Cells (ASCs). On day 7 to day 20, a progressive increase in IgM/IgG was found. When compared with healthy controls, the number of CD14+ and CD16+ monocytes decreased. However, in people confirmed positive for Covid-19 with mild signs and symptoms, there was no increase in chemokines and proinflammatory cytokines (Lai et al., 2020)

In patients confirmed positive for Covid-19 with severe clinical symptoms, immunological profile results are different from mild clinical. In severe clinical cases, low lymphocyte counts were found, and monocyte, basophil, and eosinophil results were lower in severely clinically ill Covid-19 patients. There was also an increase in proinflammatory mediators (TNF-α, IL 1, IL6 and IL 8) but in helper T cells, suppressor T and regulatory T decreased in severe clinical Covid-19 cases. Covid-19 patients who experienced *Acute Distress Respiratory Syndrome* (ADRS) were also found to have decreased CD4 and CD 8 T cells, CD 4 and CD8 lymphocytes hyperactivated. ARDS is one of the causes of death in Covid-19 cases caused by an uncontrolled increase in proinflammatory mediators (cytokine storms). This will result in lung damage, the formation of fibrosis tissue so that it can malfunction (Hui et al., 2020)

The clinical symptoms that generally occur in people with covid with the average incubation period is 4 days with a span of 2 to 7 days. The incubation period using lognoral distribution ranges from 2.4 to 15.5 days. The period depends on the age and immunity status of the patient. The average age of patients is 47 years with an age range of 35 to 58 years and 0.9% are patients younger than 15 years old (Guan et al., 2020)

Common symptoms at the beginning of the disease are fever, fatigue or myalgia, dry cough. As well as some of the organs involved such as respiratory (cough, shortness of breath, sore throat, hemoptysis or coughing up blood, chest pain), gastrointestinal (diarrhea, nausea, vomiting), neurological (confusion and headache). However, signs and symptoms that are often encountered are fever (83-98%), cough (76-82%), and shortness of breath (Wu et al., 2020)

Patients with mild symptoms will recover in approximately 1 week, while patients with severe symptoms will experience progressive respiratory failure because the virus has damaged the alveolar and will cause death. The most cases of death are elderly patients with congenital diseases such as cardiovascular, hypertension, diabetes mellitus, and Parkinson's (Adhikari et al., 2020)

Common signs and symptoms of Covid-19 infection include symptoms of acute respiratory conditions such as fever, cough, and shortness of breath. The average incubation period is 56 days, the longest incubation period is 1 day. In severe cases of Covid-19, it can cause pneumonia, acute respiratory syndrome, kidney failure, and even death. The clinical signs and symptoms reported in most cases are fever, some cases of dyspnoea, and radiography shows systemic infiltrative pneumonia in both lungs (Ministry of Health, 2019).

According to the Covid-19 diagnosis and management book in Indonesia compiled by the Indonesian Lung Doctor Association (PDPI) in 2020, the management for *coronavirus disease 2019 patients* is divided into management:

People without Symptoms (OTG)

For asymptomatic people, self-isolate at home for 14 days and be monitored by a Primary Level Health Facility (FKTP) by phone. If there are comorbidities, continue to take drugs that have been routinely consumed. If the patient's routine medication is *Angiotensin Receptor Blockers* and *Ace-inhibitors*, please consult an internal specialist and cardiologist. It is recommended to take vitamins C, B, E, and Zinc for 14 days. Various choices of vitamin C that can be chosen are vitamin C suction tablets (500mg per 12 hours orally for 30 days), and vitamin C tablets non acid (500mg per 6-8 hours orally for 14 days) (Sobur, 2016).

People with mild symptoms

For patients with mild symptoms, self-isolate at home for 14 days and be handled and controlled by FKTP (puskesmas) for 14 days as an outpatient. For therapy options that can be used in people with mild symptoms, namely:

a. Drink multivitamins in the form of vitamins C, B, E, and zinc.
b. Vitamin C suction tablets 500 mg per 12 hours orally for 30 days
c. Chloroquine phosphate 500 mg per 12 hours orally for five days / hydroxychloroquine (preparation 200 mg) 400 mg per 24 hours orally in 5 days
d. Azithromycin 500 mg per 24 hours orally for 5 days alternately using levofloxacin 750 mg per 24 hours for 5 days
e. Symptomatic when fever, give paracetamol
f. Antivirals in the form of oseltamivir 75 mg per 12 hours oral pe or favipiravir 600 mg per 12 hours orally within 5 days.

People with moderate symptoms

Must be referred to a Covid-19 referral hospital and isolated for 14 days. For therapeutic options that can be used in people with moderate symptoms, namely: Take vitamin C 200-400 mg per 8 hours (100 cc NaCl 0.9%) after 1 hour (intravenous drip).

a. Chloroquine phosphate 500 mg per 12 hours orally for 5-7 days / Hydroxychloroquine (preparation 200 mg) as much as 400 mg per 12 hours orally followed by 400 mg per 24 hours orally in 5-7 days.

b. Azithromycin 500 mg per 24 hours intravenously or orally within 5-7 days alternately using levofloxacin 750 mg per 24 hours per intrravena or orally within 5-7 days.
c. Symptomatic when fever gives paracetamol
d. Antiviral in the form of oseltamivir 75 mg per 12 hours orally or favipiravir (preparation 200 mg)

with a loading dose of 1600 mg per 12 hours orally on the first day and continued 2x600 mg on days 2-5.

People with severe symptoms

Must self-isolate in a referral hospital and be treated in a cohorting (isolation room) (Burhan, 2020). For therapeutic options used in people with severe symptoms are:

a. Chloroquine phosphate 500 mg per 12 hours orally on days 1-3, then 250 mg per 12 hours orally on days 4-10 or hydroxychloroquine 400 mg per 24 hours orally in 5 days and control ecg every 3 days

b. Azithromycin 500 mg per 24 hours in 5 days or levofloxacin 750 mg per 24 hours per iv in 5 days

c. In the event of sepsis, antibiotic administration is adjusted to the clinical condition and focuses on the patient's infection and risk factors

d. Antivirals using oseltamivir 75 mg per 12 hours orally or favipiravir (preparation 200 mg) with a loading dose of 1600 mg per 12 hours orally on the first day and continued with 2 x 600 mg on days 2-5

e. Take vitamin C dose 200-400 mg per 8 hours (100 cc nacl 0.9%) and discharged within 1 hour (intravenous drip)

f. Vitamin B1 1 ampoule per 24 hours per iv

g. Hydroxycortisone 100 mg per 24 hours per iv in the first 3 days

h. Continue comorbid drugs and complication drugs (if complications occur).

Based on Kemekes vaccine data on March 22, 2022, the total vaccination for dose 1 has reached 93.59%, for dose 2 vaccine it has reached 74.61%, and for dose 3 vaccine has reached 8.43%, with a target vaccination target until the last stage of 208,265,720 people. As for the achievement of vaccination in Aceh province with a vaccination target of 4,028,891 people and those that have been achieved for dose 1 vaccine as many as 3,825,985 people or 94.96%, for dose 2 as many as 2,427,848 people or 60.26%, and for dose 3 vaccine as many as 212,709 people or 5.28%. Covid-19 cases in Indonesia today increased by 37,259 cases, so that the total from the beginning of the Covid-19 pandemic has been recorded at 5.67 million data cases as of Thursday, March 3, 2022. The five provinces with the most additions today are West Java, DKI Jakarta, East Java, Central Java and DI Yogyakarta (Kemekes RI. 2022).

This coronavirus data places Indonesia in 16th place out of 226 countries and territories in the world affected by the coronavirus pandemic. Top 10 countries infected with COVID-19 in the World, such as the United States 80,770,604 cases 979,725 died, India 42,945,160 cases 514,419 died, Brazil 28,842,160 cases 650,052 died, France 22,840,306 cases 138,762 died, United Kingdom 19,074,696 cases 161,898 died, Russia 16,685,850 cases, 354,011 died, Germany 15,243,006 cases 124,089 died, Turkey, 14,206,121 cases 94,837 died, Italy 12,867,918 cases 155,214 died, Spain 11,054,888 cases 100,037 died (Kemekes RI. 2022)

The Aceh Provincial Office recorded that on March 25, 2022, the number of patients confirmed *with Covid-19* was 43409 cases, 1698 patients were under treatment, 39547 patients recovered, 2164 patients died from 25 regencies/cities of Aceh Province. Of the 25 districts, there are five regencies/cities in Aceh with *the highest Covid-19* cases, namely Banda Aceh 13653 cases, Aceh Besar 6556 cases, the third Pidie 3254 cases, then Aceh Tamiang 2060 cases and

Bireun 1908 cases. Based on data from Aceh Besar Regency on March 25, 2022, 6556 cases of COVID-19 contamination were treated, 5672 people recovered, and 317 people died (Aceh Health Office, 2022)

Until now, the Corona virus pandemic has not ended. the government is starting to think about how to insist that cases starting from Covid-19 begin to decrease. This condition requires the provision of the COVID-19 vaccine to all communities by leading to provisions in accordance with the criteria that have been set. The administration of the COVID-19 vaccine began and the government also recommended that everyone get it. Although so far many people have started to vaccinate and are more enthusiastic about wanting to do vaccines not only want to be healthy, but also because of the various rewards obtained after doing the vaccine.

Covid-19 vaccination is one of the government's efforts in dealing with the Covid-19 problem. The Covid-19 vaccine aims to create *herd immunity* so that people become more productive in carrying out their daily activities. Evidence that vaccination can stop the spread of infectious diseases (Christin, 2020):

Vaccination not only aims to break the chain of disease transmission and stop the outbreak, but also in the long term to eliminate and even eradicate (eradicate / eliminate) the disease itself.

Indonesia has a long history of efforts to overcome infectious diseases by vaccination or immunization. Indonesia also contributes to the prevention of diseases on this earth through vaccination. For example, since smallpox immunization was first launched in 1956, smallpox was finally eradicated or eliminated worldwide in 1974 so that it was implemented.

Smallpox immunization was stopped in 1980. Even so with polio, since polio immunization was first launched in 1980, Indonesia finally achieved polio-free in 2014. Currently, the world, including Indonesia, is in the process of eradicating polio which is targeted for 2023. Another example of Indonesia with intensive efforts to provide tetanus immunization to infants and children (through DPT-HB-Hib DT and Td vaccines) and to Women of Childbearing Age (Td vaccine), Indonesia finally achieved maternal and neonatal tetanus elimination status in 2016.

COVID-19 vaccination services are carried out at Health Service Facilities owned by the Central Government, Provincial Regional Governments, District/City Regional Governments or public/private owned by the public / private sector that meet the requirements, including:

1. Puskesmas, Auxiliary Puskesmas
2. Clinic
3. Hospital and or
4. Health Service Unit at Port Health Office (KKP)

The community has been very fast in vaccinating in various places both at Puskesmas, clinics and vaccine posts that have been set in their respective areas. The community is very happy that besides being healthy by doing the vaccine, the community also gets basic necessities after doing the vaccine, this is a supporting motive for the community in doing the vaccine. Possible reactions after COVID-19 vaccination are almost the same as other vaccines. Some of these symptoms include: Local reactions, such as pain, redness, swelling at the injection site and other severe local reactions, such as cellulitis, Socimatic reactions such as fever, muscle aches throughout the body (myalgia), joint pain (atralgia), body weakness, nausea and headache. The types of COVID-19 vaccines that can be used in Indonesia are: Sinovac, Astra

Zeneca, Sinopharm, Novavax, Moderna, Pfizer, Cansino, Sputnik V. The use of the vaccine can only be done after obtaining a distribution permit or Emergency Use of Authorization (EUA) from BPOM (Shi et al., 2020).

Motif, or in English "*motive*" comes from the word *movere or* motion, which means movement or something that moves. In psychology, the term motive is closely related to "motion", which is movement carried out by humans or also called actions or behavior (Makincoiri, 2017)

In other studies it mentions motive as a generic term that encompasses all internal factors that lead to different types of purposeful behavior, all internal influences, such as needs derived from the functions of the organism, drives and desires, aspirations and social tastes, derived from these functions. In addition, another opinion is also said by other studies that interpret motives as impulses or impulses that energize human actions along a cognitive/behavioral trajectory towards satisfying needs. Motives do not have to be perceived consciously. It is more of a "state of feeling". Briefly, explain that motive is any force that drives a person to do something. Other research defines motive as something that can cause individuals to perform certain activities (do something) and to achieve certain goals. In the book management, quoting the opinion of Barelson and Stainer, suggests that motive is a state from within that gives strength, that activates, that moves or channels behavior towards goals. Motive is a potential and latent construction formed by experiences, which can survive relatively even though the possibility of change still exists, and functions to move and direct behavior to a certain goal (Sarwono et al., 2019).

The government deliberately takes various approaches with the community so that people can vaccinate everything so that Covid-19 cases can decrease. The success of the vaccine will be able to meet the targer if 90% of the public has been vaccinated. Success is an achievement of the desire we have intended to achieve or the ability to pass and overcome ourselves from one failure to the next without losing enthusiasm. Success is closely related to our accuracy in determining goals while goals are a goal that we have set. From the understanding that has been expressed above, it can be concluded that success is a condition where a person is able to achieve the goals that have been set. Being someone who is successful and successful is certainly not easy, because being an accomplished person has a lot of processes faced (Wulandari et al., 2021)

Based on data from Aceh Besar Regency on March 25, 2022, 6556 cases of covid-19 contamination were infected, in the treatment of 567 people, 5672 people recovered, and 317 people died According to data from the Aceh Besar vaccination results on March 20, 2022, Darussalam Health Center The target of dose 2 of covid-19 vaccination for vulnerable and general people is 5212 people, but only 837 (16%) people receive dose 2 of covid-19 vaccination. That is a sign that it did not meet the target even half of the target was not achieved (Dinkes Pov. Aceh, 2020).

Based on Puskesmas data dated December 26, 2021, there are 29 villages in Darussalam District and data collection of people who have been vaccinated against covid-19 in Darussalam District, namely Siem Village 4 people, Lampeudaya Village 8 people, Lam Ujong Village 8 people, and Tanjong Deah Village 10 people.

From the results of an initial survey conducted on 6 patients at the Darussalam Health Center, Aceh Besar Regency, it was found that 4 people got the vaccine because they wanted

basic necessities, and 2 other people said they did the covid vaccine because of their own health. Based on the background of the above problem, the author is interested in researching the relationship between community motives for the success of Covid-19 vaccination in the working area of the Darussalam Health Center, Aceh Besar Regency in 2022.

METHOD

This type of research is an analytical survey research using a Cross Sectional approach, namely collecting data carried out at the same time at the same time to determine the relationship between motives and work on the success of Covid-19 Vaccination at the Darussalam Health Center, Aceh Besar Regency in 2022. This research will be conducted from 05 to 19 August 2022. The sampling technique is to use accidental sampling of 49 people. The instruments used in this study were using questionnaires about the motives, occupation and success of the Covid-19 vaccine. Data were analyzed using univariate and bivariate techniques.

RESULTS AND DISCUSSION

Based on the results of research in the Working Area of the Darussalan Health Center, Darussalam District, Aceh Besar Regency, by giving questionnaires, univariate and bivariate data were obtained below.

The Success of the Covid-19 Vaccine

Table.1

Frequency Distribution of Covid-19 Vaccine Success in the Working Area of the Darussalam Health Center, Darussalam District, Aceh Besar Regency in 2022

No	Covid-19 Vaccine	Frequency	Percentage (%)
1	Unsuccessful	14	**28,6**
2	It Has Worked	35	**71,4**
	Total	**49**	**100**

Source: Primary data processed in 2022

Based on Table.1, it can be seen that of the 49 respondents who have been successfully vaccinated against COVID-19, 71.4%. and 28.6% have not been successfully vaccinated.

Motive

Table 2.

Frequency Distribution of Motives for Vaccinating in the Working Area of the Darussalam Health Center, Darussalam District, Aceh Besar Regency in 2022

No	Vaccine Motives	Frequency	Percentage (%)
1	Tidak Ada Motif	38	**77,6**
2	Ada Motif	11	**22,4**
	Total	**49**	**100**

Sumber: Data primer diolah tahun 2022

Based on Table.2, it can be seen that of the 49 respondents who had a motive when doing the COVID-19 vaccine vaccine, as many as 11 people (22.4%) while 38 people (77.6%) did not have a motive when doing the vaccine.

Work

Table 3.

Distribution of Community Work Frequency in the Working Area of Puskesmas Darussalam, Darussalam District, Aceh Besar Regency in 2022

No	Pekerjaan	Frekuensi	Persentase (%)
1	Pedagang	19	38,8
2	IRT	20	40,8
3	Petani	5	10,2
4	PNS	5	10,2
	Total	**49**	**100**

Sumber: Data primer diolah tahun 2022

Based on Table.3, it can be seen that of the 49 respondents who worked as traders, 19 people (38.8%). Housewives by 40.8%, people as farmers by 10.2%, civil servants by 10.2%.

Motive Relationship with Covid-19 Vaccine Success

Table 4.

The relationship between community motives for the success of Covid-19 vaccination in the working area of the Darussalam Health Center, Aceh Besar Regency in 2022

No	Keberhasilan Vaksin	Motif				Total		*P value*
		Ada Motif		Tidak Ada				
		f	%	F	%	**f**	**%**	
1	Berhasil	7	20	28	80	35	100	
2	Tidak Berhasil	4	28,6	10	71,4	14	100	0,706
	Total	11	22,4	38	77,6	49	100	

Sumber: Data primer diolah tahun 2022

Based on Table.4 above, it can be seen that of the 35 respondents who succeeded in vaccinating and had motives, 7 people (20%), while 28 (80%) people did not have motives when doing the Covid-19 vaccine. The data above also shows that 14 people (71.4%) have not succeeded in vaccinating but they have a motive if they vaccinate as many as 4 people (28.6%), while they have no motive if they later vaccinate as many as 10 people. Based on the p-value

showing 0.706 > 0.05, it means that there is no significant relationship between the motive and the success of covid-19 vaccination in the community in the working area of the Darussalam Health Center, Aceh Besar Regency

Employment Relationship with Covid-19 Vaccine Success

Table 5. Community Work Relations on the Success of Covid-19 Vaccination in the Working Area of the Darussalam Health Center, Aceh Besar Regency in 2022

No	Success Vaccine Work	IRT Farmer				Civil Servant Tr				Total		P Value
		F	%	F	%	F	%	F	%	F	%	
1.	Succeed	17	48,6	10	28,6	3	8,6	5	14,3	35	100	0.020
2.	It doesn't work	2	14,3	10	71,4	2	14,3	0	0	14	100	
	Total	19	38,8	20	40,8	5	10,2	5	10,2	49	100	

ce: Primary data processed in 2022

Based on Table.5 above, it can be seen that of the 35 respondents who succeeded in vaccinating with various types of work, they included 48.6% Traders, 28.6% IRT, 8.6% Farmers, 14.3% Civil Servants. Meanwhile, 14 people who have not succeeded in vaccinating include 14.3% traders, 71.4% IRT, 14.3% farmers. Based on the p-value showing 0.020 < 0.05, it means that there is a significant relationship between work and the success of covid-19 vaccination in the community in the working area of the Darussalam Health Center, Aceh Besar Regency.

The results of this study found no motive relationship with the success of the vaccine, although the Aceh Besar Regional Government uses the approach of providing basic necessities to all residents who take the Covid-19 vaccine, in the hope that residents can avoid the Covid-19 virus, and residents have awareness to be healthy, so that with the provision of basic necessities to residents there is an increase in the number of residents in doing the vaccine. This research shows that at the end of 2022, it turns out that there are still many residents who come to take the 2nd dose of the Covid-19 vaccine specifically for Darussalam Aceh Besar District, although the results of the study show that many residents who come to do dose 2 vaccine have no motive, because only 11 people have the motive to get basic necessities (22.4%). However, the approach of the Aceh Besar Regional Government by providing basic food gifts for residents who take the Covid-19 vaccine dose 2 has increased by 80%. This means that the people of Aceh are very happy if they are given rewards as supporters, even though they understand that being healthy is important to maintain, it will be even more active if it is supported by giving gifts.

Other studies state that there are various motives for residents to participate in vaccinations ranging from historical experience, to get access to travel, access to public facilities, self-protection efforts, and so on (Ichsan & Karim, 2021).

Based on the results of other studies, it shows that the Health Belief Model has a significant influence on Covid-19 Vaccination Interest. This shows that public awareness of health and the importance of Covid-19 vaccination to protect them from the danger of Covid-

19 virus transmission are factors driving the community to vaccinate against Covid-19 (Syafrianto et al., 2022)

The research above is different from that conducted by Saraswati (2021) regarding the Implementation of Vaccination Policy in reducing the Covid-19 virus to support the government's target of achieving herd immunity, the Denpasar City Government applies the ball pickup method by bringing Covid-19 vaccine injection services closer to the community. This step is an effort to increase the coverage of the Covid-19 vaccination program in Denpasar City. Denpasar City Government with the Sanur Buffer Handling Task Force. The locations are at Balai Banjar Tohpati, Balai Banjar Biaung, and Balai Banjar Kertagraha.And on April 31, 2021, vaccinations were held in Pemecutan Village by targeting cadres in the village and the elderly. Vaccinations were also held at Satria Market targeting traders and Satria market managers. This ball pick-up method is carried out with the help of the synergy of surrounding village/village officials as one of the community leaders in an environment to speed up and effectiveness in distributing this Covid 19 vaccination. Covid-19 Denpasar City utilizes community meeting halls, ranging from banjar halls to wantilan, as Covid-19 vaccination posts. The Denpasar City Government applies the ball pickup method, which is to bring the Covid-19 vaccine injection service closer to residents.

The results of the study above related to the relationship between work and the success of Covid-19 Vaccination found that based on the p-value showing 0.020 < 0.05, it means that there is a significant relationship between work and the success of Covid-19 vaccination in the community in the working area of the Darussalam Health Center, Aceh Besar Regency.

The above research is in line with research conducted by (Chace Dwyer, et al (2019) that individual work will provide experience in interacting with the social environment so that it will increase the ability of individuals to receive new information. This is supported by the data of respondents who work more as students, health workers, civil servants, TNI / Polri and private employees. This is what makes the results of the study there is a relationship between work and knowledge (p value: 0.020). Working respondents will find it easier to get accurate information. Research conducted on the effect of work on knowledge that proves that work or training can increase knowledge.

The COVID-19 Vaccination Program has experienced a long journey to ensure its safety and efficacy through various studies and trials around the world, not only in Aceh but throughout the world, vaccine programs have been carried out to prevent the spread of the virus. The vaccination program is considered key in ending the pandemic because it can be used to reduce morbidity and mortality rates and form herd immunity against the COVID-19 virus. Vaccination can support efforts to prevent the transmission of Covid 19. This is because the body's immunity or antibodies have been formed to fight Covid-19 and various studies have been carried out on vaccines. Community participation is urgently needed in achieving the success of the COVID-19 vaccination policy goals. Even though they have vaccinated, it is hoped that the public will still comply with the health protocols recommended by the government to avoid the Corona Virus. The health protocols in question are wearing masks, washing hands with soap, and maintaining distance. The Covid-19 vaccination policy has arrived at the second stage of vaccination consisting of Cumulative Medical and Non-medical Officers, namely the community so that they can realize

a healthy and prosperous after passing Covid-19 cases and the community can recover in all aspects of life, especially health and a stable economy.

CONCLUSION

There is no relationship between community motives for the success of Covid-19 in the working area of the Darussalam Health Center, Aceh Besar Regency because based on the p-value contained in the Chi-square test table, it shows that the p-value is 0.706 > 0.05. There is a relationship between community work on the success of covid-19 in the work area of the Darussalam Health Center, Aceh Besar Regency because based on the p-value contained in the Chi-square test table, it shows that the p-value is 0.020 < 0.05

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