UNIVERSITI PUTRA MALAYSIA

FACTORS ASSOCIATED WITH COVID-19 SOP COMPLIANCE AMONG SCHOOL ADMINISTRATORS AND TEACHERS IN SOUTH SELANGOR DISTRICTS (HULU LANGAT, KUALA LANGAT, SEPANG) AND PUTRAJAYA 2021: A CROSS-SECTIONAL STUDY ON KAP

NURFATIHAH BINTI SAMAT

lp
FPSK4 2022 44

FACTORS ASSOCIATED WITH COVID-19 SOP COMPLIANCE AMONG SCHOOL ADMINISTRATORS AND TEACHERS IN SOUTH SELANGOR DISTRICTS (HULU LANGAT, KUALA LANGAT, SEPANG) AND PUTRAJAYA 2021: A CROSS-SECTIONAL STUDY ON KAP

BY

NURFATIHAH BINTI SAMAT

Thesis submitted in fulfilment of the requirement for the degree of Bachelor of Science in Environmental and Occupational Health with Honours from the Faculty of Medicine and Health Sciences, Universiti Putra Malaysia

© COPYRIGHT UPM

ACKNOWLEDGEMENTS

First and foremost, I want to express my deepest gratitude to Almighty Allah for granting me with great health and the energy to complete the thesis as a part of the requirements for completing my degree and graduating as an Environmental and Occupational Health student at Universiti Putra Malaysia.

Dr. Karmegam Karuppiah, my supervisor, has been helpful in educating, supporting, and guiding me through this whole project. I would not be able to write and finish this thesis without his dedication, attention, and support.

This research also would not complete without the help of Ms. Noor Sakinah binti Ahmad and Dr. Murugadas A/L Ramdas@Chelamuthu lecturer from Politeknik Premier Sultan Salahuddin Abdul Aziz Shah. They were really helpful in guide me from the starting of the study until end of the study process. Lastly, I would like to thank all respondents who volunteered to participate in this study and their cooperation given throughout the data collection process.

© COPYRIGHT UPM

ABSTRACT

FACTORS ASSOCIATED WITH COVID-19 SOP COMPLIANCE AMONG SCHOOL ADMINISTRATORS AND TEACHERS IN SOUTH SELANGOR DISTRICTS (HULU LANGAT, KUALA LANGAT, SEPANG) AND PUTRAJAYA 2021: A CROSS SECTIONAL STUDY ON KAP

NURFATIHAH BINTI SAMAT

Introduction: Due to strict action by the government, schools are allowed to reopen again in condition they need to comply with the Standard Operating Procedures enforced by government. However, from January 1 until April 20, 2021 there are about 5000 COVID-19 cases related to 83 clusters of education. To assure that the schools comply with the SOPs, understanding the COVID-19 basic information, transmissions and symptoms is essential. To ensure that the public's understanding on Covid-19 in influencing the success of preventing its transmission, a reliable tool has been used which is Knowledge, Attitude, and Practice (KAP) study. **Objective:** To identify the determinant factors of knowledge, attitude and practice towards COVID 19 SOP compliance among school administrators and teacherss in Southern Selangor districts (Hulu Langat, Kuala Langat, Sepang) and Putrajaya. **Methodology:** A cross-sectional online survey was conducted among the school administrators and teachers which involved 251 respondents consists of teachers and school administrators. The survey instrument consisted of socio-demographic characteristics, 25 items on knowledge, 10 items on attitudes and 18 items on practices, adapted from a previous study. Descriptive statistics, t-test, one-way analysis of variance (ANOVA), Pearson's correlation and linear regression were utilized to measure all the variables. **Results and Discussion:** The overall correct rate of the knowledge item was 98.0%. For attitude and practice, it also shown that majority of the respondents (97.6%) had positive attitudes toward the successful control of COVID-19 and 96.4% of the respondents had good practice towards COVID-19 preventive measures. There is also significant association between both knowledge and attitude with practice. Knowledge scores significantly differed ($P < 0.05$) across races, monthly income, school location, exposed to food poisoning at school and experienced a lot of stress in daily life. Attitude scores were significantly different between races and school location ($P < 0.05$), whereas practice scores varied significantly across current position at school, exposed to TB at school and smoking ($P < 0.05$). Results from multiple linear regression indicated that good practice scores were significantly associated with teachers and positive attitude ($P < 0.05$), whereas poor preventive measures were associated with people that smoking. **Conclusion:** This study concludes that respondents had good knowledge, positive attitude and good practice towards COVID-19 preventive measures. Although the findings are encouraging, it is recommended that school administrators and teachers continue to improve its KAP in the battle against COVID-19 and other emerging infectious diseases so that school will be the safest place for the children as well as staffs despite any occurrence of disease. This study also concluded that race, monthly

© COPYRIGHT UPM

income, respondents' school location, exposed to infectious disease cases at school, current position and smoking were the determinant factors of KAP towards COVID-19.

Keywords: COVID-19, knowledge, attitude, practice, school administrators and teachers, Standard Operating Procedure

© COPYRIGHT UPM

ABSTRAK

FAKTOR-FAKTOR YANG BERKAITAN DENGAN PEMATUHAN SOP COVID-19 DALAM KALANGAN PENGURUSAN SEKOLAH DI DAERAH SELANGOR SELATAN (HULU LANGAT, KUALA LANGAT, SEPANG) DAN PUTRAJAYA 2021: KAJIAN RENTAS KE ATAS KAP

NURFATIHAH BINTI SAMAT

Pengenalan: Disebabkan tindakan tegas oleh pihak kerajaan, sekolah dibenarkan untuk dibuka semula dengan syarat mereka perlu mematuhi Prosedur Operasi Standard yang dikuatkuasakan oleh kerajaan. Bagaimanapun, dari 1 Januari hingga 20 April 2021 terdapat kira-kira 5000 kes COVID-19 yang berkaitan dengan 83 kluster pendidikan. Untuk memastikan sekolah mematuhi SOP, memahami maklumat asas, penularan dan gejala COVID-19 amatlah penting. Bagi memastikan kefahaman masyarakat terhadap Covid-19 dalam mempengaruhi kejayaan mencegah penularannya, satu alat yang boleh dipercayai telah digunakan iaitu kajian Pengetahuan, Sikap dan Amalan (KAP). **Objektif:** Untuk mengenal pasti faktor penentu pengetahuan, sikap dan amalan terhadap pematuhan SOP COVID 19 dalam kalangan pengurusan sekolah di bahagian daerah Selangor Selatan (Hulu Langat, Kuala Langat, Sepang) dan Putrajaya. **Metodologi:** Tinjauan keratan rentas dalam talian telah dijalankan di kalangan pengurusan sekolah yang melibatkan 251 responden terdiri daripada guru dan pentadbir sekolah. Instrumen tinjauan terdiri daripada ciri sosio-demografi, 25 item pengetahuan, 10 item sikap dan 18 item amalan, diadaptasi daripada kajian lepas. Statistik deskriptif, ujian-t, analisis varians sehala (ANOVA), korelasi Pearson dan regresi linear digunakan untuk mengukur semua pembolehubah **Keputusan dan Perbincangan:** Kadar betul keseluruhan item pengetahuan ialah 98.0%. Bagi sikap dan amalan, ia juga menunjukkan bahawa majoriti responden (97.6%) mempunyai sikap positif terhadap kejayaan mengawal COVID-19 dan 96.4% responden mempunyai amalan yang baik terhadap langkah pencegahan COVID-19. Terdapat juga perkaitan yang signifikan antara kedua-dua pengetahuan dan sikap dengan amalan. Markah pengetahuan berbeza dengan ketara ($P < 0.05$) merentas kaum, pendapatan bulanan, lokasi sekolah, terdedah kepada keracunan makanan di sekolah dan mengalami banyak tekanan dalam kehidupan seharian. Skor sikap adalah berbeza dengan ketara antara kaum dan lokasi sekolah ($P <0.05$), manakala skor amalan berbeza dengan ketara merentas kedudukan semasa di sekolah, terdedah kepada TB di sekolah dan merokok ($P <0.05$). Keputusan daripada regresi linear berganda menunjukkan bahawa skor amalan baik dikaitkan secara signifikan dengan guru dan sikap positif ($P <0.05$), manakala langkah pencegahan yang lemah dikaitkan dengan orang yang merokok. **Kesimpulan:** Kajian ini merumuskan bahawa responden mempunyai pengetahuan yang baik, sikap positif dan amalan yang baik terhadap langkah pencegahan COVID-19. Walaupun hasil kajian ini agak memberangsangkan, pengurusan sekolah dicadangkan untuk terus menambah baik KAP dalam memerangi COVID-19 dan penyakit berjangkit lain yang semakin meningkat supaya sekolah menjadi tempat paling selamat untuk

© COPYRIGHT UPM

kanak-kanak dan juga kakitangan walaupun terdapat sebarang penyakit. Kajian ini juga merumuskan bahawa kaum, pendapatan bulanan, lokasi sekolah responden, terdedah kepada kes penyakit berjangkit di sekolah, jawatan semasa dan merokok merupakan faktor penentu KAP terhadap COVID-19.

Kata kunci: COVID-19, pengetahuan, sikap, amalan, pengurusan sekolah, Prosedur Operasi Standard

© COPYRIGHT UPM

DECLARATION II

SIGNATURE OF SUPERVISOR/INTERNAL EXAMINER III

ACKNOWLEDGEMENTS IV

ABSTRACT V

ABSTRAK VII

LIST OF TABLES XIII

LIST OF FIGURES XIV

LIST OF ABBREVATIONS XV

CHAPTER 1: INTRODUCTION 1

1.1 Background 1

1.2 Problem Statement 6

1.3 Study Justification 12

1.4 Research Questions 14

1.5 Research Objectives 15

1.5.1 General Objective 15

1.5.2 Specific Objectives 15

1.6 Hypothesis 15

1.7 Definition of Variables 16

1.7.1 Conceptual Definition 16

1.7.2 Operational Definition 18

1.8 Conceptual Framework 19

CHAPTER 2 :LITERATURE REVIEW 21

© COPYRIGHT UPM

2.1 Covid-19 **21**

2.2 Covid-19 And Reopening Of Schools **23**

2.3 Covid-19 Safety And Health Management In Schools **26**

2.4 Knowledge, Attitude And Practice (Kap) **35**

2.5 Previous Kap Study Related With Covid-19 **38**

2.6 Sustainable Developmental Goals (SDGs): Good Health And Well Being **40**

2.7 Research Gap **42**

CHAPTER 3:METHODOLOGY **43**

3.1 Study Design **43**

3.2 Study Location **43**

3.3 Study Population **44**

3.4 Sampling **44**

3.4.1 Sampling Frame **44**

3.4.2 Inclusion Criteria **45**

3.4.3 Exclusion Criteria **45**

3.4.4 Sampling Method **45**

3.4.5 Sample Size **47**

3.4.6 Flow Chart of Progress **54**

3.5 Study Instrumentation and Data Collection **55**

3.5.1 Questionnaires **55**

3.6 Quality Control **56**

3.6.1 Questionnaires **56**

3.7 Statistical Analysis **57**

© COPYRIGHT UPM

3.8 Expected Outcome **59**

3.9 Ethical Consideration **60**

CHAPTER 4: RESULTS **61**

4.1 Socio-Demographic, Occupational And Lifestyle Information Of The Respondents. **61**

4.2 Reliability And Normality Analysis **67**

4.3 Level Of Knowledge, Attitude, And Practice Towards Covid-19 Sop Compliance By The School administrators and teachers. **69**

4.4 Level Of Covid-19 Sop Compliance (Kap) By Socio-Demographic Characteristics, Lifestyle, And Occupational Factors Among The School administrators and teachers **79**

4.5 To Examine The Relationship Of Knowledge, Attitude, And Practice Towards Covid-19 Sop Compliance By The School administrators and teachers **89**

4.6 To Determine The Factors Associated With Practice Towards Covid-19 Sop Compliance By The School administrators and teachers. **90**

CHAPTER 5: DISCUSSION **92**

5.1 Sociodemographic Characteristics, Lifestyle And Occupational Factors Of The Respondents. **92**

5.2 Level Of Knowledge Towards Covid-19 Sop Compliance By The School administrators and teachers. **94**

5.3 Level Of Attitude Towards Covid-19 Sop Compliance By The School administrators and teachers. **96**

5.4 Level Of Practice Towards Covid-19 Sop Compliance By The School administrators and teachers. **97**

5.5 Level Of Covid-19 Sop Compliance (Kap) By Socio-Demographic Characteristics, Lifestyle, And Occupational Factors Among The School administrators and teachers. **98**

5.6 Relationship Of Knowledge, Attitude And Practice Towards Covid-19 Sop Compliance By The School administrators and teachers. **100**

© COPYRIGHT UPM

5.7 Factors Associated With Practice Towards Covid-19 Sop Compliance By The School administrators and teachers. **100**

CHAPTER 6 :CONCLUSION **102**

6.1 Conclusion **102**

6.2 Strength of The Study **103**

6.3 Limitation of The Study **103**

6.4 Recommendation **104**

REFERENCES **105**

APPENDICES **114**

APPENDIX 1 **114**

APPENDIX 2 **123**

APPENDIX 3 **126**

APPENDIX 4 **144**

© COPYRIGHT UPM

LIST OF TABLES

		Page
Table 4.1	Socio-demographic characteristics, occupational and lifestyle information of the respondents	58
Table 4.2	Occupational of the respondents	61
Table 4.3	Lifestyle information of the respondents	62
Table 4.4	Reliability Coefficients for Each Variable	65
Table 4.5	The Assessment for Normality of Data Distribution	
Table 4.6	Descriptive Statistics for knowledge	66
Table 4.7	Descriptive Statistics for attitude items	69
Table 4.8	Descriptive Statistics for practice	71
Table 4.9	Mean level of knowledge, attitude and practice towards Covid-19	75
Table 4.10	Relation between Socio-demographic characteristics with KAP scores of Covid-19	75
Table 4.11	Relation between occupational information with KAP scores of Covid-19	78
Table 4.12	Relation between lifestyle information with KAP scores of Covid-19	81
Table 4.13	Relationship between knowledge and practice	85
Table 4.14	Relationship between attitude and practice	85
Table 4.15	Results of multiple linear regression on factors associated with practice towards COVID-19 SOP compliance	86

© COPYRIGHT UPM

LIST OF FIGURES

		Page
Figure 1.1	Conceptual framework of the study	18
Figure 3.1	Maps of Southern Selangor districts (Hulu Langat, Kuala Langat, Sepang) and Putrajaya district. (Source: Visit Selangor, 2021)	42
Figure 3.2	Multistage Sampling Method	45

© COPYRIGHT UPM

LIST OF ABBREVATIONS

KAP	Knowledge, Attitude and Practice
WHO	World Health Organization
CDC	Centres for Disease Control and Prevention
SOP	Standard Operating Procedures
MCO	Movement Control Order
CMCO	Conditional Movement Control Order
RCMO	Recovery Movement Control Order
EMCO	Enhanced Movement Control Order
MOH	Ministry of Health
MOE	Ministry of Education
HFMD	Hand, food and mouth disease
TB	Tuberculosis
MCMC	Ministry of Communication and Multimedia
LOA	Letter of Absence

© COPYRIGHT UPM

CHAPTER 1

INTRODUCTION

1.1 Background

In late December 2019, countries all over the world had been shocked by a newly discovered coronavirus which was initially found in Wuhan City, Hubei Province, China (WHO, 2020). Based on the investigation, Huanan (Southern China) Seafood Wholesale Market which had been directed to be closed had become the main sources of the spread of this pneumonia of an unknown etiology. World Health Organization (WHO) had announced that this unknown etiology named as coronavirus disease 2019 also known as Covid-19 (WHO, 2020). Covid-19 then had been declared as a pandemic as it had spread in multiple countries in the world

Following the occurrence of this pandemic, health organizations from all over the countries had discussed preventive measures that should be taken to cope with the transmission of this virus. Centers for Disease Control and Prevention (CDC) had provided guidance to public to protect themselves from the virus which are wearing masks that cover nose and mouth, staying 6 feet apart from others, avoid crowded and poor ventilated indoor areas, washing hands frequently by soaps or use hand sanitizers and get vaccinated

In Malaysia, government had enforced 4 different types movement control which are Movement Control Order (MCO), Conditional Movement Control Order (CMCO), Recovery Movement Control Order (RMCO) and Enhanced Movement Control Order (EMCO) (Covid- 19-MOH, 2021). As of May 2021, the Prime

© COPYRIGHT UPM

Minister had announced Movement Control Order (MCO 3.0) due to rapid increases of Covid-19 cases. As of August 2021, daily Covid-19 cases had exceeded 10,000 cases a day which make all the Malaysians become anxious.

When the government, had enforced MCO 1.0 starting from 18 March until 3 May 2020, only essential services can be operated and education sector is one of the affected sectors where all public and private schools, universities, kindergarten, daycare, tahfiz centre and others were enforced to be closed (Times, 2020). Globally, there are more than 1 billion children that were affected due to the closures of schools as a result of Covid-19 lockdowns (UNICEF, 2020).

The enforcement of strict Movement Control Order (MCO 1.0) has shown a great news when there is decreasing of daily new Covid-19 cases after 14 April 2020 (Department of Statistics Malaysia (DOSM), 2020). The strict enforcement which encompasses restriction of movement, border control, medical screening and contact tracing of persons suspected to be infected by Covid-19 also personal hygiene practices have led to reduction of active Covid-19 cases in our country (Tang, 2020). Therefore, government had announced some sectors to resume their operation and this include the reopening of schools with the condition that they need to adhere with the Standard Operating Procedures (SOPs) that have been enforced by the government.

Besides, United Nations International Children's Emergency Fund (UNICEF) also had provided a framework for reopening of schools. For the schools that have been selected to be reopen, six key dimensions should be utilized to evaluate their readiness and inform planning which are policy, finance, safe operations, learning, reaching the most marginalized and well- being protection (UNICEF,2020).

© COPYRIGHT UPM

Policy considerations and financial demand together can help to develop the enabling environment required to support each of the other dimensions. For safe reoperation of schools, UNICEF had recommended on before, during and after school reopening which consists of development of critical policies and financial plans to enhance the learning process, reduce the risks by improving hygiene and sanitation, train schools staff on physical distance, monitoring the school reopening and they need to actively check on the health indicators, develop decision construct prior to reclosing and reopening of schools if there is community transmission occur.

For dimensions of learning, UNICEF had focused on how to compensate for the loss of learning during the pandemic by administering support and training on remote learning to the teachers and the head of the school and provide the students' mental health and psychosocial (MHPSS) needs. For wellbeing and protection, UNICEF had guided all countries to conduct risk assessment for teachers and staff considering their sociodemographic factors and strengthen protection of the children by providing essential services like water, sanitation and hygiene (WASH), school feeding, vaccination and others. For the last dimensions, prior to school reopening, we need to comply with the policies and practices to broaden access to marginalized groups like out-of-school children, displaced, migrant and minorities and public health information need to be easily accessible for those with sensory impairment (UNICEF, 2020).

Although there was strict enforcement for schools reopening, the Ministry of Health had reported that there were some cases that related with education sectors. Between 1 January until 20 April 2021, there were about 83 Covid-19 clusters that were related with 6 education sectors. The former Health Minister, Datuk Seri Dr.

© COPYRIGHT UPM

Adham Baba said of the 83 clusters there are 49 clusters that are still active which have involved 2617 patients. From the total education clusters, 39 of them were associated with schools or institutions under the Ministry of Education (MOE) (Harun, 2020).

The Ministry of Health (MOH) also reported that 79 schools in Selangor have been directed to close 2 days from 26 April to 27 April 2020 following the Covid-19 cases that have been detected by MOH. From this, there are 18 schools from Hulu Langat, 2 in Kuala Langat and 2 in Sepang that need to be closed and based on the investigation one of the major factors that lead to this issue is due to poor hygiene at the schools' toilets (FMT Reporters, 2021).

In a study conducted at K-12 schools Wood County, Wisconsin, there are 191 Covid-19 cases occur after reopening of schools during the 13 weeks study period which involves 133 students and 58 staff in 17 K-12 schools (Falk et al., 2021).

In Singapore, nationwide surveillance and contact-tracing in February and March 2020 had identified that there are two students found to be SARS-CoV-2 positive (12-year-old and 5-year-old) who attended secondary school and preschool respectively and both students present at their schools on the first day of their symptoms developed before being diagnosed with Covid-19 and directed to be isolated in hospital. Following the cases, 8 secondary and 34 preschool students were screened as they developed symptoms and results showed that all contacts were found to be negative Covid-19 (Yung et al., 2021).

KAP survey about Covid-19 SOPs compliance among school administrators and teachers is important as we are able to identify their knowledge, attitude and practice towards the SOPs and measure their compliance level.

© COPYRIGHT UPM

In a study conducted among teachers in Shenzhen, China, it shows that respondents had lower knowledge level of Covid-19 where 27.6% answered wrongly on Covid-19 transmission and about half of respondents still confuse on suitable masks to be used during the pandemic (Chen et al.,2021). This study also stated that secondary schools' teachers showed poor attitude about Covid-19 as compared to kindergarten teachers due to the number of students in school that need to be controlled. Research have shown that there is positive association between knowledge, attitude and practice (Al Ahdab, 2021), thus, when there is low knowledge, negative attitude toward Covid-19 it led to poor practice towards the preventive measures of Covid-19 where possibility of rising Covid-19 cases may be increase.

In early June of 2021, Tan Sri Muhyiddin Yasin the former prime minister had announced the National Recovery Plan (NRP) or Pelan Pemulihan Negara (PPN) which was applicable until the end of 2021. Under this plan, there are four phases which involve all states in Malaysia.

On 12 September 2021, Dr. Mohd Radzi Md Jidin, Minister of Education had announced the reopening of schools according to phase. According to the announcement that has been made, the reopening of schools started on 3rd of October. However, this is only applicable on the states that have transitioned to phase 2 and above of the NRP (Perimbanayagam, 2021). For every phase, there are guidelines that should be followed by the school administrators and teachers as every phase has different rules needed to be applied.

© COPYRIGHT UPM

Other than students and parents, school administrators and teachers play big roles in preparation to safely reopen the schools to avoid any covid-19 cluster that came from the education sectors in the future.

Therefore, we need to identify the compliance level of the school administrators and teachers as well as the students to protect students, teachers, staff as well as the community from being infected by this contagious virus. Schools need to adhere to all the SOPs such as wearing masks, applying physical distance, practice hygienic measures and others to ensure school communities living in good health.

1.2 Problem Statement

Reopening of schools amid the pandemic bring concerns not among the parents itself but teachers also felt the pressure as they need to take precaution in safely reopening the schools. The compliance and adherence towards the standard operating procedures that enforced by government is important to avoid any Covid-19 transmission in the school. As far as we all know, currently there are many Covid-19 variants that evolved which strict precaution are needed especially in the school settings.

Although, there are guidelines that have been enforced with the cooperation with many authorities but there is still transmission of Covid-19 occur in the schools. According to Director General of Health, Tan Sri Dr Noor Hisham Abdullah, MCO and Conditional MCO itself not important but the compliance towards the SOPs is the leading factor to curbing the Covid-19 transmission in our country (Bernama, 2021).

© COPYRIGHT UPM

To ensure that the schools comply with the SOPs, understanding the COVID-19 basic information, transmissions and symptoms is essential. To ensure that the public's understanding on Covid-19 in influencing the success of preventing its transmission, a reliable tool has been used which is Knowledge, Attitude, and Practice (KAP) study. When there is good KAP level among the school administrators and teachers, there will be high Covid-19 SOP compliance among the teachers and students in the schools.

Previous studies have shown that the knowledge of Covid-19 among public and teachers is range from moderate to low regarding the common symptoms and transmission of Covid-19 (Azlan et al., 2020; Chen et al., 2021). With low knowledge related with Covid-19, it can lead to non- compliance of Covid-19 SOP among the school administrators and teachers which then can cause transmission of the virus in the schools if they unconcerned on the guidelines enforced by the government.

Even though previous studies have shown that good knowledge diseases, positive attitude and good practice towards preventive measures among the general public (Abu Hasan et al., 2020; Abu Samah et al., 2020) the KAP level among the school administrators and teachers is still unclear. There is limited study of KAP towards the Covid-19 SOP compliance that were conducted among the school administrators and teachers like teachers, headmasters, principals and others.

Study of Covid-19 related KAP among teachers in China showed that 99.7% participants believed that the wearing of masks are adequate preventive measures of Covid-19 however there are some participants confused for the suitable of masks should be used as there are 27.5%, 13.6% and 3.8% had answered type of masks

© COPYRIGHT UPM

used are dust masks activated carbon masks and cotton masks respectively (Chen et al., 2021). In term of precaution in classroom majority agreed that they should comply with the preventive measures in classroom enforce by government to help prevent the spread of Covid-19. Chen et al. (2021) also stated that among the participants, there are 91.5% failed to understand that vaccination is the most effective measures to curb with the pandemic.

With limited study on KAP among the school administrators and teachers towards SOPs compliance, it is quite difficult to identify schools' management compliance level towards all the preventive measures and further action could not be taken by higher authority although statistics have shown higher Covid-19 cases related with educational settings.

As of April 2021, there are about 5000 Covid-19 cases related to 83 clusters of education. In Selangor there are some Covid-19 clusters that are linked with education sectors. Until May 2021 the clusters from education sectors that were reported by Ministry of Health are Jalan Bukit Naga, Persiaran Setia Prima and Jalan Wau clusters in Shah Alam, Jalan Kuala Garing cluster in Rawang, Taman Medan in Petaling Jaya, Jalan Langat Ceria which involve Hulu Langat, Petaling, Klang, Kuala Langat, Gombak and Sepang districts; and others.

In addition, the Selangor Education Department also had given order for 79 schools in Selangor to be closed for two days starting from 26 April until 27 April 2020. Out of 79 schools, there are 19 schools in Hulu Langat, two schools in Sepang and two schools in Kuala Langat are directed to be closed. However, following the greatly rising of Covid-19 cases in Malaysia which almost reach 9000 cases a day as in May 2021, government had enforced Movement Control Order (MCO) 3.0 in all

© COPYRIGHT UPM

states in Malaysia starting from 12 May 2021 until 7 June 2021 which forces all schools under Ministry of Education to be shut except for day-care centre.

In Thailand, following the surge of Covid-19 cases across the country, the Education Ministry has postponed the start of school term until 14th June 2021 but for schools in red and orange control zones, they may open their schools before that date with the condition that they must administer a readiness assessment under the Public Health Ministry's Thai Stop Covid Plus system and get permission from their Provincial Communicable Disease Committee (The Star, 2021).

Recently, Singapore Ministry of Education (MOE) had stated that there was an occurrence of the first case of school-based coronavirus transmission at Anglo-Chinese School (Junior) which involves an 11-year-old student. The student is linked with the new cluster currently involving his 12-year-old classmate and a 46-year-old Singaporean investment banker at DBS and the close contact of the boys have been identified and placed under quarantine (Siang, 2021).

There are many factors that lead to transmission of Covid-19 in school settings where non-adherence among the school's management towards the SOPs is one of the predictors of this issue.

In Kuantan Malaysia, parents seem to not follow the SOPs when fetched their children at school entrance where some of them did not wear masks and parents claimed that due to hot weathers, they are unable to follow the social distancing rules when pick up their children (New Straits Times, 2020). The inconsistency of the use of masks makes people think that there is no use either the wear or not the masks but U.S CDC had strongly encouraged all the students, teachers, all staffs and parents to

© COPYRIGHT UPM

wear the mask all the time to ensure their safety in the schools and outside the schools as we are unable to predict the presence of the virus in our environment.

Ann Piggott, the President of Association of Secondary Teachers in Ireland (ASTI) has stated that there are some schools not applying the physical distancing rules in the schools (Quann, 2021). The high-risk teachers were forced to teach their children in a crowded classroom and it has been reported that many schools did not practice the physical distancing in their classroom.

Ubaidah et al (2021) had reported that inadequate areas available at school in order to maintain physical distancing and not enough of schools' staff like teachers to monitor their students in term of Covid-19 SOPs compliance are the obstacles for students and teachers not- adhere with the available preventive measures. This study that was conducted among the private school teachers shown that it is easy to manage the students in their schools as there is lower number of the students compared to government schools. Teachers in government schools unable to implement the SOP compliance successfully may due to disciplinary problems among the students (Ubaidah et, al. 2021).

In a study conducted among headteachers and the school's representative in 105 England's primary schools, it shown that some of the teachers did not implement the preventive measures enforced by their government. There are 16 out of 99 schools that did not implement the maintenance of 2m distance from others for students. Other than that, there are also other measures not being implement by the schools as it was not being recommended by the government guidance but the health organization like WHO and CDC had advised to implement it in the schools' settings which are the use of face masks, temperature check, the use of hand sanitizers and

© COPYRIGHT UPM

others. According to the survey, there are 78 out of 100 schools and 92 out of 99 schools that did not implement the wearing of face masks or face coverings for the staff and students measures respectively (Sundaram et al., 2021).

In a study that run in Georgia, there are 9 clusters of more than 3 epidemiologically linked COVID-19 cases were recognize which including 13 teachers and 32 students at six of the eight primary schools. In seven clusters (A, B, C, D, E, F, and I), the Covid-19 spread among teachers and students might have happened throughout small group instruction periods in which teachers worked near with the students and the spread in five clusters are likely caused by lack of mask use among the students as they did not wear it during lunch hour in the classroom (Jeremy et al., 2021).

Identification of factors associated with practice towards COVID-19 SOP compliance by the school administrators and teachers is vital in help to curb the transmission of Covid-19. Other than that, by knowing the factors that associated with practice, it could assist future researchers and related authorities to take further action to cope with the issues. For example, previous study had shown that there the level of knowledge towards COVID-19 in male and people that live in rurals were low as compared to female and people that live in urban areas (Abu Hasan et al., 2020). Currently, there are some researches that have been conducted only among the public to identify the factors of SOP compliance during Covid-19 pandemic in other countries. By using Health Belief Model (HBM) construct, study in United States recorded that older age, non-Hispanic individuals, high perceived susceptibility and perceived benefit of recommendation was associated with increase of social distancing compliance (Alexa et al., 2021). Men, younger age and less

© COPYRIGHT UPM

educated teachers showed lower levels of Covid-19 related KAP based on the study in China (Chen et al., 2021).

In addition, knowledge and attitude also correlated with public practice on Covid-19 prevention. Study shown that there is positive association between knowledge-practice and attitude-practice (Abu Hasan et al., 2020; Al Ahdab, 2021). Although government have continuously educated the schools management towards the SOPs compliance, the association between all these factors including sociodemographic, occupational and lifestyle and the KAP level among the schools' management is still unclear due to limited study that run among these population.

The KAP results may vary between school administrators and teachers and public as every community has different understanding and behaviors toward Covid-19. Therefore, this study was designed to identify the level of knowledge, attitude, and practice about COVID-19 SOPs compliance among school administrators and teacherss in Malaysia. This study also exposed the school administrators and teacherss to the information about COVID-19 pandemic and its implication to health and safety to human population. By conducting this study, we will be able to advocate the adherence to SOPs at school settings and determine the factors that associated with the practice of Covid-19 prevention in schools.

1.3 Study Justification

This study will present the data of factors associated with Covid-19 SOP Compliance among the school administrators and teachers in terms of their knowledge, attitude and practices. Currently, there is limited study regarding Knowledge, Attitude and Practice of Covid-19 that is conducted in school-based

© COPYRIGHT UPM

settings. We can see that most of the study was conducted among the university students, communities and residents of the country. There is a definite study being conducted in Malaysia. In addition, there is no study that identifies the factors associated with SOP Compliance among the school administrators and teachers in Malaysia. As we know, until May 2021, there are many Covid-19 cases that are related to the educational sectors.

Although the Ministry of Education (MOE) and Ministry of Health (MOH) had enforced the guidelines which should be followed by all schools when operating their schools, there are still many of them that violate the rules.

This study also will be conducted in four locations that have high Covid-19 cases in Malaysia which is in the Southern part of Selangor (Hulu Langat, Kuala Langat and Sepang) also Putrajaya. These four areas can be categorized as dense and urbanized cities as there are many industrial areas, government agencies, small business enterprises as well as housing areas here. Due to the high population in these four locations, it is mandatory for all these locations to follow the SOP as they have the probability to have closed contact with others especially in the workplaces, shopping complex, and others.

Communities especially the students, teachers and school staff that did not comply with SOPs outside schools may have a higher possibility of being infected and transmitting the virus when they go to school. Therefore, if the school administrators and teachers works efficiently in doing the screening, contact tracing, testing and also practices all the SOP, the chances for transmission of the virus is lesser.

© COPYRIGHT UPM

This study is really important as it is able to evaluate the Knowledge, Attitude and Practices of school administrators and teachers towards the Standard Operating Procedures for operation of schools which are enforced by MOE. The school administrators and teachers includes the teachers and all staff that work in the school offices like administration department, school guards, food handlers in canteen, school cleaners and others. If the school's management is able to operate the schools by following the SOP successfully, thus, it will be able to help in flattening the curve of Covid-19 in Malaysia as well as in the worldwide.

By doing this study we are able to identify the determinant factors of the knowledge, Attitude, and practice towards COVID-19 SOP compliance among school administrators and teacherss in Malaysia. This study is also able to educate the school administrators and teachers about the information about COVID-19 pandemic and its implication to health and safety to the human population. Results of this study provide beneficial information to the other researcher on how the school administrators and teachers thinks, interprets and responds about COVID-19 issues.

1.4 Research Questions

1. What are the levels of knowledge, attitude and practice towards COVID-19 SOP compliance among the school administrators and teachers?

2. Are there any significant differences between the level of COVID-19 SOP compliance (KAP) and socio-demographic characteristics, lifestyle and occupational factors among the school administrators and teachers?

3. Is there any significant relationship of knowledge, attitude, and practice towards COVID- 19 SOP compliance by the school administrators and teachers?

© COPYRIGHT UPM

4. What are the determinant factors associated with practice towards COVID-19 SOP compliance by the school administrators and teachers?

1.5 Research Objectives

1.5.1 General Objective

To identify the determinant factors of knowledge, attitude and practice towards COVID-19 SOP compliance among school administrators and teachers in Southern Selangor districts (Hulu Langat, Kuala Langat, Sepang) and Putrajaya.

1.5.2 Specific Objectives

1. To determine the sociodemographic characteristics, lifestyle and occupational factors of the respondents.
2. To identify the level of knowledge, attitude, and practice towards COVID-19 SOP compliance by the school administrators and teachers.
3. To compare the level of COVID-19 SOP compliance (KAP) by socio-demographic characteristics, lifestyle, and occupational factors among the school administrators and teachers.
4. To examine the relationship of knowledge, attitude and practice towards COVID-19 SOP compliance by the school administrators and teachers.
5. To determine the factors (knowledge, attitude, sociodemographic, lifestyle and occupational) associated with practice towards COVID-19 SOP compliance by the school administrators and teachers.

1.6 Hypothesis

© COPYRIGHT UPM

1. There is a significant difference between the level of Covid19 SOP compliance (KAP) and socio-demographic characteristics, lifestyle and occupational factors among the school administrators and teachers.

2. There is a significant relationship between knowledge and practice towards COVID-19 SOP compliance by the school administrators and teachers.

3. There is a significant relationship between attitude and practice towards COVID-19 SOP compliance by the school administrators and teachers.

4. There is a significant association between the factors associated with practice towards COVID-19 SOP compliance by the school administrators and teachers.

1.7 Definition of Variables

1.7.1 Conceptual Definition

Knowledge

Knowledge means "the fact or condition of knowing something with familiarity gained from experience or association" (Merriam Webster, 2021).

Attitude

Attitude means "a feeling or way of thinking that affects a person's behaviour" (Merriam Webster, 2021).

Practice

Practice means "the activity of doing something, again and again, to become better at it" (Merriam Webster, 2021).

© COPYRIGHT UPM

Covid-19

COVID-19 is a disease caused by a new strain of coronavirus. 'CO' stands for corona, 'VI' for the virus, and 'D' for disease. Formerly, this disease was referred to as ‘2019 novel coronavirus' or '2019-nCoV.' The COVID-19 virus is a new virus linked to the same family of viruses as severe acute respiratory syndrome (SARS) and some types of a common cold (WHO, 2020).

Standard Operating Procedures (SOPs)

"A Standard Operating Procedure is a document that describes the regularly recurring operations relevant to the investigation's quality. The purpose of an SOP is to carry out the operations correctly and always in the same manner. An SOP should be available at the place where the work is done" (FAO, 2020)

Compliance

"An act or process of complying with a demand or recommendation" (Merriam Webster, 2021).

School administrators and teachers

School is defined as "a place where people are educated" (Cambridge Dictionary, 2021), while Management is defined as "the group of people responsible for controlling and organizing a company." (Cambridge Dictionary, 2021).

© COPYRIGHT UPM

1.7.2 Operational Definition

Knowledge

Assessment of knowledge will be measured by using a self-developed questionnaire modified from another research questionnaire. Based on a scaled response of "strongly disagree", "disagree", "neither agree nor disagree", "agree", and "strongly agree" from the respondents. Scoring is given from one to five for "strongly disagree" until "strongly agree", respectively. Then, the result's scoring will be grouped into three different levels: good, moderate, and low.

"Not sure" = "Neither agree nor disagree"

Attitude

Assessment of attitude will be measured by using a self-developed questionnaire modified from another research's questionnaire. The answer is based on a scaled response of "strongly disagree", "disagree", "not sure", "agree", and "strongly agree" from the respondents. Scoring is given from one to five for "strongly disagree" until "strongly agree", respectively. Then, the result's scoring will be grouped into three different levels: good, moderate, and low.

Practice

Assessment of practice will be measured by using a self-developed questionnaire modified from another research's questionnaire. The answer is based on a scaled response of "never", "rarely", "sometimes", "often", and "always" from the respondents. Scoring given is from one to five for "never" until "always",

© COPYRIGHT UPM

respectively. Then, the result's scoring will be grouped into three different levels: good, moderate, and poor.

1.8 Conceptual Framework

Figure 1.1 shows the conceptual framework for this study. This conceptual framework highlights on the relationship between independent variable and dependent variable. This study will show the relationship between independent variable which is knowledge and attitude with the dependent variable practice towards Covid-19 SOP compliance among the schools' management in order to create good health and well-being of the students, teachers, staff as well as the community itself. It also connects both variables with the scope of study in the research.

© COPYRIGHT UPM

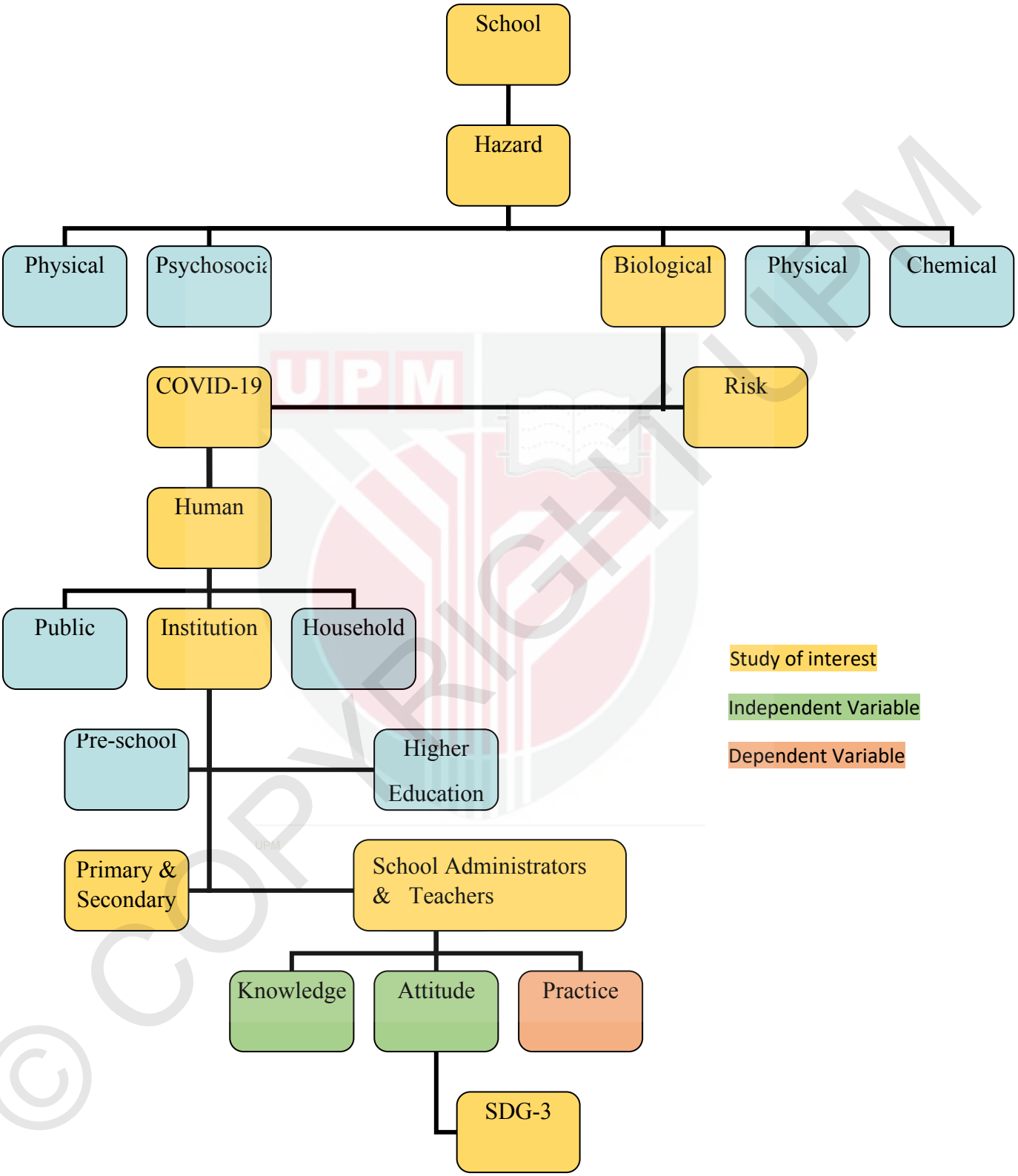


Figure 1.1: Conceptual framework of the study

© COPYRIGHT UPM

CHAPTER 2

LITERATURE REVIEW

2.1 COVID-19

In the late of December 2019, people worldwide have been awakened by big news about a newly discovered coronavirus that can cause an infectious disease. In the end of December 2019, the World Health Organization (WHO) China Country Office was informed that there were cases of pneumonia of an unknown etiology that were detected in Wuhan City, Hubei Province of China (WHO, 2020). On 11 February 2020, WHO had announced that the causal of this epidemic outbreak that results in shock to the whole population is a novel of coronavirus that discovered in 2019 (2019-nCoV), thus, they had named the disease as coronavirus disease 2019 also commonly known as Covid-19 (CDC, 2020). On 11 March 2020, WHO had characterized that Covid-19 as a pandemic after they had made some assessments also as the number of Covid-19 cases had increased 13-fold outside of China and the number of affected countries has tripled, WHO had declared the situation as pandemic (WHO, 2020).

In Malaysia, the first Covid-19 case was detected on 24 January 2020 and from the investigation there were 3 Chinese nationals who previously had close contact with infected persons in Singapore and had travelled into Malaysia via Singapore which then resulted in 22 more Covid-19 positive cases in Malaysia (WHO, 2020). This first wave of infection in Malaysia mostly occurred due to travel history from the infected countries or regions.

© COPYRIGHT UPM

Following that, on 27 February 2020, the second wave of infection of Covid-19 cases had occurred in Malaysia and caused the rise of Covid-19 cases drastically. Based on the investigation, the second wave resulted from transmission at a religious mass gathering that took place in Sri Petaling, Kuala Lumpur. The 4-day gathering had involved approximately 14 500 Malaysians and 2000 non-Malaysians and this event had led to spread of Covid-19 disease to the attendees from other countries and neighbouring countries like This also led to the enforcement of Movement Control Order (MCO).

As of the 24th April 2021 there are a total of 146,352,317 cases Covid-19 cases; 3,102,415 cases of deaths and 124,176,177 recovered cases have been reported throughout the world. According to World meter, the USA recorded the highest cases for Covid-19 cases until this date which is 32,735 704 for the total cases whereas the number of total deaths cases is 585,075. This ranking of highest cases for the whole country in the world is followed by India, Brazil, France, Russia and so on (Worldometers, 2020)

As this virus is transmitted through airborne transmission as well as through contact, preventive measures that are enforced by the government are compulsory to be followed by all the communities around the world. Each of us play a vital role in depleting the curves of the covid-19 cases although we need to face all the challenges to cope with the norm throughout this pandemic like wearing masks, social distancing and others in order to eliminate the virus in our community.

Currently, there are some vaccines that have be found by scientists in order to reduce and prevent all the populations from being infected. Evidence suggests the U.S. COVID-19 vaccination program has the ability to extensively reduce the burden

© COPYRIGHT UPM

of disease in the United States by preventing illness in fully vaccinated people and breaking the chains of transmission but the risks of Covid-19 infection in fully vaccinated people cannot be fully eradicate when the virus is extensively spread in the community, they still able to be infected and spread the virus (Coronavirus Disease 2019 (COVID-19) , 2020).Therefore, the new norm that we had practiced for about 1 year and half are the keys and our shield from this newly developed virus.

2.2 Covid-19 and Reopening of Schools

After about three months Malaysian students learning from home, now in June 2020, they will be able to return back to school after the government announced the reopening of schools in Malaysia. The schools' sessions start with allowing the secondary students which are Form 4 and Form 5 students to attend the class on 24th June 2020. The first phase of schools reopening involved 500,444 students from over 2,500 schools that take the public examination which is Malaysian Certificate of Education (SPM), Malaysian Vocational Certificate (SVM), Malaysian Higher School Certificate (STPM), Malaysian Higher Religious Certificate (STAM), and other international schools' examinations that similar with it. The Minister of Education, Dr Radzi Jidin also had announced on the second phase for schools reopening which started on 15th July 2020 which involve Form 6 students, Form 1 to Form 4 and Year 5 and Year 6 of primary schools while the third phase of reopening will begin on July 22 which involves Year 1 to Year of the primary schools (Harun & Arumugam, 2020).

In an article by UNICEF on children in Georgia opinion on going back to schools, they had shown positive responses toward it. Most of the children felt happy

© COPYRIGHT UPM

and excited although they had to comply with the strict rules as they were able to meet their friends, teachers, able to communicate with them and they were able to understand the topics as there is no interruption on the learning process due to unstable internet connection and others (UNICEF, 2020).

However, some parents felt anxious as the cases around them kept rising, which may be dangerous to the children to attend the schools. Based on some studies, it shown that the transmission of this virus in school settings is rare compared to cases from other settings like workplace, religious center and community but currently the cases become common due to the asymptomatic cases.

In a survey that was carried out in the school settings in Europe countries, it was informed that they had discovered more than 2 clusters with epidemiological link of Covid- 19 since the reopening of schools in 12 of the 17 countries in Europe which are in Belgium, Bulgaria, Croatia, Denmark, Finland, Ireland, Latvia, Lithuania, the Netherlands, Romania, Spain and Sweden which most of it involved both students and teachers. The clusters that were disclosed involved secondary schools (n=1,185), followed by primary schools (n=739) and preschools (n=283) (European Centre for Disease Prevention and Control [ECDC],2020).

In Singapore, the index case which is a 12-year-old student who attend the secondary schools was confirmed positive and based on contact tracing, the exposures are from the adult family household members who were part of the community clusters. following the occurrence of Covid-19 in that school, they have done the contact tracing from the index case and found 8 students developed symptoms like cough and rhinorrhoea but from the screening of SARS-CoV-2, the results for the 8 students shown negative (Yung et al., 2020). In addition, in mid of

© COPYRIGHT UPM

April until mid of May 2021, it has been reported that there are 42 students from 30 schools (pre-schools, primary, secondary schools, madrasah, junior college and some higher institutes) have been infected with Covid-19 (Kurohi., 2021). The cases were linked with clusters at the Learning Point tuition center which originally caused by a woman teacher while some of the cases were linked with Changi Airport cluster which initially caused by a cleaner at Ramky Cleantech Services.

In Malaysia, the Ministry of Health (MOH) had reported that there are 83 Covid-19 clusters which consists of 4,868 cases that related with the education sectors from January until 20 April 2021 and from the 83 clusters there are 49 clusters which consists of 2,617 cases that are still active until that date. Of the total clusters, 39 clusters (46.99%) involved schools or institutions under MOE, 19 clusters (22.89 %) involved higher education and 25 other clusters (30.125) involved other education sub-categories (Noorshahrizam, 2021).

According to Covid-19 data that recorded by MOH, there are several clusters that being reported in Selangor. Jalan Wau clusters in involved Petaling and Sepang districts where the index case was found positive on 19 April and it involved staffs as well as the students in a school located in Seksyen 11, Shah Alam. From the screening of the closed contact up until 30th April 2021, there are 356 individuals had been screened and 37 of them tested positive ("COVID-19 Malaysia Updates by MOH", 2021). Other education cluster that originates in Selangor is Jalan Sungai Merab clusters. This cluster involved Hulu Langat and Sepang district where the index case was tested positive on 1st May 2021 and this cluster involved the staffs and the school children of that school and based on the 295 individual who had

© COPYRIGHT UPM

undergo the contact tracing screening, there are 10 that tested positive up until 6th May 2021 (COVID-19 Malaysia, 2021).

Based on the rising cases of Covid-19 in Malaysia especially that evolved from the education sectors, many parents had expressed their concern regarding the issue and some had urged the government to take action, however Education Minister, Radzi Jidin had stated that they cannot make a resolution for closure of schools without any advice from district health office as the district health office need to conduct further risk analysis and assessment before the government can make decisions to closed the schools (Hassan, 2021). Therefore, to ensure that schools are safely open during pandemic, many precautions should be taken and up until now there are many guidelines that could be referred by school administrators and teachers as a guide to safely reopen the schools.

2.3 COVID-19 Safety and Health Management in Schools

For schools to reopen during this pandemic, there should be guidelines released to protect the students, teachers, staff, parents and others from being infected by Covid-19 in the schools. On 14th September 2020, WHO had published Considerations for school-related public health measures in the context of COVID-19 developed by specialists in education and Covid-19 from WHO, UNESCO and UNICEF. The general principles for school-related public health measures are to avoid and reduce the transmission of the virus in school settings, guarantee the educational and social learning as well as development of children are secure, sufficient and suitable for them. Next, reduce the risk of Covid-19 transmission in schools and school-related settings among the children, teachers and other school

© COPYRIGHT UPM

staff. Then, the principle of these measures is protection against the potential for schools to act as one of the sources for transmission of Covid-19 in the communities. Lastly, the principle of WHO measures is assuring school-related public health social measures accommodate the measures that are being implemented at community level (WHO, 2020).

In these guidelines, WHO had recommended several actions and control measures which consists of four levels of control measures, community level, school level, classroom level and individual at high risk level.

These community level measures are applicable to where the schools are being reopened in that community. Actions should be taken in that community area to conduct early detection, contact-tracing, quarantine, inspection of clusters, ensure the community apply all the personal hygiene practices and focus on false information related with Covid-19 to ensure no miscommunication and misunderstanding in the community (WHO,2020). Next for the school level, it highlighted administrative policies, infrastructure and maintenance of the school services like nutrition programs, counselling and others. There are several measures that were recommended by WHO at the classroom level which are physical distancing, wearing of masks, frequent hand washing, respiratory etiquette, environmental cleaning and disinfection, ventilation and space of the tables.

The physical distancing in schools should be applied both when students inside and outside the classroom. For both locations every student, teachers and all the staff should maintain at least 1 metre of distance between them (WHO,2020). According to the recommendations, there should be restriction of mixing of classes and age groups where schools may run the class by doing sessions for each class. For

© COPYRIGHT UPM

example, in Malaysia, every class in primary schools will take turns to attend the class like Year 1,2 and 3 will attend the class only on Monday and Wednesday whereas for Year 4, 5 and 6 will attend the class on Tuesday, Thursday and Friday. In a survey conducted among 17 countries of Europe Member State, most of the countries have carried out various approaches in order to achieve the physical distancing measures at schools like separating the tables, alternate the time to use educational facilities, breaks and lunch times; called of indoor activities and hold the classes outdoor and others (ECDC ,2020).

To ensure that the rules of physical distancing being complied, MOE had provided some rules like planning one way only for enter and exit the school's compound, no assembly being held as these can create close contact between others and the arrangement of the table in the class should take into account the physical distancing which is at least 1-metre. Schools should provide marks of physical distancing in the classroom, canteen, offices, elevators and other rooms (MOE,2020). We can see that in a classroom and canteen, the school's management will put tape on the floor which marks the 1-metre distance and this method is really important as some people will be alert if they see the marks on the floor and make them comply with the 1-metre physical distancing.

MOH also announced the three principles that we should practice in our daily life which are avoid 3C (crowded places, confined spaces and close proximity) and maintain the 3W (wash hand frequently, wear face masks and warn by practice cautions like always stay at home, avoid handshakes, practice the right etiquettes when sneezing and coughing (MOE,2020). Thus, in schools, especially in canteens

© COPYRIGHT UPM

being crowded by students, better strategy has been used where students only are allowed to take- out their food and eat it in the classroom only.

The next important measure that should be practiced inside and outside school settings is the use of masks. As the virus is spread from person to person through the respiratory droplets from the sneeze, cough, talk, shout or sing, thus by wearing masks it can act as a blockade to help prevent the respiratory droplets from spreading to others (Coronavirus Disease 2019 (COVID-19), 2020). Currently, healthcare settings have identified the positive cases who never develop symptoms (asymptomatic) (Pollock et al, 2021) which become the major concern as they may not expect that they are the carrier of the virus If they did not have symptoms like fever, cough, flu and others. Currently there are many studies that were conducted to prove that there are cases for transmission from asymptomatic patients to others. A study has been conducted which shown that transmission from asymptomatic persons was expected to results in more than half of all transmissions and it suggested that wearing masks, hand hygiene, social distancing and effective testing of asymptomatic individuals will lead to slower transmission of Covid-19 (Johansson et al, 2021).

There are recommendations that could be followed regarding the use of masks among the children in the schools' settings. Children under 5 years of age being advised to not wear masks, children above 6 years old should follow the national guidelines on proper ways to wear masks, teachers and staff also need to wear masks if they believe that the area did not practice 1-metre distance (WHO,2020). CDC (2021) has stated that after touching a mask or removing it, wash our hands with soap and water minimum for 20 seconds or use hand sanitizer with at

© COPYRIGHT UPM

least 60% of alcohol in it. MOE also had advised the students, teachers and all the schools' staff to always wearing the masks along the time in the schools and double masking was encouraged to avoid any Covid-19 transmission in the schools (MOE,2021). This preventive measure also applicable to parents or guardian that wanted to pick up their children from the schools.

Other than that, the ventilation system also should be maintained. It has been proven that the virus can stay in air for longer times and further their distance beyond the 2-metre (about 6 feet) range. The layout and design of a building, occupancy, type of heating, ventilation and air conditioning (HVAC) system play an important role in affecting the transmission of the virus in the area (United States Environmental Protection Agency (Indoor Air and Coronavirus (COVID-19), 2021). The United States Environmental Protection Agency (USEPA) also had recommended some actions should be taken to increase the ventilation which are improving the outdoor air as well as the air filtration. CDC also had recommended the same measures which are allowing the outdoor air to enter by opening windows and doors, if possible, use the fans that are safe for children to enhance the effectiveness of open windows and if being allowed, do class activities outdoors (Community, Work, and School (,2020). If the schools utilize heating, ventilation and air conditioning (HVAC) systems, make sure to inspect, maintain and clean their systems frequently and accurate standards for installation and maintenance of the systems are vital to guarantee that they are safe and effective (WHO, 2020).

For a school to reopen, personal hygiene practices are really important like frequent hand washing, the use of hand sanitizer and respiratory etiquettes. Not to be forgotten, the cleaning and disinfection of the school's environment is very crucial to

© COPYRIGHT UPM

ensure the safety of the children, teachers and all staff during this pandemic. As young children are vulnerable to be infected with the infectious diseases due to their nature to explore things as well as the low immunity system, hand washing can be one of the best preventive measures as by washing hands with soaps, it enables the germs to be killed. Develop a timetable for continual hand hygiene like washing hands with soaps and use sanitizer particularly for young children, for instance during their arrival to school, before taking snacks or lunch and before they exit the schools and the school administrators and teachers should ensure that there is enough soap, clean water or hand sanitizer throughout these places, school entrances, classrooms, canteen, toilet and others (WHO,2020). In a survey carried out in 17 countries in Europe, they had found that 88% of the respondents practice the safety hygiene measures like stay at home when they sick, promoting the hand hygiene and respiratory etiquette also there are 76% that had done disinfection cleaning of classroom or the school environments (ECDC,2020).

Teachers as well as the parents play an important role to create awareness and educate the children in hand hygiene practices. There are many ways that we can do to make the children understand more of these practices. Study has found one of the effective ways to improve the handwashing practices among the children which is by using A Germ's Journey educational resources which comprises the use of book, website, song, online games and glo- gel activities related with the gems and hand washing practices (Younie et al., 2020). The Ministry of Health (MOH) Malaysia also advised us to practice 3W (wash, wear and warn).

In order to make the students wash their hands frequently, proper handwashing facilities should be provided. In a study that conducted in Nigeria,

© COPYRIGHT UPM

although 83% of students have good knowledge of hand hygiene but only half of the proportion reported to wash their hands as the schools did not have adequate facilities for hand-washing where there is no soap provided, some of wash-hand stations did not have water supplies, 60% provided limited hand wash service while 40% provided no service at all (Oloruntoba &Wada, 2021).

Other than that, cleaning and disinfecting the school's environment is also important. The school's environment needs to be disinfected or clean before the school's session start and end, clean the surfaces or objects that frequently be touch like door knob, desks, chairs, switch, sink, tap, elevator button, toilet bowl, toilet pump, staircase and the hand railing and other surfaces that applicable (MOE, 2020). The cleaning supplies should be provided by the schools and recommended cleaning products vary for every country. In China, they wiped and sprayed chlorine dioxide with concentration 500 mg/L on the furniture, door frames, doorknobs, sinks, floors and any surfaces that should be cleaned and after 30 minutes water will be used to remove the disinfectant (Melnick et al., 2020). The school's management may discuss any difficulties that they faced on the routine cleaning and ways to solve the problems and during discussion they should create a schedule for routine cleaning for instance at least once a day or as frequent as they want (Coronavirus Disease 2019 (COVID-19), 2020). The schedules could consist of time and places to be cleaned with the checkbox and other descriptions. It is important as it can ensure that all surfaces that are highly being touched by the children have been cleaned and disinfected.

Schools also should run screening processes and manage the sick students, teachers and other school staff by enforcing appropriate policies (WHO,2020).

© COPYRIGHT UPM

Schools should implement a policy of staying at home when feeling unwell for students, teachers and all the school staff and when possible, contact the local healthcare organizations to provide with suitable home care or medical care and these persons should communicate with the schools when they are feeling unwell (WHO,2020). Daily temperature will be taken at the school entrance before the students, teachers and schools' staff entering schools and whoever had temperature more than 37.5°C or have any symptoms like cough, sore throat, difficulty in breathing and others, there are not allowed to enter the school area. In Singapore, following the outbreak of SARS that occur in that country in 2003, they had made the temperature monitoring twice in a day mandatory following that the SARS outbreak could spread rapidly in the school settings. The students will be provided with personal thermometer and they are trained to take their own temperature and whoever had temperature > 37.8oC, they are not allowed to attend the schools (Chng et al., 2004).

Every country has different procedure for quarantine. In Denmark, children that attend schools with symptoms will be send home instantly in 2 days and if their family are diagnosed to be infected, they cannot come to school while in China, students who had symptoms need to self-quarantine for 2 weeks before returning to school and anyone with symptoms should get treatment from hospital first and after they had fully recovered then they will be able to come to schools (Melnick et al., 2020).

Ministry of Education (MOE) had released several guidelines regarding school's management and measures should be taken to control spread of Covid-19.

© COPYRIGHT UPM

This guideline had been approved by the Ministry of Health (MOH) and National Security Council (MKN).

And in September 2021, the guideline has been revised based on the National Recovery Plan (NRP) where the schools reopening should follow guidelines according to phase of the states. There are four states of NRP and every state will move from one phase to another phase if their vaccination rates increase, low admission in hospital and low Covid-19 cases in the states (NRP, 2021)

Based on the Guidelines for School administrators and teachers and Operation 3.0, the reopening of schools will use weekly student rotation method where the weekly attendance is set at 50% capacity of classes to reduce Covid-19 transmission in schools. This guideline focuses on the ventilation of the class where it suggests to always open the windows during the class session and usage of fans are recommended, the use of masks is mandatory, lunch will be at own class, symptomatic students are not allowed to attend the schools, the importance of Covid-19 vaccination and others (MOE,2021)

MOE also had developed Standard Operating Procedure (SOP) to prevent the transmission of Covid-19 in schools. This SOP consists of all preventive measures that have been mentioned above. The full SOP can be referred in Appendix 1

Despite having Standard Operating Procedures (SOPs) for school, there are still spreading of Covid-19 virus in the schools in Malaysia. Up until April 2021, there are 83 Covid-19 clusters related to the education sector. The transmission can be seen spread from the school staff, teachers as well as the children itself. Most of the cases in schools could be seen as the infected person being infected through the community transmission. Regarding the rising number of positive cases in Malaysia,

© COPYRIGHT UPM

the government has enforced Movement Control Order (MCO) 3.0 which highlighted that all schools that are registered under Ministry of Education (MOE) will be closed for a month from 12th May 2021 until 7th June 2021. Therefore, all the learning sessions will be continued through the online platforms and other alternatives. It can be seen how important the compliance to the SOPs in schools is towards the spread of Covid-19 cases.

2.4 Knowledge, Attitude and Practice (KAP)

Knowledge, attitude and practice (KAP) surveys are extensively utilized to collect information for organizing public health programmes in all over the countries. Nevertheless, it is hard to find any discussion about the efficiency of KAP surveys in providing suitable data that can be used for project planning (Launiala, 2009). Also, during handling the surveys in different settings, there are various challenges that need to be faced by the researchers.

A KAP survey can create data that can be utilized for the following intentions which are to determine knowledge gaps, cultural beliefs, and behavioural patterns that may identify demands, obstacles, and barriers to help design and implement interventions. Then, it also helps to deepen the understanding of commonly known information, attitudes, and factors that affect behaviour. KAP surveys also can create baseline levels and evaluate changes that come from the interventions. The survey can evaluate and determine communications processes and important sources for program implementation and effectiveness and lastly it assists to set program priorities and make program decisions (WHO, 2008).

© COPYRIGHT UPM

Launiala (2009) has stated in her study that the use of KAP surveys have become a common practice now because it is easy to conduct, cost-effective, the results could be generalized worldwide and the results from the survey could be used to show progress to the funding bodies.

According to WHO, the KAP survey should be conducted in the early phase of the rising issue and people that should run the survey are people who have knowledge in this field of study. The KAP survey has been organized during the early stages of cholera outbreak for the aim of Oral Cholera Vaccines stockpile (WHO, 2014).

In accordance with Medecins Du Monde or Doctor of the World, the independent international movement of campaigning activists, there are several operations that can be used as a guide in conducting a KAP survey which are number of staffs required, time, cost of assessment, training, geographic targeting, type of data collection, degree of technical difficulty and complements other resources (Médecins Du Monde, 2011). Based on the KAP Survey Model that was designed by Medecins Du Monde, the number of surveyors that are required is depending on the number of supervisors and the duration for the survey run between six to twelve weeks. Cost for a survey is really influenced by the number of respondents that take part in the survey and the geographic location itself depends on the researchers' target population. To achieve the target of KAP survey, open-ended interview and focus groups can be applied to allow further analysis towards the cases or issues and potentially emphasize on the aspects that still remain unknown.

For KAP related with COVID-19, according to previous study, there were some important questions that should be assessed regarding the respondents'

© COPYRIGHT UPM

knowledge. For instance, their knowledge about COVID-19, its transmission and symptoms. In addition, this study also assessed their knowledge regarding the SOP which have been developed by the government. For attitude, this study assessesed respondents' behaviour and perception on the COVID-19 preventive measure, vaccination and their perception on the SOP which developed by MOE. Lastly, in term of practice towards COVID-19 preventive measures, the questions asked were based on their compliance towards the preventive measures which had been adviced by health authority like hygiene practices, wearing of mask as well as their practice towards the safe opening of schools like health screening, ventilation and others.

© COPYRIGHT UPM

2.5 Previous KAP Study Related with Covid-19

There are many studies of Knowledge, Attitude, Practices (KAP) of Covid-19 among public, workers, university students and children that had been conducted during the appearance of this new novel of coronavirus.

In KAP study towards Covid-19 among primary school students in Hubei Province, China, it shown that the students have good awareness toward Covid-19 pandemic where the awareness rates is between 70.1%- 99.5% ;good optimistic attitudes (50.7%) but 37.2% of respondents quite worried about being infected by the virus and lastly respondents have do appropriate practices during the pandemic where 93.7% of them washed hands regularly and 95.1%-96.5% would washed their hands after using bathroom or after touching objects outside their home (Xue et al., 2021).

A study conducted in International Islamic University Malaysia (IIUM) had reported that the average correct response rate on knowledge was 85.4%. For attitudes towards COVID-19, 85% of respondents believed that COVID-19 would be effectively controlled and 99% had belief that Malaysia could overcome the war against COVID-19. Lastly for good practices towards COVID-19, 90 % avoided crowded places, 95% wearing face masks and 91.6% practicing hand hygiene (Abd Rahim et al., 2021).

Based on these researches, it showed that community had moderate to low level of knowledge about Covid-19, have positive attitude as well as have good practice of preventive measures during Covid-19 pandemic like avoid going to crowded places, wearing mask, practice proper hand hygiene and others. Although health authorities had spread information and news about Covid-19 but there is still

© COPYRIGHT UPM

confusion that occur among the community either in Malaysia or outside the country. Based on the research, community still have misconception towards clinical features and Covid-19 transmission (Abd Rahim et al., 2021; Mehmet et al., 2020) which shows that more awareness needs to be created to ensure all community level either young or older, live in rural or urban and others have better understanding on Covid-19, have good attitude towards Covid-19 and practice good preventive measures during this pandemic.

In term of determinant factors associated with KAP towards Covid-19 socio demographic factors like gender, places of residence and education level is significantly associated with good practice. Study showed that female respondents, people with higher education level and respondents that live in urban areas have good practice towards Covid-19 preventive measures (Abu Hasan et al., 2020; Chen et al., 2021). For lifestyle information such as drug use, physical activity, mental stress, and sleep quality. These questions were important for this study to achieve one of the objectives: to determine factors associated with the practice. The variables in this section are significant due to several reasons and have been supported by previous literature. Firstly, drugs use may have an effect on compliance with preventive practices. Since drug users are highly at risk of COVID-19 infection, their high perceived susceptibility will likely encourage better practice (Lee et al., 2021). Secondly, stress and sleep disturbances may affect the KAP of respondents towards SOP compliance. The discomfort feelings from struggling in adapting to the new norm during COVID-19 can impact an individual's level of compliance (A. R. A. Aziz et al., 2021). Recent studies revealed a strong association between sleep quality and psychological well-being (Zhai et al., 2018). Those with high emotional and

© COPYRIGHT UPM

psychological well-being will have high compliance behaviour during COVID-19 (Chua et al., 2021).

In addition, knowledge and practice also play an important role in affecting practice towards Covid-19 preventive measures. Study that was conducted among Malaysian residents and Syrian residents showed that there is positive correlation between both knowledge and attitude with practice towards Covid-19 preventive measures (Abu Hasan et al., 2020; Al Ahdab, 2021) which indicate that when there is good knowledge and positive attitude it will lead to a good practice towards preventive measures.

2.6 Sustainable Developmental Goals (SDGs): Good Health and Well Being

Sustainable Development Goals are the plan to accomplish a better and more sustainable future which focus on the worldwide challenges that we need to confront, comprises poverty, inequality, climate change, environmental deterioration, peace and justice (United Nation (UN), n.d.). It was approved by United Nation (UN) States Member in 2015 as part of 2030 Agenda for Sustainable Development and comprise of 17 goals (UN, n.d.). in this study context, we focus on SDG 3 which is to ensure healthy lives and promote well- being for all at all ages. Promoting well-being and ensuring healthy lives for all individual and population is central to accomplish the sustainable development (Nunes et al., 2016).

However, current worldwide response to the Covid-19 pandemic crisis is likely to affect the ability to deliver the United Nation's 17 Sustainable Development Goals (SDGs)in the expected timescales, and create great uncertainties just at the time efforts need to be quicken (Fenner & Cernev, 2021).

© COPYRIGHT UPM

Each SDG include various challenges and for SDG-3 the challenges encompass of more research and development, increased and diversified health financing, improve the healthcare workforce and strengthen capability of all countries in reducing and managing the health (WHO, 2020).

SDG-3 address a full understanding on different perspectives like economic where it needs us to understand the Covid-19 impact on supply chain, stock markets and others; needs perspective, Covid-19 has made people understand its impact towards lack of screening tests, lack of beds in hospitals, lack of medical supplies and others and the last perspective is policy and control perspectives where Covid-19 has stressed on the need for potential preventive measures that have been implemented which consists of the use of face masks, social distancing, washing hands frequently, closure of educational sectors and travel restrictions (Seshaiyer & McNeely, 2020).

Covid-19 pandemic has shed considerable light on the weakness of the health systems especially in high income countries that were thought have best preparation in encounter with the pandemic. Other than have larger investment, the crisis prove that better measures and reporting are necessary to track prevention programs, healthcare system preparation and resilience to pandemics (Sachs et al., 2021). In context of Covid-19 pandemic, the preventive measures that should be practice in order to achieve Sustainable Development Goal (SDG-3) are washing hands frequently or use hand sanitizer, wear face masks and practice social distancing everywhere we go with the help of tracing close contact, quarantine and isolation.

© COPYRIGHT UPM

2.7 Research Gap

Based on the studies that have been done on Knowledge, Attitude and Practice (KAP) on Covid-19 in Malaysia also in worldwide, it has been found that there are limited studies that were conducted among the school administrators and teacherss which are the teachers and schools' staff. Most of the KAP surveys were conducted among the communities, universities students and some children. In term of Standard Operating Procedures (SOPs) or public health measures compliance, there is also limited study that measures their compliance towards the measures, the KAP survey basically identifying their knowledge on Covid-19, their attitude towards this pandemic as well as their practice during the pandemic.

As the transmission of Covid-19 also can occur among children and adolescent, it is important to do this KAP survey especially among the schools' management as before they can reopen the schools safely, they need to understand all the guidelines which have been provided by the health authority in order to avoid transmission of virus in the schools. Based on the previous studies, there is insufficient information on how the school's management handling the reopening of schools safely in many aspects like health screening during entering the schools, physical distancing outside and inside the schools' compounds, ensuring all staffs, teachers and students practice the personal hygiene like washing hands, wearing mask and others.

CHAPTER 3

© COPYRIGHT UPM

METHODOLOGY

3.1 Study Design

This was a cross sectional study designed to examine the determinants factors of knowledge, attitude, and practice towards COVID-19 SOP compliance by the school administrators and teachers.

3.2 Study Location

This study was conducted on school administrators and teachers around South districts (Hulu Langat, Kuala Langat, Sepang) and Putrajaya. According to FMT Reporters (2020) and Yusof (2020), Selangor, KL and Putrajaya recorded with the highest number of COVID-19 cases for most of the time and this had caused the schools in these locations to be closed. Therefore, for in depth understanding of KAP on COVID-19 and its impact towards the school administrators and teachers, these locations were selected. In this study, the location which have been focused on were Southern region districts of Selangor and Putrajaya as these two locations were among the location which had highest cases. Up to 29th August 2021, there were 13,815 COVID-19 cases in Hulu Langat, 5,189 COVID-19 cases in Kuala Langat, 3696 COVID-19 cases in Sepang (Jabatan Kesihatan Negeri Selangor ,2020). Other than that, Putrajaya also was selected due to its location which located in the Southern Region of Selangor and it also recorded quit high COVID-19 cases (Pejabat Kesihatan WP Putrajaya ,2020).

© COPYRIGHT UPM

Figure 3.1: Maps of Southern Selangor districts (Hulu Langat, Kuala Langat, Sepang) and Putrajaya district. (Source: Visit Selangor, 2021)

3.3 Study Population

The research population consisted of teachers, school staff and support staff with various backgrounds and races from different schools in Malaysia's two major states: Selangor and Putrajaya.

3.4 Sampling

3.4.1 Sampling Frame

The sampling frame of this study was the school administrators and teachers in South Selangor districts (Hulu Langat, Kuala Langat, Sepang) and Putrajaya which consists of teachers and school administrations with different backgrounds and races from various schools.

© COPYRIGHT UPM

3.4.2 Inclusion criteria

The sampling unit must meet the inclusion criteria which were school administration staff, teachers and staff that involved directly in school management, aged above 18 years old, and have experience in school management during pandemic COVID-19.

3.4.3 Exclusion criteria

The exclusion criteria were the staff that do not involve directly with school management like the clerk, security guard, cleaners, canteen handlers and others as well as students and parents.

3.4.4 Sampling method

This study applied Multistage Sampling Method. In the first stage, this study applied purposive sampling by choose the place for the study; South districts (Hulu Langat, Kuala Langat, Sepang) and Putrajaya.

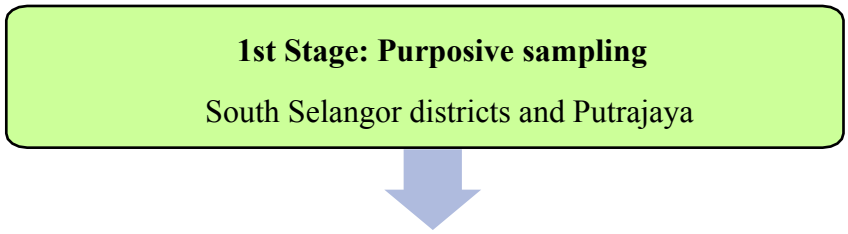
Second stage was cluster sampling, which grouped the place by mukim (Selangor) and precincts (Putrajaya). There were 7 mukim (Ampang, Beranang, Cheras, Hulu Langat, Kajang, Semenyih and Hulu Semenyih) in Hulu Langat, 8 mukim (Tanjung 12(1), Tanjung 12(2), Telok Panglima Garang, Batu, Bandar, Jugra, Morib and Kelanang) in Kuala Langat and 3 mukim (Dengkil, Labu and Sepang) in Sepang (Jabatan Kesihatan Negeri Selangor, 2021) while in Putrajaya there were 20 precincts (Pejabat Kesihatan WP Putrajaya, 2021). There were 130 schools in Hulu Langat, 72 schools in Kuala Langat, 52 schools in Sepang and 27 schools in Putrajaya.The selection of mukim and precincts were made based on the highest

© COPYRIGHT UPM

Covid-19 cases recorded as of August 2021. For South Selangor districts, mukim with highest Covid-19 cases as in August 2021 were Tanjung 12(1), Kajang and Dengkil while in Putrajaya were Precincts 9, 11 and 17. In total there were 100 schools among these 3 chosen mukim and 12 schools in the selected Putrajaya precincts.

Next stage, the school in each selected mukim and precincts were chose by simple random sampling and the schools selected became the place of study. From 100 schools in the 3 mukim in south Selangor districts, 7 schools were chose and for Putrajaya there are 6 out of 12 schools chosen as the study location.Based on the simple random sampling, the list of schools selected was provided in the **Appendix 2**.

The school list was obtained from Jabatan Pendidikan Negeri Selangor and Jabatan Pendidikan Wilayah Persekutuan Putrajaya. The schools were randomly selected using fishbowl method or random number generator. All the people who involved in COVID-19 management in school that have been selected became the respondents. Then, the respondents were selected solely based on research requirements and elements who do not suit the purpose were kept out of the sample. The respondents also needed to comply with all the inclusion criteria which were people that involved in school management (teachers, headmasters, principals and other staff that related). Therefore, the total number of respondents that complied with all criteria was obtained.



© COPYRIGHT UPM

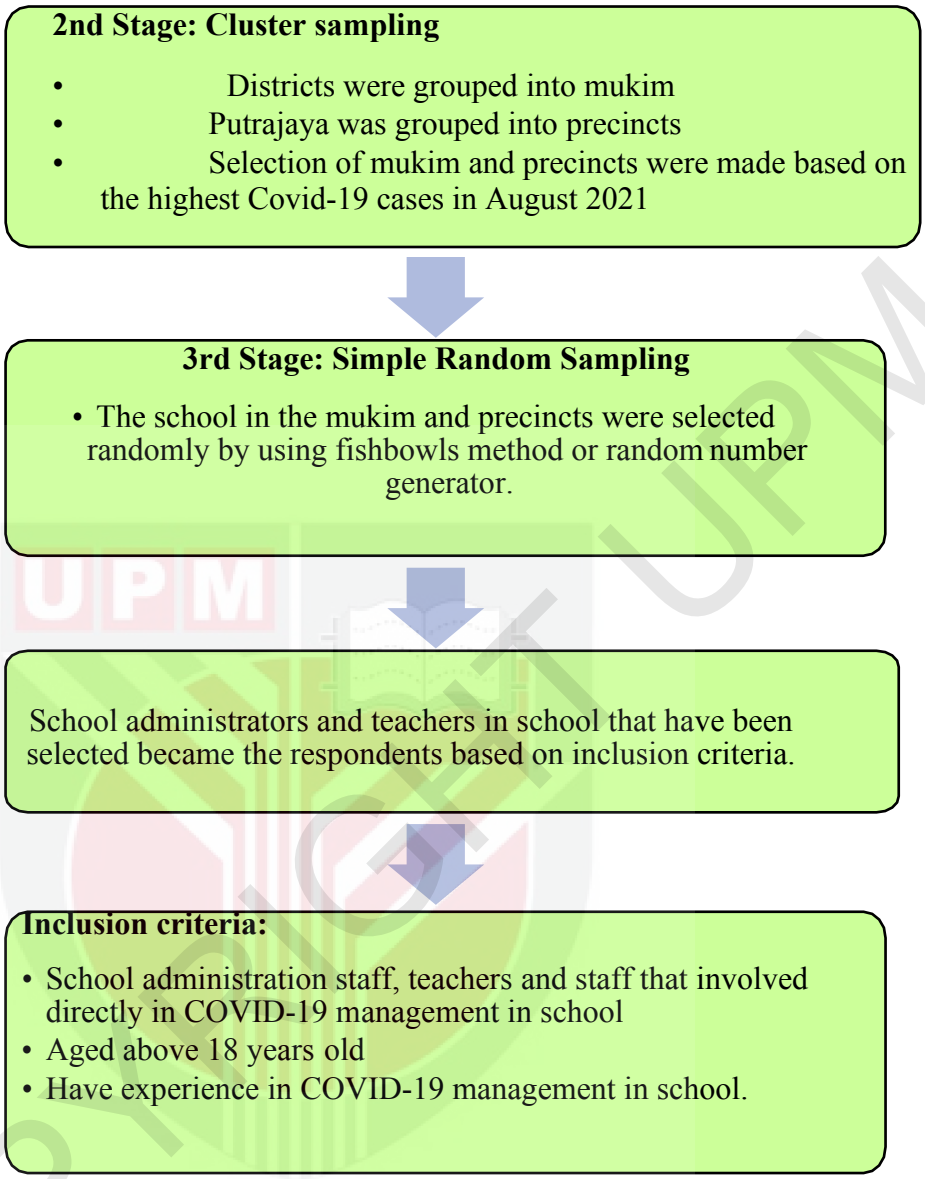


Figure 3.2: Multistage Sampling Method

3.4.5 Sample size

Sample size in this study was calculated based on every specific objective. The sample size was calculated by using OpenEpi for one proportion formula. The sample size calculation in determined the number of respondents was chosen using the formula from Lemeshow et al. (1990) for group comparison. The formula for calculating sample size was shown below.

© COPYRIGHT UPM

$$n = \frac{\left(Z_{1-\alpha/2}\sqrt{2\bar{P}(1-\bar{P})} + Z_{1-\beta}\sqrt{P_1(1-P_1 + P_2(1-P_2)}\right)^2}{(P_1 - P_2)^2}$$

Where,

$Z_{1-\alpha/2}$ = Standard error associated with confidential interval, 95% CI = 1.96

$Z_{1-\beta}$ = Standard error associated with power, 84.2% of power = 0.842

P_1= estimated proportion (larger)

P_2= estimated proportion (smaller)

Objectives	**Formula**	**N (samples)**
To determine the socio-demographic characteristics (Age, Gender, Race, Marital status, educational level), lifestyle (Smoking and Physical Activity) and occupational factors	No sample size calculation	None

© COPYRIGHT UPM

(Position, Duration of services, Working hours) of the respondents		
To identify the level of knowledge, attitude, and practice towards COVID-19 SOP compliance by the school administrators and teachers.	No sample size calculation	None
To compare the level of COVID-19 SOP compliance (KAP) by	Knowledge (K): 85.1% (0.851) Attitude (A):77.0% (0.770) Practice (P):65.7% (0.657) $Z_{1-\alpha/2}$ = Standard error associated with confidential interval, 95% CI = 1.96 $Z_{1-\beta}$ = Standard error associated with power, 84.2% of power = 0.842	K vs P = 76.197 A vs P = 253.32

© COPYRIGHT UPM

socio-demographic characteristics, lifestyle, and occupational factors among the school administrators and teachers.	Formula from Lemeshow et al. (1990) for group comparison: $n = \frac{\left(Z_{1-\alpha/2}\sqrt{2\bar{P}(1-\bar{P})} + Z_{1-\beta}\sqrt{P_1(1-P_1 + P_2(1-P_2)}\right)^2}{(P_1 - P_2)^2}$ Reference: (Florence et al., 2021) <u>K vs P</u> Where, P_1= estimated proportion = 0.851 (knowledge) P_2= estimated proportion = 0.657(practice) <u>A vs P</u> Where, P_1= estimated proportion = 0.770 (attitude) P_2= estimated proportion = 0.657 (practice)	
To examine the relationship of knowledge and practice towards COVID-19 SOP compliance by the school	Correlation sample size r = 0.198 reference: (Al ahdab, 2021)	198 samples

© COPYRIGHT UPM

administrators and teachers.		
To examine the relationship of attitude and practice towards COVID-19 SOP compliance by the school administrators and teachers.	Correlation sample size r = 0.210 reference: (Al ahdab, 2021)	
To determine the determinant of factors (knowledge, attitude, socio demographic characteristics, lifestyle and occupational	Regression IV: 5 n= 50 + 8*5 (IVs) = 90	176 samples

© COPYRIGHT UPM

factors) associated with practice towards COVID-19 SOP compliance by the school administrators and teachers		

Based on the calculation of the sample size using OpenEpi, the maximum number of respondents obtained was 253 respondents. However, the number of respondents were increased by 20% for the strength of analysis of the study and to consider non-responsive respondents, missing data, and errors.

i. Adjust for the strength of analysis:

N = n + 20%

N = 253 + 20%

N = 303.6

≈ 304 respondents

Total respondents for two major states, N = 304 respondents. Therefore, the total number of samples that were included in this study is 304 respondents.

© COPYRIGHT UPM

© COPYRIGHT UPM

3.4.6 Flow Chart of Progress

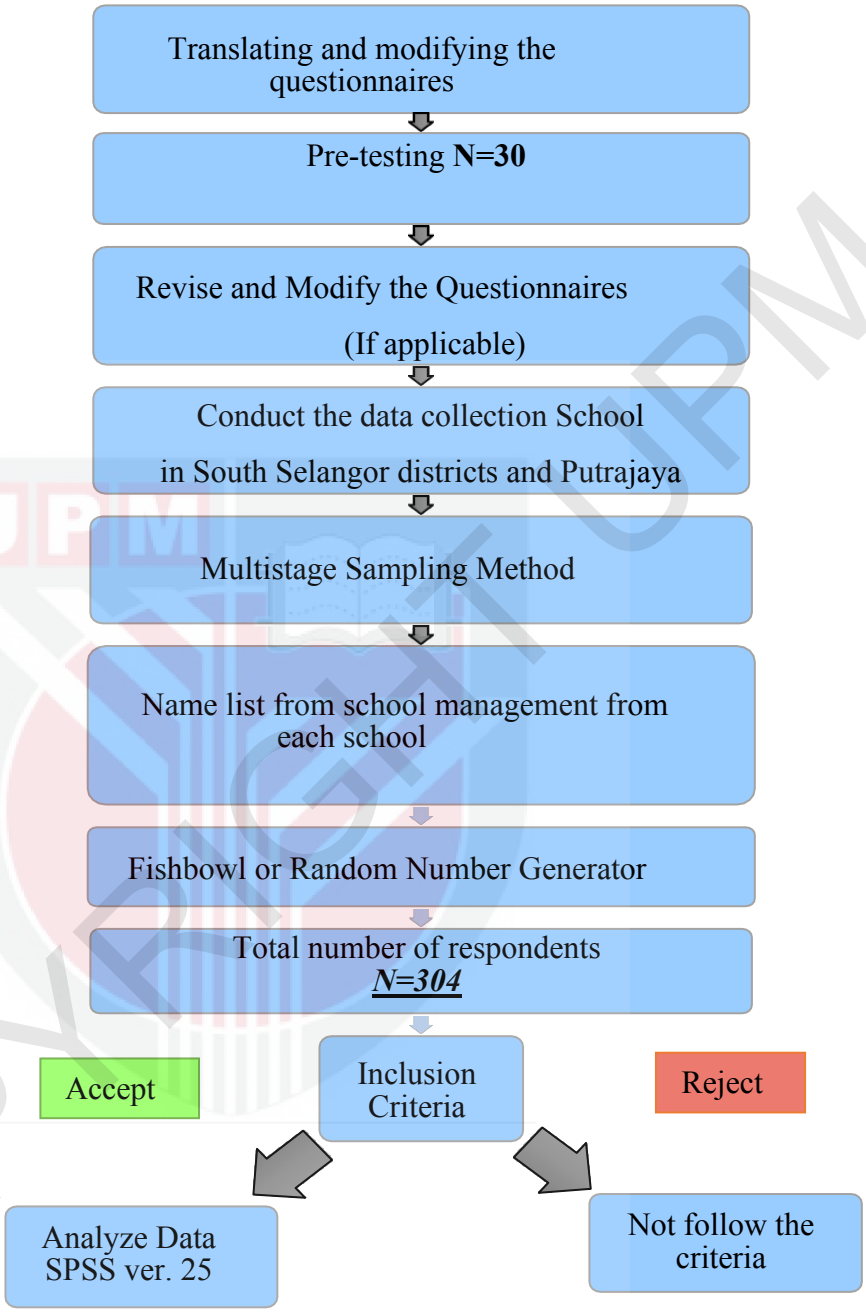


Figure 3.3: Flow Chart of Progress

© COPYRIGHT UPM

3.5 Study Instrumentation and Data Collection

3.5.1 Questionnaires

The respondents were given a set of a self-administered questionnaire which adapted from previous studies as the research instruments to achieve the objectives of the study (Abu Hasan et al., 2020; Abu Samah et al., 2020; Azlan et al., 2020). This self-reported research was used as an instrument to determine the level of Knowledge, Attitude, and Practice on COVID- 19 pandemic among school administrators and teachers in Malaysia.

The questionnaire consisted of four parts which includes sociodemographic backgrounds, lifestyle, occupational factors and KAP. The KAP questionnaire included questions on knowledge about COVID-19, its transmission, symptoms and SOP, Attitude towards COVID-19 and practices towards COVID-19. For knowledge part, the scaled response of "strongly disagree", "disagree", "neither agree nor disagree", "agree", and "strongly agree" were used. This study did not use binary response as study have shown that in the Environmental Knowledge section, most of the past research used binary response like true/false or yes/no. However, with the use of binary responses the likelihood of assuming during selecting the items whenever the participants face uncertainty was high (Ramdas, 2018).

The KAP was categorized under three different categories. The three levels of categories were according to the mean of KAP score which consist of low (1.00 – 2.33), medium (2.34 -3.67) and high (3.68 – 5.00) (Mohd Najib Abd Ghafar, 2003).

Besides, information regarding respondent demographic details, were also asked. Principal components analysis on the Malaysian version KAP on COVID-19 showed a three-factor solution, knowledge on COVID-19, attitudes, and practices

© COPYRIGHT UPM

towards COVID-19. A pre-test was conducted to validate the questionnaire used and improvement will be made where applied. The duration for the whole data collection was about three months and it was conducted through online method by using Google Form which spread through Whatsapp, Telegram and Email. The questionnaire could be referred in ***Appendix 3***.

3.6 Quality Control

3.6.1 Questionnaires

An adapted questionnaire was used to know the sociodemographic background and the KAP on COVID-19 SOP compliance. The form used in a dual language which were in Malay and English version so that the respondents can easily understand the question given. The questionnaire had undergone constructive testing and reliability testing.

In reports of instrument development, the most widely reported approach for content validity was the content validity index (Chiwaridzo et al., 2017; Lam et al., 2018; Rodrigues et al., 2017; Zamanzadeh et al., 2015). Content validity (CVI) calculations were from the third version (7 domains, 91 questions) of the questionnaires.

The content validation was sent to six experts and only four experts agreed. For I-CVI Results (relevancy of individual items), ninety-one items were marked as relevant and the I-CVIs ranged from 0.50 to 1.00. Sixty-six items had an ICVI = 1.00, nineteen a scores of 0.75, and six a scores of 0.50. The majority of items were considered relevant.

© COPYRIGHT UPM

For S-CVI Results (relevancy of the overall questionnaire), the S-CVI/UA = 0.82 and the S-CVI/Ave = 0.91. The Universal Agreement was calculated by adding all I-CVI's equal to 1.00 (75 items) divided by 91, while the Average takes the sum of all I-CVI (83.25) divided by 91. Overall, the Universal Agreement method and the Average approach shows high content validity of the questionnaires. With S-CVI/AV = .90, the instrument had good face validity and good content-related validity (Lam et al., 2018).

Finally, at the end of the content validation process, the instrument had six domains and 76 items for the pilot study.

For the constructive test, a pre-test was conducted. The questionnaire was distributed among the school administrators and teachers and it includes 30 respondents. And it shown that respondents had good knowledge, attitude and practice towards COVID-19. The function of this test was to know either the subjects understand the questions in the questionnaire or not. Next, the questionnaire was reviewed and edited if there were any criticism and comments from the respondents.

3.7 Statistical Analysis

The data obtained from this study was analysed by using the version 25 of SPSS. The data was tested depending on the objectives that have been listed as each objective uses a different kind of test to analyse the data.

Objectives	Variables	Statistical Analysis
To determine the sociodemographic characteristics, lifestyle, and	• Socio-demographic • Lifestyle • Occupational factors	• Frequency • Percentage • Mean • Standard

© COPYRIGHT UPM

occupational factors of the respondents.		deviation
To identify the level of knowledge, attitude and practice towards COVID-19 SOP compliance by the school administrators and teachers.	• Level of COVID- 19 SOP compliance • Knowledge • Attitude • Practice	• Frequency • Percentage • Mean • Standard deviation
To compare the level of COVID-19 SOP compliance (KAP) by socio-demographic characteristics, lifestyle, and occupational factors among the school administrators and teachers.	• Knowledge • Attitude • Practice • Sociodemographic • Lifestyle • Occupational factors	• Chi-square • Mann Whitney • Independent t- test • One-way Anova
To examine the relationship of knowledge, attitude, and practice towards COVID-19 SOP	• Knowledge • Attitude • Practice • COVID-19 SOP compliance	• Pearson correlation • Spearman rank correlation

© COPYRIGHT UPM

compliance by the school administrators and teachers.		
To determine the factors associated with practice towards COVID-19 SOP compliance by the school administrators and teachers.	• Knowledge • Attitude • Practice • Sociodemographic • Lifestyle • Occupational factors	• Logistic regression

3.8 Expected Outcome

This study will be able to fill the gap on:

1. The level of knowledge, attitude, and practice among the school administrators and teachers towards COVID-19 SOP in school.

2. The significant determinants (socio demographic, lifestyle, and occupational factors) associated with the KAP among the school administrators and teachers towards COVID-19.

3. New knowledge and findings among the school administrators and teachers towards COVID19 in relation to their roles during COVID-19 Pandemic.

4. The suggestion to prevent and improve prevention of COVID19 transmission in school.

© COPYRIGHT UPM

5. A significant value in contributing to the development of strategies for future pandemic disease outbreaks.

3.9 Ethical consideration

The human subject's approval was obtained from the university's Ethics Committee of Research involving Human Subjects, University Putra Malaysia before starting the data collection of this study. Each of the respondents was given a consent form to read and sign before beginning the study. The consent form stated that the participation of the respondent in this study was voluntary without any force from other parties. It also stated in the form the purpose of the study, steps they need to undergo in this study, the benefits, and possible risks of the study. Participants were also free to ask any questions regarding this study. The respondent's information sheet and informed consent form in both versions could be referred in Appendix 4.

© COPYRIGHT UPM

CHAPTER 4

RESULTS

4.1 Socio-Demographic, Occupational and Lifestyle Information of the respondents.

The sociodemographic characteristics of the respondents contains their personal information like gender, age, race, monthly income, questions related with the school information like the location and its specific districts or precincts. The respondents also were asked on what type of platform they were informed on the Covid-19. Table 4.1 shows the respondents' sociodemographic profile for this study.

Occupational information that are collected in this study are about the respondents' occupation or jobs. They were asked on the current position at the school, information on their involvement on handling infectious diseases cases or managing the infectious disease program at the schools and their exposure towards the disease at their current school. Table 4.2 shows the respondents' occupational information.

Lifestyle information is about the way individual lives. In this study the lifestyle questions are on the intake of drugs or Smoke, physical activities, stress level and the sleeping pattern of the respondents. Table 4.3 shows the respondents' lifestyle information.

Table 4.1 Socio-demographic characteristics, occupational and lifestyle information of the respondents

Variables		Frequency	Percentage (%)

© COPYRIGHT UPM

		(n=251)	
Gender	Male	62	24.7
	Female	189	75.3
Age	20-30	50	19.9
	31-40	102	40.6
	41-50	68	27.1
	51-60	31	12.4
Race	Malay	230	91.6
	Chinese	12	4.8
	Indian	7	2.8
	Others	2	0.8
Monthly Income	<RM4000	86	34.3
	RM4001-RM6000	108	43.0
	RM6001-RM8000	49	19.5
	>RM8001	8	3.2
School Location	Selangor	138	55.0
	Putrajaya	113	45.0
School Districts/Precincts	Kuala Langat	40	15.9
	Hulu Langat	52	20.7
	Sepang	46	18.3
	Precinct 9	38	15.1
	Precinct 11	41	16.3

© COPYRIGHT UPM

	Precinct 17	34	13.5
Source of Covid-19 Knowledge	Ministry of Health	231	92.0
	Ministry of Education Malaysia	198	78.9
	Ministry of Communication and Multimedia	142	56.6
	Social Media	217	86.5
	Family	165	65.7
	Friends	131	52.2

Table 4.1 shows the sociodemographic characteristics of the respondents in the study. This study consisted of 251 respondents; 62 (24.7%) male and 189 (75.3%) female. The majority of the respondents (40.6%) were aged between 31 and 40 years old. In term of ethnicity, majority of the respondents were Malay (91.6%), followed by Chinese (4.8%), while Indian and other were only (2.8%) and (0.8%) respectively. For monthly income, 86 (34.3%) received income RM4000 and below, 108 (43%) respondents received income in the range of RM4001 – RM6000, 49 (19.5%) had income in the range of RM6001 – RM 8000, and 8 respondents received more than RM8000 monthly. Most of the respondents' schools 138 (55%) that involved in this study are located in Selangor while almost half of it (45%) were located in Putrajaya. According to districts or precincts, the highest respondents came from Hulu Langat schools where there are 52 respondents which equivalent to 20.7% and the lowest

© COPYRIGHT UPM

number of respondents came from Precinct 17 schools which there are only 34 (13.5 %) respondents that volunteered to involved in this study.

For source of Covid-19 knowledge, the top platform to get the information for this issue is Ministry of Health, where there are 231(92%) of respondents stated that they gain the information from MOH while slightly more than half of them, get the information from Ministry of Communication and Multimedia (MCMC) (56.6%) and their friends (52.2%).

Table 4.2 Occupational information of the respondents

Variable		**Frequency (N=251)**	**Percentage (%)**
Current position	School Administrator	39	15.5
	Teacher	212	84.5
Handling any infectious disease (e.g. dengue cases) cases in school	Yes	52	20.7
	No	199	79.3
Managing any infectious disease	Yes	47	18.7
	No	204	81.3
Exposed to any infectious disease at school			

© COPYRIGHT UPM

Dengue fever	Yes	63	25.1
	No	187	74.5
Tuberculosis (TB)	Yes	3	1.2
	No	248	98.8
Hand, food and mouth disease	Yes	17	6.8
	No	234	93.2
Food poisoning	Yes	59	23.5
	No	192	76.5
Measles	Yes	70	27.9
	No	181	72.1
Covid-19	Yes	7	2.8
	No	244	97.2

Based on the Table 4.2, majority of the participants (84.5%) involved educational teachers and there are only 39 (15.5%) school administrators voluntarily participated in this study. In term of handling and managing any infectious disease cases in the schools, most of them (7.3%) and (81.3%) respectively did not have experience in both of the situation at their schools. According to the data collected, most of participants did not expose to any infectious diseases as stated in the Table 4.2, however in term of respondents that were exposed to the diseases, we can see that measles, dengue fever and food poisoning are among the top infectious disease that the schools have ever exposed to.

Table 4.3 lifestyle information of the respondents

Variable		**Frequency (N=251)**	**Percentage (%)**
I take illegal	Never	251	100

© COPYRIGHT UPM

drugs (any kind)			
I Smoke.	Never	227	90.4
	Rarely	10	4.0
	Sometimes	9	3.6
	Often	4	1.6
	Always	1	0.4
I do any kind of physical activities.	Never	9	3.6
	Rarely	49	19.5
	Sometimes	114	45.4
	Often	73	29.1
	Always	6	2.4
I experience "negative stress" lately	Never	80	31.9
	Rarely	98	39.0
	Sometimes	57	22.7
	Often	13	5.2
	Always	3	1.2
I experience a lot of stress in my daily life	Never	48	19.1
	Rarely	118	47.0
	Sometimes	69	27.5
	Often	15	6.0
	Always	1	0.4

© COPYRIGHT UPM

I experience trouble in sleeping	Never	87	34.7
	Rarely	117	46.6
	Sometimes	33	13.1
	Often	14	5.6
	Always	0	0.0
I experience sleep disturbances	Never	105	41.8
	Rarely	104	41.4
	Sometimes	33	13.1
	Often	8	3.2
	Always	1	0.4

As indicated in Table 4.3 regarding the respondents' lifestyle, all of the respondents did not take any illegal drugs and for smoking, most of them never Smoke and there are only 9(3.6%) of the respondents sometimes smoking. There are almost half of the respondents stated that sometimes the do any kind of physical activities like jogging, cycling and others. In term of negative stress most of them rarely (39.0%) experience it lately and only 1.2% of the respondents experienced negative stress lately. It same goes for the stress level in respondents' daily life, they rarely experience it in their daily life. For trouble in sleeping, almost half of them (46.6%) rarely experience the trouble in sleeping also majority of the respondents (41.8%) never experience sleep disturbances

4.2 Reliability and Normality Analysis

© COPYRIGHT UPM

Table 4.4: Reliability Coefficients for Each Variable (N=251)

Variables	No. of Items	Item Deleted	Cronbach's Alpha
Knowledge	25	-	0.931
Attitude	10	-	0.916
Practice	18	-	0.823

The reliability of each item in the instruments was measured using Cronbach's Alpha Coefficient. Each item in the questionnaire which are knowledge, attitude and practice was analysed separately to expedite clear understanding. Reliability of the instruments is important to ensure that the instruments used are consistent, adequate and reliable. Based on the previous research, values which were above 0.6 were considered acceptable and 0.8 is the most suitable and adequate to show reliability of instruments used (Murugadas,2018). Based on the analysis of reliability that have been conducted, the tested variable which about knowledge, attitude and practice is reliable because most of the items in the questionnaires had already been used and tested by other researchers in the same field of the study where all the three-variable showed adequateness and reliability (Azlan et al., 2020; Abu Hasan et al., 2020). Table 4.4 shows the Cronbach's Alpha value for the three-variables. In addition, the questionnaire is also understandable by the respondents and align with the current situation of Covid-19 and school reopening.

Table 4.5: The Assessment for Normality of Data Distribution

Variables	Skewness	Kurtosis	Distribution statues
Knowledge	0.308	0.612	Normal
Attitude	0.308	0.612	Normal
Practice	0.308	0.612	Normal

© COPYRIGHT UPM

Table 4.5 describes the results of the normality test. This test is important before we run other statistical analysis as when the data is normally or not normally distributed, there are specific test that we should chose. For this study, kurtosis and skewness will be used to determine the normality of the data. The results of the skewness and kurtosis, show that the data sets of all constructs are normally distributed and have skewness and kurtosis of less than +/-2.

4.3 Level of Knowledge, Attitude, and Practice Towards COVID-19 SOP Compliance by the school administrators and teachers.

Table 4.6 shows the descriptive statistics for the Knowledge variable. The questions about the knowledge on Covid-19 was divided into four sections which are general knowledge about Covid-19, Covid-19 transmissions, symptoms and Covid-19 SOP. Overall, the knowledge on Covid-19 related matters is at high level (Mean = 4.55). Based on the data analysis, in every item in the knowledge part, there are more than 80% of respondents have high level of knowledge for each question that being asked. The high level showed that the respondents have good knowledge on Covid-19 issues. The items that have the highest mean is item number 15 which asked on the presence of SOP at educational institution particularly school (Mean = 4.90) while the lowest mean is on item 17 which asked on the provision of Letter of Absence (LOA) to the student who is not allowed to school in relation of COVID-19 (Mean = 4.34).

© COPYRIGHT UPM

Table 4.6: Descriptive Statistics for knowledge (N=251, Mean= 4.55, S.D =0.37)

Item No.	Item description	Mean	S.D.	Level	Percentage (%)
Knowledge about COVID-19					
K1	COVID-19 is a viral infection	4.85	0.44	High	98.4
K2	COVID-19 can cause severe acute respiratory syndrome	4.85	0.44	High	98.8
K3	The first case of human infection in Wuhan, China	4.84	0.48	High	97.2
Knowledge about Covid-19 Transmissions					
K4	COVID-19 can be transmitted through droplets during coughing or sneezing	4.85	0.45	High	98.4
K5	COVID-19 virus can be transmitted via airborne	4.68	0.69	High	94.0
K6	COVID-19 virus can be transmitted by touching surfaces and devices contaminated by virus COVID-19	4.72	0.60	High	96.0
K7	COVID-19 can be spread through close contact with infected persons	4.82	0.51	High	98.0
K8	COVID-19 can be transmitted via hand shaking	4.75	0.62	High	95.2
K9	Someone infected can transmit the virus even if they are not showing symptoms	4.82	0.48	High	98.4
K10	Students, staff and etc. can wear face masks to prevent the infection by the COVID-19 virus	4.83	0.53	High	98.0
Knowledge about Covid-19 Symptoms					
K11	Fever, cough, and shortness of breath are COVID-19 symptoms	4.80	0.50	High	98.0
K12	Symptom of COVID-19 similar	4.47	0.78	High	89.2

© COPYRIGHT UPM

	to SARS virus				
K13	Patient with underlying chronic diseases is at higher risk of infection	4.82	0.48	High	97.6
K14	People with age over 60 years old have a higher risk of developing severe disease and death	4.81	0.49	High	97.6
Knowledge about Covid-19 SOP					
K15	There is a COVID-19 SOP particularly for educational institution (school)	4.90	0.40	High	98.8
K16	School administrators and teachers must conduct screening test at the entrance	4.49	0.94	High	86.9
K17	The school administrators and teachers must provide a Letter of Absence (LOA) to the student who is not allowed to school in relation of COVID-19	4.34	1.05	High	83.3
K18	School assembly is not allowed	4.78	0.59	High	96.4
K19	Students or staff who have contact with someone infected should be immediately isolated. Close contact should remain in the isolation room for at least 10 days or as directed by the PKD	4.85	0.45	High	98.4
K20	Wearing a mask is compulsory around school area	4.89	0.40	High	98.8
K21	Cocurricular activities is not allowed in school	4.63	0.78	High	91.2
K22	Student absenteeism during pandemic is not a discipline issue	4.48	0.68	High	89.2
K23	Students with symptoms is not allowed to attend school	4.81	0.65	High	96.4
K24	Students are not allowed to eat at	4.57	0.63	High	92.4

© COPYRIGHT UPM

	canteen during break				
K25	School operation is based on phases in the National Recovery Plan (NRP)	4.74	0.60	High	95.6

Table 4.7 shows the descriptive statistics for attitude variable. In total there were 10 questions on attitude towards Covid-19 issues were asked to the respondents. The questions that were asked basically about their belief or perspective on preventive measures towards Covid-19, effectiveness of MCO, vaccination and lastly their attitude towards the SOP on operating the schools during this pandemic which have been provided by the MOE. Overall, the mean for attitude towards Covid-19 issues was (4.71 ± 0.46). Approximately, there are more than 80% of respondents had a good or positive attitude towards Covid-19. The item which had the highest number of respondents (98.0%) that obtained positive attitude was item number 3. The question that was asked to the respondents was on their belief that everyone was responsible in preventing the spread of Covid-19. Most of the respondents respond positively on this question. Whereas, the item which had the lowest number of respondents (88.0%) that obtained positive attitude towards Covid-19 was item number 8. Here, respondents were asked were asked on their belief that vaccine can protect them against Covid-19 infection. On item number 3, all participants chose the positive scale which were 4 (agree) and 5 (strongly agree), however, on questions number 8, it can be seen that some of them chose 3 (neither agree nor disagree) and the other half of the participants chose the scale 4 (agree) and 5 (strongly agree). Nevertheless, this does not affect their level of attitude towards Covid-19, as from

© COPYRIGHT UPM

the analysis, the level for each question were high (3.68-5.00), which indicated that all respondents have positive attitude towards Covid-19.

Table 4.7: Descriptive Statistics for attitude items (N=251, Mean= 4.71, S. D.= 0.46)

Item No.	Item description	Mean	S.D.	Level	Percentage (%)
AT1	I believe COVID-19 can be prevented by good hygiene practices	4.80	0.54	High	97.6
AT2	I am interested in knowing the methods of prevention of COVID-19	4.69	0.62	High	96.4
AT3	I believe everyone is responsible for preventing the spread of the COVID-19	4.87	0.48	High	98.0
AT4	The Movement Control Order (MCO) was an effective effort by government to prevent the spread of the disease	4.72	0.59	High	96.8
AT5	If I get infected with COVID-19, I will not spread the virus to others to get them infected too	4.76	0.67	High	96.0
AT6	I agree that COVID-19 will successfully be controlled	4.59	0.67	High	91.6
AT7	I agree that compliance to SOP can prevent COVID-19 transmission	4.78	0.54	High	98.0
AT8	I believe that vaccine can protect us against COVID-19 infection	4.47	0.81	High	88.0
AT9	The Ministry of Education has provided the educational institution with adequate SOP and information on COVID-19	4.71	0.55	High	97.2
AT10	The SOP provided is easy to understand and comply by the school administrators and teachers	4.67	0.59	High	95.6

© COPYRIGHT UPM

Table 4.8 shows the descriptive statistics for practice variable. In total there were 18 questions on practice towards Covid-19 preventive measure were asked to the respondents. The questions that were asked basically about their practice in avoiding the crowded places, wearing face masks, hygiene etiquette and practice like washing hands, applying hand sanitizer, covering mouth and nose when sneezing and coughing and their practice in complying with the SOP that had been enforced by MOE like temperature screening before entering the school entrance, providing good ventilation and others. Overall, the mean for practice towards Covid-19 preventive measures was (4.21 ± 0.41). Based on the analysis, all questions in the practice part obtained high level. The high level (3.67-5.00) indicated that the respondents had good practice towards prevention and control of Covid-19. Approximately, there are more than 80% of respondents had good practice in preventive measures of Covid-19. The item which had the highest number of respondents (100.0%) that obtained good practice was item number 4. The question that was asked to the respondents was on their practice in wearing the mask when going out. Other than that, majority of the respondents (98.0%) also washed their hands before and after each action, stood 1-meter away from others (1-meter social distance) and ensure that all students, staff and others always wear face mask throughout the period of school. However, there were only 58.2% of respondents give Letter of Absence (LOA) to students or staffs whose infected with Covid-19 or under quarantine and only 60.2% respondents respond positively about the importance of notifications to the district health office or specific parties if students or staff infected with Covid-19. There are about 30% of

© COPYRIGHT UPM

respondents had poor practice on these two practices which related with the school reopening procedures.

© COPYRIGHT UPM

Table 4.8: Descriptive Statistics for practice (N=251, Mean= 4.21, S.D. = 0.41)

Item No.	Item description	Mean	S.D.	Level	Percentage (%)
P1	I did not go on vacation during outbreak.	4.49	0.79	High	89.6
P2	I did not go to any crowded place	4.28	0.83	High	84.9
P3	I notify District health office or specific parties if students or staff infected with COVID-19	3.42	1.65	High	68.2
P4	I wear a face mask when go out	4.91	0.28	High	100.0
P5	I cover mouth and nose with tissue when coughing or sneezing	4.73	0.56	High	97.6
P6	I wash my hands before and after each action	4.75	0.50	High	98.0
P7	I stand 1-meter away from others (1-meter social distance)	4.67	0.53	High	98.0

© COPYRIGHT UPM

P8	I wash hands with soap or hand sanitizer that contains at least 70% alcohol	4.71	0.54	High	96.8
P9	I refer to the Standard Operating Procedure (SOP) issued by MOH, MKN and MOE from time to time	4.63	0.64	High	92.8
P10	I ensure all students, staff and etc. always wear face mask throughout the period of school	4.71	0.55	High	98.0
P11	I supervise and ensure students or staff with temperatures above 37 ° C or having any symptoms are not allowed to attend school	4.59	0.82	High	93.6
P12	I give a Letter of Absence (LOA) to students or staffs who is	3.28	1.65	High	65.6

© COPYRIGHT UPM

	infected with COVID-19 or under quarantine.				
P13	I ensure good ventilation in the classroom	4.71	0.65	High	96.8
P14	I make sure that the table arrangement in the classroom is rotated	4.71	0.72	High	96.4
P15	I supervise and ensure all the students to eat in the classroom during break	4.73	0.64	High	97.2
P16	I provide hand washing place with soap or hand sanitizer containing 70% alcohol	4.67	0.70	High	94.8
P17	I ensure no mass gathering or school assembly within school area	4.74	0.63	High	97.2
P18	I ensure no curriculum activities is allowed in	4.66	0.74	High	94.4

© COPYRIGHT UPM

	school area				

Table 4.9 shows the mean level of knowledge, attitude and practice among the respondents. Based on the table above, knowledge, attitude and practice had high level of means which indicated respondents had good knowledge, positive attitude and good practice towards Covid-19

Table 4.9: Mean level of knowledge, attitude and practice towards Covid-19

Variables	**Level**	**Percentage (%)**
Knowledge	Low	0.4
	Medium	1.6
	High	98.0
Attitude	Low	0.8
	Medium	1.6
	High	97.6
Practice	Low	0.4
	Medium	3.2
	High	96.4

4.4 Level of COVID-19 SOP compliance (KAP) by socio-demographic characteristics, lifestyle, and occupational factors among the school administrators and teachers

The level of KAP scores toward Covid-19 by socio-demographic characteristics was demonstrated in Table 4.10. Based on the analysis made, there was no significance difference ($p>0.05$) between the knowledge scores of Covid-19 and gender, age as well as school district or precincts. However, there were

© COPYRIGHT UPM

significance difference ($p<0.05$) between the knowledge scores of Covid-19 and race, monthly income and school location of the respondents. The mean knowledge score for Indian is the highest (4.85 ± 0.15) among the four races, followed by Malay (4.72 ± 0.31), Chinese (4.60 ± 0.39) and others which was a Punjabi(3.08 ± 2.49). Next, for monthly income, respondents with income RM4001-RM6000 had the highest mean knowledge score (4.77 ± 0.26) whereas the lowest mean knowledge score could be seen among the respondents with the lowest monthly income which was less than RM4000 per month. Lastly, there was also significance difference for the school location of the respondents. The mean knowledge score for respondents that worked in Selangor (4.61 ± 0.26) schools was slightly higher than respondents that worked in Putrajaya (4.48 ± 0.47) schools.

Additionally, there were found statistically significant difference ($p<0.05$) between attitude scores with race and school location. The mean attitude score for Indian (4.90 ± 0.12) was the highest, followed by Malay (4.73 ± 0.39), Chinese (4.48 ± 0.53) and the lowest attitude scores were gained by other race (2.90 ± 2.69). Also, respondents that worked in Selangor schools (4.77 ± 0.32) had a significantly higher mean attitude score compared to respondent that worked in Putrajaya schools (4.62 ± 0.58).

No significant difference was observed between the practice score of COVID-19 and all the socio-demographic characteristics.

© COPYRIGHT UPM

Table 4.10: Relation between Socio-demographic characteristics with KAP scores of Covid-19

	Knowledge scores		**Attitude scores**		**Practice scores**	
Characteristics	**Mean±SD**	**p-value**	**Mean±SD**	**p-value**	**Mean±SD**	**p-value**
Sociodemographic						
Gender						
Male	4.72 ± 0.26	0.508	4.75 ± 0.33	0.286	4.45 ± 0.50	0.062
Female	4.69 ± 0.42		4.68 ± 0.51		4.56 ± 0.38	
Age						
20-30	4.48 ± 0.36	0.515	4.72 ± 0.39	0.914	4.19 ± 0.54	0.459
31-40	4.56 ± 0.45		4.71 ± 0.51		4.24 ± 0.38	
41-50	4.58 ± 0.27		4.71 ±0.47		4.23 ± 0.30	
51-60	4.56 ± 0.29		4.65 ± 0.41		4.11 ± 0.48	
Race						
Malay	4.72 ± 0.31	<0.001	4.73 ± 0.39	<0.001	4.53 ± 0.42	0.518
Chinese	4.60 ± 0.39		4.48 ± 0.53		4.44 ± 0.51	
Indian	4.85 ± 0.15		4.90 ± 0.12		4.43 ± 0.57	
Others	3.08 ± 2.49		2.90 ± 2.69		4.89 ± 0.16	

© COPYRIGHT UPM

Monthly income						
<RM4000	4.59 ± 0.51	<0.001	4.64 ± 0.57	0.107	4.50 ± 0.53	0.310
RM4001-RM6000	4.77 ± 0.26		4.75 ± 0.42		4.56 ± 0.33	
RM6001-RM8000	4.75 ± 0.25		4.78 ± 0.28		4.51 ± 0.37	
>RM8001	4.60 ± 0.13		4.45 ± 0.53		4.30 ± 0.56	
School Location						
Selangor	4.61 ± 0.26	<0.05	4.77 ± 0.32	<0.05	4.20 ± 0.43	0.617
Putrajaya	4.48 ± 0.47		4.62 ± 0.58		4.23 ± 0.38	
School Districts/Precincts						
Kuala Langat	4.78 ± 0.25	0.296	4.77 ± 0.35	0.217	4.42 ± 0.56	0.736
Hulu Langat	4.74 ± 0.30		4.73 ± 0.39		4.51 ± 0.36	
Sepang	4.77 ± 0.25		4.70 ± 0.52		4.48 ±0.38	
Precinct 9	4.65 ± 0.33		4.73 ± 0.33		4.56 ±0.52	
Precinct 11	4.63 ± 0.57		4.62 ± 0.66		4.64 ± 0.35	
Precinct 17	4.69 ± 0.39		4.71 ± 0.41		4.49 ±0.35	

© COPYRIGHT UPM

Table 4.11 showed the level of KAP scores toward Covid-19 by occupational information of the respondents. Based on the analysis made, there was no significance difference ($p>0.05$) between the knowledge scores of Covid-19 and their position, either they handled any infectious diseases cases at school or not and managing any infectious disease program at school. However, there were significance difference ($p<0.05$) between the knowledge scores of Covid-19 and exposure of the respondents towards the food poisoning at school. The mean knowledge score for respondents that have exposure (4.66 ± 0.23) towards the food poisoning at their schools was higher as compared to respondents that did not have any exposure towards this disease.

Next, for attitude scores relationship with occupational information, based on the data analysis, it was found that there was not significant difference between all the occupational information with the attitude scores of Covid-19.

Lastly, for practice scores of Covid-19, position of the respondents and have exposure to TB at school were found statistically significant difference. The mean practice scores of Covid-19 for respondents that worked as a teacher (4.25 ± 0.37) was higher than respondents that worked as school administrator (4.02 ± 0.55). In addition, participants that have exposure to TB also have higher (4.22 ± 0.40) mean of practices scores of Covid-19 in comparison with participants that did not have any exposure with the disease.

© COPYRIGHT UPM

Table 4.11: Relation between occupational information with KAP scores of Covid-19

	Knowledge scores		**Attitude scores**		**Practice scores**	
Characteristics	**Mean±SD**	**p-value**	**Mean±SD**	**p-value**	**Mean±SD**	**p-value**
Occupational						
Position						
School administrator	4.56 ± 0.30	0.649	4.66 ± 0.41	0.694	4.02 ± 0.55	<0.001
Teacher	4.55 ± 0.39		4.72 ± 0.47		4.25 ± 0.37	
Handling any infectious disease (e.g dengue) cases in school						
Yes	4.65 ± 0.30	0.424	4.74 ± 0.37	0.213	4.29± 0.31	0.207
No	4.52 ± 0.39		4.70 ± 0.48		4.20 ± 0.43	
Managing any infectious disease program (e.g dengue prevention program)						
Yes	4.62 ± 0.33	0.930	4.73± 0.37	0.262	4.21 ± 0.37	0.942
No	4.53 ± 0.38		4.70 ± 0.48		4.21 ± 0.42	
Exposed to any infectious disease at school						
Dengue fever						
Yes	4.57 ± 0.33	0.553	4.71 ± 0.38	0.555	4.25 ± 0.30	0.050

© COPYRIGHT UPM

No	4.54 ± 0.39		4.70± 0.49		4.20 ± 0.44	
TB						
Yes	4.43 ± 0.55	0.271	4.40 ± 0.87	0.069	4.22 ± 0.40	<0.001
No	4.55 ±0.37		4.71 ± 0.46		3.90 ± 0.98	
HFMD						
Yes	4.56 ± 0.22	0.172	4.74 ± 0.44	0.763	4.08 ± 0.35	0.861
No	4.54 ± 0.38		4.70 ± 0.47		4.22 ± 0.41	
Food poisoning						
Yes	4.66 ± 0.23	<0.05	4.78± 0.33	0.107	4.27± 0.37	0.384
No	4.52 ± 0.40		4.68± 0.50		4.20 ± 0.42	
Measles						
Yes	4.57± 0.30	0.657	4.68 ± 0.49	0.510	4.17 ± 0.47	0.083
No	4.54 ± 0.40		4.72 ± 0.45		4.23±0.39	
Covid-19						
Yes	4.55 ± 0.18	0.438	4.83 ± 0.28	0.478	4.17 ± 0.36	0.965
No	4.55 ± 0.38		4.70 ± 0.47		4.22 ± 0.41	

The level of KAP scores toward Covid-19 by lifestyle characteristics was demonstrated in Table 4.12. Based on the analysis made, there was no significance difference ($p>0.05$) between the knowledge scores of Covid-19 with all the lifestyle characteristics (drugs, Smoke, physical activities and sleep disturbance except for

© COPYRIGHT UPM

experienced a lot of stress in daily life. Based on the data analysis, there was significantly difference between experienced a lot of stress in daily life and knowledge scores of Covid-19. Here, respondents need to choose between the five options (never, rarely, sometimes, often and always). The mean knowledge score of Covid-19 for respondents that sometimes (4.74 ± 0.28) experienced a lot of stress in daily life is the highest followed by often (4.74 ± 0.18) experienced while the lowest mean knowledge score was respondents that always (3.80 ± 0) have a lot of daily stress in daily life.

Next, for attitude scores relationship with lifestyle information, based on the data analysis, it was found that there was no significant difference between all the lifestyle information with the attitude scores of Covid-19.

However, for practice, smoking was significantly difference between the practice score of COVID-19. The mean scores of practices among respondents that often smoking is the highest (4.89 ± 0.16) among others.

Table 4.12: Relation between lifestyle information with KAP scores of Covid-19

	Knowledge scores		**Attitude scores**		**Practice scores**	
Characteristics	**Mean±SD**	**p-value**	**Mean±SD**	**p-value**	**Mean±SD**	**p-value**
Lifestyle characteristics						
I Smoke.						
Never	4.70 ± 0.38	0.781	4.69± 0.47	0.559	4.53 ± 0.42	0.000
Rarely	4.70± 0.46		4.75 ± 0.47		4.51 ± 0.33	
Sometimes	4.78 ± 0.13		4.87 ±0.15		4.49 ±0.28	
Often	4.92 ± 0.09		5.00 ±0.00		4.89 ±	

© COPYRIGHT UPM

					0.16	
Always	4.76 ± 0		4.69 ± 0		2.72 ± 0	
I do any physical activities.						
Never	4.44 ± 1.17	0.138	4.41 ± 1.29	0.234	4.32 ± 0.72	0.244
Rarely	4.73 ± 0.32		4.72 ± 0.38		4.52 ± 0.41	
Sometimes	4.69 ± 0.35		4.68 ± 0.39		4.49 ± 0.42	
Often	4.74 ± 0.26		4.76 ± 0.46		4.57 ± 0.40	
Always	4.88 ± 0.07		4.85 ± 0.16		4.77 ± 0.26	
I experienced "negative stress" lately						
Never	4.73 ± 0.32	0.749	4.70 ± 0.38	0.864	4.53 ± 0.46	0.297
Rarely	4.69 ± 0.45		4.70 ± 0.51		4.52 ± 0.40	
Sometimes	4.70 ± 0.33		4.69 ± 0.37		4.56 ± 0.33	
Often	4.7200 ± 0.20		4.8231 ± 0.26		4.45 ± 0.73	
Always	4.4400 ± 0.55		4.5333 ± 0.50		4.02 ± 0.18	
I experienced a lot of stress in my daily life						
Never	4.61 ± 0.59	0.044	4.57 ± 0.77	0.067	4.59 ± 0.36	0.220
Rarely	4.72 ± 0.31		4.73 ± 0.34		4.47 ± 0.46	

© COPYRIGHT UPM

Sometimes	4.74 ± 0.28		4.73 ± 0.37		4.56 ± 0.34	
Often	4.74 ± 0.18		4.85 ± 0.24		4.57 ± 0.63	
Always	3.80 ± 0		4.00 ± 0		3.89 ± 0	
I experienced bad sleeping pattern trouble in sleeping.						
Never	4.53 ± 0.46	0. 689	4.67± 0.60	0.635	4.23± 0.36	0.444
Rarely	4.58± 0.32		4.75± 0.34		4.23 ± 0.45	
Sometimes	4.52 ± 0.30		4.66 ±0.42		4.20 ±0.32	
Often	4.51 ±0.33		4.69± 0.48		4.04 ±0.55	
Always						
I experienced sleep disturbances.						
Never	4.52 ± 0.46	0.449	4.67 ±0.37	0.651	4.20 ±0.43	0.348
Rarely	4.60 ± 0.26		4.74 ±0.57		4.25 ± 0.39	
Sometimes	4.51 ± 0.36		4.73 ±0.34		4.21 ± 0.34	
Often	4.44 ±0.40		4.56 ±0.39		3.95 ± 0.65	
Always	4.68 ± 0		5.00 ± 0		4.11 ± 0	

© COPYRIGHT UPM

4.5 To examine the relationship of knowledge, attitude, and practice towards COVID-19 SOP compliance by the school administrators and teachers

A correlation analysis was used to identify the relationship between knowledge with practice and attitude with practice. The Pearson correlation coefficient is a measure of the strength and direction of association that exists between two variables measured. The value of correlation coefficient (r) was interpreted using the following criteria: (0 - 0.25 = very weak correlation), (0.25 - 0.5 = moderate correlation) , (0.5 - 0.75 = good correlation) and (> 0.75 = high correlation) (Mesfin, and Kibret, 2013).

Based on Table 4.13 and Table 4.14, it was found that there were significant moderate positive associations between both knowledge and attitude with practice towards Covid-19 with the R-value (r= 0.286) and (r- 0.393) respectively. These results indicated that both respondents' knowledge regarding Covid-19 and their attitude towards Covid-19 were moderately influenced their practice in preventing the spread of Covid-19 especially in the school area.

Table 4.13: Relationship between knowledge and practice.

		Practice	**Knowledge**
Knowledge	Pearson Correlation	0.286**	1
	Sig. (2-tailed)	0.000	0.000
	N	251	251

Table 4.14: Relationship between attitude and practice

		Practice	**Attitude**
Attitude	Pearson Correlation	0.393**	1
	Sig. (2-tailed)	0.000	0.000
	N	251	251

© COPYRIGHT UPM

4.6 To determine the factors associated with practice towards COVID-19 SOP compliance by the school administrators and teachers.

Linear regression testing will be used to measure the influence of independent variable towards a dependent variable. In this study, this test will be conducted to measure the influence of knowledge and attitude with the practice towards Covid-19 preventive measures.

Based on the simple linear regression that was run in SPSS, it was found that knowledge, attitude, Districts or Precincts (Kuala Langat vs Precinct 11), position (school administrations vs teachers) and smoking (never vs always) were significant with practice towards COVID-19(p <0.05), thus, these variables able to be used in the multiple linear regression analysis.

The results from multiple linear regression analysis of variables that score good on practice indicators show that attitude towards COVID-19 (β: 0.329, P < 0.05) and teachers (β: 0.153, P < 0.05) were significantly associated with good practice score. However, always smoke (β: -1.428, P < 0.05) were significantly associated with poor practice score (Table 4.15).

The change in variance in customer satisfaction explained by the independent variables is 23.5% (R square). From the table, it is indicated that there was significant positive influence of the independent variables towards practice (F=25.253, p<0.05). Results also shown that when attitude goes up by 1 standard deviation, practice goes up by 0.371 standard deviation. Other than that, when smoking goes up by 1 standard deviation, practice goes down by -0.219 standard deviation.

© COPYRIGHT UPM

Table 4.15: Results of multiple linear regression on factors associated with practice towards COVID-19 SOP compliance

	Unstandardized Coefficients		Standardized Coefficients	t	Sig.	95% CI	
Model	B	Std. Error	Beta			Lower	Upper
(Constant)	2.449	0.287		8.519	0.000	1.883	3.015
Knowledge	0.017	0.090	0.015		0.853	-0.160	0.193
Attitude	0.329	0.072	0.371		0.000*	0.187	0.471
Districts/Precincts (Kuala Langat vs Precinct 11)	0.106	0.063	0.096	1.700	0.090	-0.017	0.229
Position (School Administrations vs teachers)	0.153	0.065	0.136	2.377	0.018*	0.026	0.281
Smoke (Never vs Always)	-1.428	0.365	-0.219	-3.907	0.000*	-2.147	-0.708
* *p* is significant when <0.05							

© COPYRIGHT UPM

CHAPTER 5

DISCUSSION

5.1 Sociodemographic characteristics, lifestyle and occupational factors of the respondents.

In this study, a total of 251 respondents were involved as participants in this study and they came from different schools that were located in Southern region of Selangor districts and Putrajaya. However, targeted sample size which was 304 respondents could not be achieved due to time limited and the online platform that being used. Based on the finding, there were more respondents from female compared to male where we can see that most of them (75.3%) were female while only 24.7% were male respondents. Previous study also shown that that were more female respondents (89.2%) as compared to male respondents (10.8%) (Chen et al., 2021). The respondents which involved in school administrators and teachers mostly in the age of 31-40 years old and most of them were Malay, followed by Chinese, Indian and others. Their monthly income was in the range of RM4001-RM6000 and most of the respondents worked in schools that located in Selangor (55.0%) and located in Hulu Langat (20.7%) district.

In term of source of Covid-19 knowledge, there were five source which were MOH, MOE, MCMC, social media, family and friends. MOH are the top source of Covid-19 provider where almost all of the respondents (92.0%) obtained the information from MOH. This was followed by the famous platform which was social media like YouTube, Instagram, Twitter, Facebook, Tik-Tok and others. Previous

© COPYRIGHT UPM

study also shown that MOH become their main source for Covid-19 knowledge, where half of the studied sample (52.4%) depend on it followed by social media (25.4%), tv, radio, neighbours, family, friends and others (Abu Hasan et al., 2020).

According to current position, majority of the respondents were teachers (84.5%) while the other (15.5%) were school administrator. In term of handling any infectious disease and managing any infectious disease, most of the respondent did not have experience in both of the situation. It same goes to their schools' exposure towards the infectious disease, almost all the respondents stated that their schools did not been exposed to the list of infectious disease, however there were about 30% of them stated that their school have exposed to the infectious disease which were dengue fever, food poisoning and measles.

In term respondents' lifestyle, all of them never take any illegal drugs and for smoking almost all of the respondents (90.4%) never smoked and there was only 2.0% of the respondents often and always smoked. For physical activities, there were almost 50% of them sometimes did physical activities like jogging, cycling, hiking, walking, gardening, playing badminton and others. For stress, only a few of them often (5.2%) and always (1.2%) experienced negative stress or also known as distress and in term of experienced a lot of stress in their daily life, it only involved few respondents that often and always faced it which were about 7% of them. For trouble in sleeping and had sleep disturbance, it could be said that almost 50% of the respondents never and rarely experienced both situations. There was limited reference for occupational and lifestyle information related with KAP of Covid-19 which limit this research to compared our results with other studies. Overall, from

© COPYRIGHT UPM

the results obtained, it could be said that most of the respondents practice a healthy lifestyle.

5.2 Level of knowledge towards COVID-19 SOP compliance by the school administrators and teachers.

Our findings indicate that most of the respondents were knowledgeable about COVID-19. The average total knowledge score of school administrators and teachers regarding COVID-19 was considered good with overall mean 4.55 ± 0.37 and overall correct rate of 98.0 %. This finding was consistent with previous research that have shown that public in Malaysia and other countries has good and adequate understanding about the infectious disease like influenza, Ebola, TB and others (Noremillia & Rahman, 2015; Mohamed, 2018). The high rate of correct answers to knowledge-related questions among respondents in this study was not surprising. This may due to the effectiveness of the dissemination of COVID-19 information through various platform.

Most of the participants in this study (98.8%) had good awareness about the presence of a COVID-19 SOP particularly for educational institution (school), COVID-19 can cause SARS and the compulsory of wearing mask around the school. As the COVID-19 cases kept changing and there were emerging of new Variant of Concern (VOC), MOE had revised on the existing SOP to suit with the current situation. On 12th September 2021, Education Minister Datuk Dr Radzi Jidin, had announced tightened and revised (SOPs) for schools to comply to which consist of 50% attendance for each class capacity, reopening of schools based on National Recovery Plan (NRP), mandatory of face masks and others. (Menon, S., 2021). The

© COPYRIGHT UPM

high percentage on school administrators and teachers aware-ness on the presence of COVID-19 SOPs for schools may due to easily assessable guidelines and programs that been organized among the teachers to spread the awareness on the school

The scores for item that asked on COVID-19 can cause SARS was higher as compared to previous study that con-ducted among Malaysia residents (Abu Hasan et al., 2020). It was also a relieved to find that most of the respondents aware that the use of face masks was mandatory because according to previous experimental study that was conducted in U.S, mandating public usage of face masks was associated with a decline in the COVID-19 daily growth rate, based on an event analysis that evaluated at daily changes in county-level COVID-19 growth rates. They also discovered that 1–5, 6–10, 11–15, 16–20, and 21 or more days after signing it, the average daily county-level growth rate falls by 0.9, 1.1, 1.4, 1.7, and 2.0 percentage points, respectively (Lyu & Wehby, 2020)

This study also shown that respondents had good knowledge about COVID-19 symptoms where 98.0% of them aware that fever, cough and shortness of breath are COVID-19 symptoms. This finding could be said among the highest compared with previous study. However, based on the Supplementary table 1, it could be seen that, only 83.3% of respondents answered correctly on the provision of Letter of Absence (LOA) to the student who is not allowed to school in relation of COVID-19. An LOA is a preventive measure taken to prevent the possible transmission of COVID-19 infections where during this time they need to stay at home, reduce contact with other and monitor closely their health (Government of Singapore ,2020).

© COPYRIGHT UPM

5.3 Level of attitude towards COVID-19 SOP compliance by the school administrators and teachers.

In our study, more than 90% of the school administrators and teachers had positive attitudes towards COVID-19. This finding was similar with previous study which shown that Malaysian public, university students and workers in China also had positive attitude towards COVID-19 (Azlan et al., 2020; Li et al., 2020). 98% respondents believed that everyone was responsible in preventing the spread of the COVID-19. Regardless of one's practices or discipline, every single individual was made responsible for the disease's spread or prevention as this disease infected people from various ages from baby to the elderly.

Other than that, 98.0% respondents also agree that compliance to SOP can prevent from COVID-19 transmission. In Malaysia, there were four phase of control order enforced by the government which were MCO, CMCM, EMCO and RMCO where everyone needs to adhere with every regulation that being enforced to ensure the safety and health of every single person. Previous study indicated that implementation of strict SOP cause declined of COVID-19 cases (Ganasegeran et al., 2020). Not all of respondents (88.0%) believed that vaccine can protect us from COVID-19. However, this finding was higher as compared to previous study that was conducted among the Malaysians regarding perceived benefits of COVID-19 vaccine, where there were 80.8% of respondents (28.2% strongly agree, 52.6% agree) that vaccine could protect us from COVID-19 (Azmawati Mohamed et al., 2021).

The difference of level of attitude for this item may due to difference categorize method for both of studies where in our study, we had categorized attitude into three different level (negative, neutral and positive) while previous study did not

2.5 cm

© COPYRIGHT UPM

categorize the attitude into different level. Overall, the positive attitude towards COVID-19 among the school administrators and teachers could be caused by adequate awareness on COVID-19 which being held in various platform by different public and private authorities to build positive perceptions to the communities.

5.4 Level of practice towards COVID-19 SOP compliance by the school administrators and teachers.

In the study, our results indicated that respondents have good practice towards COVID-19 preventive measures with an overall correct rate of 96.4%. This finding was higher as compared to previous research that were conducted among the general population (Abu Hasan et al., 2020). The findings of this correct high rate were supported by excellent preventive measures by the school administrators and teachers which was the wearing of face mask when going out, where all of the respondents (100%) responded positively towards this practice. This finding of wearing of mask practice was among the highest compared to other similar past research regarding COVID-19 in Malaysia (87.1%) (Mehmet et al., 2020), Japan (96.4%) (Hatabu et al., 2021) and Vietnam (99.5%) (Phuc et al., 2020). The good compliance towards the use face masks in public was really crucial as many studies had proved that wearing masks in public could help in reducing COVID-19 transmission.

Other than that, based on the finding also, it could be seen that majority of the respondents practice good hygiene behaviours such as wash hands before and after each action (98.0%), cover mouth and nose with tissue when coughing or sneezing (97.6%) and wash hands with soap or hand sanitizer that contains at least 70%

© COPYRIGHT UPM

alcohol (96.8%). Azlan et al. (2020) also reported quite similar results where 87.8% of their study participants implement proper hand hygiene by frequently washing hands and applying hand sanitizer.

A good practice in hygiene measures most likely due to the severity of COVID-19 pandemic in the worldwide which may have made people become more concern in protecting their health by always practice the proper hygienic action in their daily life. Similar with the knowledge part, here only 58.2% respondents had good practice in term of gave a Letter of Absence (LOA) to students or staffs who is infected with COVID-19 or under quarantine. In Malaysia, it is not a mandatory to give LOA to student or staff, however school in Singapore had given this letter if students or staffs being infected or had close contacts of a quarantined person and this order valid until certain period of time according to the situation (Auto, 2021).

5.5 Level of COVID-19 SOP compliance (KAP) by socio-demographic characteristics, lifestyle, and occupational factors among the school administrators and teachers.

In this study, the results shown that gender and age did not significantly affect the knowledge score unlike some previous studies however, some sociodemographic characteristics, such as race, monthly income and respondents' school location had a significant impact on participants' knowledge scores; these findings were relatively similar to previous study which shown that race and monthly income had significantly influence on knowledge (Azlan et al., 2020; Chang et al., 2021). From the finding, it demonstrated that other ethnic as well as low-income respondents had lower mean of knowledge scores as compared to others, this shown

© COPYRIGHT UPM

that greater focus should be given on mass media in order to raise public knowledge of the COVID infection through awareness-raising interventions (Al-Hanawi et al., 2020) aimed at these groups. For attitude, race and respondents' school location also had significantly influence the attitude scores toward COVID-19. Results shown that respondents that worked and taught in Selangor school had higher mean of knowledge and attitude towards COVID-19 compared to those that worked and taught in Putrajaya.

There is limited source to explain the significance of the school locations with knowledge and attitude towards COVID-19, however we can conclude that this difference may due to COVID-19 cases difference between these two locations. Based on the COVID-19 cases data that been provided by Ministry of Health, it shown that Selangor had higher COVID-19 cases as compared to Putrajaya, where Selangor residents may have better awareness and perception due to more COVID-19 cases at their area and they need to have these two good criteria in order to protect them from the COVID-19 infection.

In term of occupational information of the respondents, only item that asked on the exposure to infectious disease which was food poisoning at school significantly affect knowledge scores. For practice, it shown that schools that have been exposed to TB cases significantly impact the practice towards COVID-19 preventive measures. Food poisoning and TB were examples of foodborne and airborne disease which fall under infectious disease or also known as communicable disease. The higher knowledge and practice towards COVID-19 among those that have been exposed to food poisoning and TB at school may due to readily awareness and planning in combating the infectious disease at their schools. The mean practice

© COPYRIGHT UPM

scores of teachers also could be seen higher as compared to school administrator which may be caused that teacher were frequently directly handled the students which may cause their practice higher as compared to other groups.

For lifestyle of the respondents, it shown that they were significantly difference in the mean of knowledge scores between the five level (never, rarely, sometimes, often and always) of daily stress that they faced in daily life. Besides, there was also significantly difference in the mean of practice towards COVID-19 preventive measure among the frequencies of smoking.

5.6 Relationship of knowledge, attitude and practice towards COVID-19 SOP compliance by the school administrators and teachers.

This study also shown the relationship between knowledge-practice and attitude-practice. Several researchers have discovered that knowledge and attitudes regarding infectious diseases are associated to the practice towards COVID-19 prevention (Abu Hasan et al., 2020; Azlan et al., 2020; Abd Rahim et al., 2021; Al ahdab, 2021; Chen et al., 2021). Remarkably, the findings of the study revealed a significant positive moderate correlation between both knowledge and attitude score with practice towards COVID-19 prevention. This confirmed that when the school administrators and teachers had good knowledge and positive attitude, it will influence their practice in preventing the infectious disease.

5.7 Factors associated with practice towards COVID-19 SOP compliance by the school administrators and teachers.

© COPYRIGHT UPM

The findings of multiple linear regression analysis shown that some factors associated with good and poor practices towards COVID-19 preventive measures. Attitude and teachers (as compared to school administrators) were associated with good practice towards COVID-19 SOP. These findings had been described in 5.5 where people's attitude play an important role in influenced their practice in complying with the SOPs in their daily life especially in the school's area. Other than that, this study shown that teachers practice was good as compared to school administrators. School administrators which consist of headmasters or principals and their assistants focus more on the organizational development, ensure that school environment is safe for students as well as establishing and monitoring school policies and safety systems. As for teachers, their role to carried out the implementation which have been made from the policies or guidelines, handled the classroom, monitored students and others. Their roles which directly involved with the students most likely be the caused their practice was higher as compared to the school administrators

Results from the multiple linear regression also shown that respondents that always smoke have lower practice compared to respondents that never smoke. This may probably due to that when people that never smoke, they will have knowledge and perception on the health impacts of the smoke which then will influence on their practice towards smoking where they did not take it. There is lack of research that shown the relationship between smoking with someone practice towards COVID-19 preventive measures, thus it is difficult to show strong justification for this findings.

© COPYRIGHT UPM

CHAPTER 6

CONCLUSION

6.1 Conclusion

In conclusion, this study sheds light on school administrators and teachers' knowledge, attitudes, and practice towards COVID-19 SOP during reopening of the school in South Selangor region districts and Putrajaya. Our findings have shown that the level of knowledge, attitude and practice among the school administrators and teachers was good. The high level in these three variables could probably due to proactive actions taken by many authorities like MOH, MOE and other authorities to disseminate the awareness regarding COVID-19 and COVID-19 related SOP especially for schools in various platform to give better understanding among the school administrators and teachers.

However, although respondents obtained positive attitude for overall items, improvement need to be made regarding the perception that vaccination can protect from COVID-19 infection. To ensure that proper practices are established and maintained over time, it is critical to continually raise and maintain community knowledge, attitude, and practices in COVID-19 prevention. The adoption and strict implementation of laws and regulations are also important.

Other than that, it has been proved in this study that knowledge and attitude towards COVID-19 significantly influenced the practice on COVID-19 preventive measures among the respondents. Next, there was difference between the level of KAP between sociodemographic characteristics (races, monthly income and respondents' school location); occupational information (current position and exposure to infectious disease) and lifestyle (daily stress and smoking).

© COPYRIGHT UPM

Lastly, factors that associated with practice towards COVID-19 SOP compliance by the school administrators and teachers were attitude among the school administrators and teachers, their position in the school whether they were teachers or school administrators and lastly smoking.

6.2 Strength of the study

One of the strengths in this study is it was the first study on KAP that was conducted among the school administrators and teachers. Previous studies related KAP on COVID-19 majorly only being conducted among the general public, students and workers. However, this study focusses on school administrators and teachers as school also become COVID-19 transmission based on the data that have been reported by MOH Malaysia and other countries. In addition, this study also measures the occupational and lifestyle factors with KAP to prove that other than socio-demographic, other factors also can influence the knowledge, attitude and practice of a person. The items for knowledge, attitude and practice items in this study also more comprehensive than previous studies that conducted in the same field

6.3 Limitation of the study

This study has some limitations. Firstly, the use of online platform to spread the survey among the school administrators and teachers is quite difficult as they may overlook the survey that have been shared due to limited free time of the respondents, lack of internet access and some prefer traditional method in answering the survey. Secondly, the study also not able to reach the targeted respondents due to time limited of the study conducted as well as the use of online platform to spread

© COPYRIGHT UPM

the survey. Then, the representatives of the findings may be limited as the sample of the study was over-representative by female, younger age and school administrators and teachers that mostly worked in an urban and semi-urban area. Thus, it does not show much significant value towards KAP. Lastly, due to the use of self-reported questionnaires, the information gathered in this study may be prone to recall bias.

6.4 Recommendation

Future similar research can focus to increase the sample size not only in two states but for the whole Malaysia so that results could be generalized to the whole population. Other than that, future research also can target respondents that come from different place of residence like urban, rural and semi urban to show clear significant in the study. Besides, continuous training should be conducted among the school administrators and teachers to ensure clear understanding on the SOP for schools to ensure that the training is effective, frequent monitoring and observation also could be made in the schools to ensure that the school administrators and teachers comply with the legislation that have been enforced especially for school. Future research also can measure in diverse the KAP between school administrators and teachers. Lastly, it was recommended that, other than using online platform as tools to distribute the survey, researchers also can conduct it by face-to-face interview.

© COPYRIGHT UPM

REFERENCES

Abd Rahim, I. S., Roslan, M. B. N., Mohamad Zaini, N. N., Kasim, N. S., Mohd Yazid, M. I. H., Pasi, H., & Nasreen, H. E. (2021). Knowledge, Attitudes And Practices Towards COVID-19 among Medical Students in International Islamic University Malaysia: An Online Cross-Sectional Study. IIUM Medical Journal Malaysia, 20(2). https://doi.org/10.31436/imjm.v20i2.1686

Abdul Aziz, A. R., Ali, Z., Mohd Noor, N., & Sulaiman, S. (2021). Exploring the Compliance Behaviour During COVID-19 Pandemic from Social Psychology Perspectives. International Journal of Academic Research in Business and Social Sciences, 11(7). https://doi.org/10.6007/ijarbss/v11-i7/10493

Abu Hasan, N. I., Zainal Abidin, S., Sarkam, N. A., & Jamal, N. F. (2020). Knowledge, Attitude, and Practice of Malaysian Residence toward Prevalent of COVID-19 Pandemic in the Early Period of Outbreak: A Cross-sectional Study. Solid State Technology, January, 5355–5372. http://www.solidstatetechnology.us/index.php/JSST/article/view/3985

Abu Samah , A., Hadi Sulaiman , A., & Rahah Harun, S. (n.d.). Knowledge, Attitudes, and Practice among Malaysian in facing COVID 19 During the Implementation of Movement C ontrol Order. 1 17. https://doi.org/10.21203/rs.3.rs 35626/v1

Al ahdab, S. (2021). A cross-sectional survey of knowledge, attitude and practice (KAP) towards COVID-19 pandemic among the Syrian residents. BMC Public Health, 21(1), 1–7. https://doi.org/10.1186/s12889-021-10353-3

Auto, H. (2021, August 22). Students and staff on leave of absence can return to school once they or their close contacts test negative for COVID-19. The Straits Times. https://www.straitstimes.com/singapore/parenting-education/students-and-staff-can-return-to-school-once-they-or-their-close

Azlan, A. A., Hamzah, M. R., Sern, T. J., Ayub, S. H., & Mohamad, E. (2020). Public knowledge, attitudes and practices towards COVID-19: A cross-sectional study in Malaysia. PLoS ONE, 15(5), 1–15. https://doi.org/10.1371/journal.pone.0233668

Bernama. (2021, January 31). Malaysians' SOP compliance key to contain COVID - Health DG. astroawani.com. https://www.astroawani.com/berita-malaysia/malaysians-sop-compliance-key-contain-covid-health-dg-271464 guidance.html?CDC_AA_refVal=https%3A%2F%2Fwww.cdc.gov%2Fcoronavirus% 2F2019-ncov%2Fcommunity%2Fschools-childcare%2Fcloth-face-cover.html

Centers for Disease Control and Prevention (CDC). (2020, February 11). Guidance For Unvaccinated People: Guidance for Wearing Masks. Centers for Disease

© COPYRIGHT UPM

Control and Prevention. https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/cloth-face-cover-

Chang, C. T., Lee, M., Lee, J. C. Y., Lee, N. C. T., Ng, T. Y., Shafie, A. A., & Thong, K. S. (2021). Public KAP towards COVID-19 and antibiotics resistance: a Malaysian survey of knowledge and awareness. International Journal of Environmental Research and Public Health, 18(8). https://doi.org/10.3390/ijerph18083964

Chen, H., Zhang, M., Su, L., Cao, H., Zhou, X., Gu, Z., Liu, H., Wu, F., Li, Q., Xian, J., Chen, Q., & Lin, Q. (2021). Knowledge, Attitudes, and Practices Toward COVID-19 Among Chinese Teachers, Shenzhen: An Online Cross-sectional Study During the Global Outbreak of COVID-19. Frontiers in Public Health, 9(August), 1–9. https://doi.org/10.3389/fpubh.2021.706830

Chiwaridzo, M., Chikasha, T. N., Naidoo, N., Dambi, J. M., Tadyanemhandu, C., Munambah, N., & Chizanga, P. T. (2017). Content validity and test-retest reliability of a low back pain questionnaire in Zimbabwean adolescents. Archives of Physiotherapy, 7(1), 1–12. https://doi.org/10.1186/s40945-017-0031-y

Chng, S. Y., Chia, F., Leong, K. K., Kwang, Y. P., Ma, S., Lee, B. W., Vaithinathan, R., & Tan, C. C. (2004). Mandatory temperature monitoring in schools during

Chua, C. E., Kew, G. S., Demutska, A., Quek, S., Loo, E. X. L., Gui, H., Wong, S., Lau, H. X., Low, E. X. S., Loh, T. L., Ooi, S. L., Hung, E. C. W., Rahman, M. M., Ghoshal, U. C., Wong, H., Cheung, C. K. Y., Syam, A. F., Tan, N., Xiao, Y., . . . Siah, K. T. H. (2021). Factors associated with high compliance behaviour against COVID-19 in the early phase of pandemic: a cross-sectional study in 12 Asian countries. BMJ Open, 11(8), e046310. https://doi.org/10.1136/bmjopen-2020-046310

Community, Work, and School (2020b, February 11). Ventilation in Schools and Childcare Programs. Centers for Disease Control and Prevention. https://www.cdc.gov/coronavirus/2019-ncov/community/schools-childcare/ventilation.html

Coronavirus Disease 2019 (COVID-19) (2020, February 11). Science Brief: COVID-19 Vaccines and Vaccination. Centers for Disease Control and Prevention. https://www.cdc.gov/coronavirus/2019-ncov/science/science-briefs/fully-vaccinated-people.html

Coronavirus Disease 2019 (COVID-19) (2020b, February 11). Science Brief: Transmission of SARS-CoV-2 in K-12 schools. Centers for Disease Control and Prevention. https://www.cdc.gov/coronavirus/2019-ncov/science/science-briefs/transmission_k_12_schools.html#:%7E:text=The%20evidence%20to%20date%20suggests,among%20adults%20in%20school%20setting.

© COPYRIGHT UPM

COVID-19 MALAYSIA. (2021, April 30). TUJUH BELAS (17) KLUSTER BAHARU DILAPORKAN HARI INI (30/04/2021). https://covid-19.moh.gov.my/sorotan/2021/04/tujuh-belas-17-kluster-baharu-dilaporkan-hari-ini-30042021

Department of Statistics Malaysia (2020) Current statistics: Covid-19 by states in Malaysia.Retrieved from https://www.dosm.gov.my/v1/index.php?r=column/cone&menu_id=UjJoNk9Oa lhZWlVHdExiaGF1OW13UT09 [Accessed 20/4/20]

European Centre for Disease Prevention and Control. (2020). COVID-19 in children and the role of school settings in transmission - first update. https://www.ecdc.europa.eu/sites/default/files/documents/COVID-19-in-children-and- the-role-of-school-settings-in-transmission-first-update_1.pdf

Falk, A., Benda, A., Falk, P., Steffen, S., Wallace, Z., & Høeg, T. B. (2021). COVID-19 Cases and Transmission in 17 K–12 Schools — Wood County, Wisconsin, August 31–November 29, 2020. MMWR. Morbidity and Mortality Weekly Report, 70(4), 136–140. https://doi.org/10.15585/mmwr.mm7004e3

Fenner, R., & Cernev, T. (2021). The implications of the Covid-19 pandemic for delivering the Sustainable Development Goals. Futures, 128, 102726. https://doi.org/10.1016/j.futures.2021.102726

Florence, M., Abdul Said, A., Jing, C. W., Sundara Rajan, J. D., Ramachandaran, K., Mohd Yamin, M. L. H., Azmi, N. S., Han, Y. J., Atil, A., Musleh, A. S., Omar, A., & Ibrahim, M. Y. (2021). Perceived Status towards COVID-19 Mitigation Measures among Medical Students in Malaysian Borneo. Borneo Epidemiology Journal, 2(1). https://doi.org/10.51200/bej.v2i1.3238

FMT Reporters. (2021, April 26). 79 schools in Selangor closed for 2 days after spike in Covid-19 cases. Free Malaysia Today. https://www.freemalaysiatoday.com/category/nation/2021/04/26/79-schools-in-selangor-closed-for-2-days-after-spike-in-covid-19-cases/

Ganasegeran, K., Hock Ch'ng, A. S., & Looi, I. (2020). COVID-19 In Malaysia: Crucialc Measures in Critical Times. Journal of Global Health, 10(2), 1–4. https://doi.org/10.7189/jogh.10.020333

Goruntla, N., Bhupalam, P., Jinka, D. R., Thummala, J., Dasari, L. Y., & Bonala, K. K. (2020). Knowledge, Per-ception, and Practices towards COVID-19 Pandemic among General Public of India: A Cross-sectional online survey. Current Medicine Research and Practice, 10(4), 153–159. https://doi.org/10.1016/j.cmrp.2020.07.013

Government of Singapore. (2020, February 4). What's the difference between a Leave of Absence and a Quaran-tine Order?

© COPYRIGHT UPM

https://www.gov.sg/article/whats-the-difference-between-a-leave-of-absence-and-a-quarantine-order

Harun, H. N. (2021, April 21). Dr Adham: 83 Covid-19 clusters this year linked to education sector. NST Online. https://www.nst.com.my/news/nation/2021/04/684136/dr-adham- 83-covid-19-clusters-year-linked-education-sector

Harun, H. N., & Arumugam, T. (2020, July 1). Back to school: Full reopening by July 22.

Hassan, H. (2021, March 22). Malaysian parents anxious over Covid-19 cases in newly reopened schools. The Straits Times. https://www.straitstimes.com/asia/se- asia/malaysian-parents-anxious-over-covid-19-cases-in-newly-reopened-schools

Hatabu, A., Mao, X., Zhou, Y., Kawashita, N., Wen, Z., Ueda, M., Takagi, T., & Tian, Y. S. (2021). Knowledge, atti-tudes, and practices toward COVID-19 among univer-sity students in Japan and associated factors: An online cross-sectional survey. PLoS ONE, 15(12 December), 1–19. https://doi.org/10.1371/journal.pone.0244350

Indoor Air and Coronavirus (COVID-19). (2021, December 15). US EPA. https://www.epa.gov/coronavirus/indoor-air-and-coronavirus-covid-19

Jabatan Kesihatan Negeri Selangor (JKNJ). (2020, August 18). Infografik Ringkasan Kes Harian COVID-19 Negeri Selangor. Facebook. https://www.facebook.com/photo/?fbid=4216756998408699&set=pcb.4216757745075291

Kementerian Pendidikan Malaysia. (2020). Garis Panduan Pengurusan Pembukaan Semula Sekolah. Kementerian Pendidikan Malaysia, 1–31. https://www.moe.gov.my/pekeliling/4109-garis-panduan-pengurusan-dan-pengoperasian-sekolah-dalam-norma-baharu-2-0/file

Kementerian Pendidikan Malaysia. (2021). GARIS PANDUAN PENGURUSAN DAN PENGOPERASIAN SEKOLAH 3.0. Kementerian Pendidikan Malaysia, https://www.moe.gov.my/muat-turun/pekeliling-dan-garis-panduan/4641-garis-panduan-pengurusan-dan-pengoperasian-sekolah-3-0

Kurohi, R. (2021, May 21). 42 students from 30 schools in Singapore infected in past month.

Lam, K. W., Hassan, A., Sulaiman, T., & Kamarudin, N. (2018). Evaluating the Face and Content Validity of an Instructional Technology Competency Instrument for University Lecturers in Malaysia. International Journal of Academic Research in Business and Social Sciences, 8(5), 363–381. https://doi.org/10.6007/ijarbss/v8-i5/4108

© COPYRIGHT UPM

Launiala, A. (2009). How much can a KAP survey tell us about people's knowledge, attitudes and practices? Some observations from medical anthropology research on malaria in pregnancy in Malawi. Anthropology Matters, 11(1). https://www.anthropologymatters.com/index.php/anth_matters/article/view/31/55

Lemeshow, S., Jr., D. H. W., Klar, J., & Lwanga, S. K. (1990a). Adequacy of Sample Size in Health Studies (1st ed.). Wiley. https://apps.who.int/iris/bitstream/handle/10665/41607/0471925179_eng.pdf?sequence=1&isAllowed=y

Li, Z.-H., Zhang, X.-R., Zhong, W.-F., Song, W.-Q., Wang, Z.-H., Chen, Q., Liu, D., Huang, Q.-M., Shen, D., Chen, P.-L., Mao, A., Zhang, D., Yang, X., Wu, X.-B., & Mao Id, C. (2020). Knowledge, attitudes, and practices related to Coronavirus disease 2019 during the outbreak among workers in China: A large cross-sectional study. https://doi.org/10.1371/journal.pntd.0008584

Lyu, W., & Wehby, G. L. (n.d.). Community Use of Face Masks And COVID-19: Evidence from A Natural Ex-periment of State Mandates in the US. https://doi.org/10.1377/hlthaff.2020.00818

Mehmet, N., Al-Abed, A. abed A. A., Gökler, M. E., Elengoe, A., Ünal, E., & Mollahaliloğlu, S. (2020). Knowledge, attitudes and practices regarding COVID-19 among the Turkish and Malaysian general populations during lockdown: A cross- sectional online survey. Ethiopian Journal of Health Development, 34(4), 243–252. https://www.ajol.info/index.php/ejhd/article/view/203220

Mehmet, N., Al-Abed, A. abed A. A., Gökler, M. E., Elengoe, A., Ünal, E., & Mollahaliloğlu, S. (2020). Knowledge, atti-tudes and practices regarding COVID-19 among the Turkish and Malaysian general populations during lockdown: A cross- sectional online survey. Ethiopian Journal of Health Development, 34(4), 243–252. https://www.ajol.info/index.php/ejhd/article/view/203220

Melnick, H., Darling-Hammond, L., Leung, M., Yun, C., Schachner, A., Plasencia, S., & Ondrasek, N. (2020). Reopening schools in the context of COVID-19: Health and safety guidelines from other countries. Learning Policy Institute, May, 1–13. https://learningpolicyinstitute.org/sites/default/files/product-files/Reopening_Schools_COVID-19_BRIEF.pdf

Menon, S. (2021, September 12). Education Minister: Tighter SOP for schools ahead of Oct 3 reopening. The Star. https://www.thestar.com.my/news/nation/2021/09/12/educa-tion-minister-tighter-sop-for-schools-ahead-of-oct-3-reopeningYolton, K., Dietrich, K., Auinger, P., Lanphear, B. P., & Hornung, R. (2005). Exposure to

environmental tobacco smoke and cognitive abilities among US chil-dren and adolescents. Environmental Health Perspec-tives, 113(1), 98.

Mohamad Najib Abdul Ghafar (2013), Pembinaan Analisis & Ujian Bilik Darjah, Edisi Kedua. Penerbit UTM Press

Mohamed, N. A. (2018). Knowledge, Attitude and Practice on Bats-Borne Diseases among Village Residents: A Pilot Study. Medicine & Health, 13(2), 48–57. https://doi.org/10.17576/mh.2018.1302.05

National Recovery Plan. (NRP) (2021). https://pelanpemulihannegara.gov.my/laporan/PPN-en/index.html

New Straits Time (2020b, nts). Parents crowding at school entrance, difficult observing social distancing. NST Online. https://www.nst.com.my/news/nation/2020/07/610747/parents-crowding-school- entrance-difficult-observing-social-distancing

Noorshahrizam, S. A. (2021, April 21). Health Ministry: 4,868 Covid-19 cases in education sector so far this year. Malaysia | Malay Mail. https://www.malaymail.com/news/malaysia/2021/04/21/health-ministry-4868-covid- 19-cases-in-education-sector-so-far-this-year/1968272

Nunes, A. R., Lee, K., & O'riordan, T. (n.d.). The importance of an integrating framework for achieving the Sustainable Development Goals: the example of health and well- being. https://doi.org/10.1136/bmjgh-2016

Oloruntoba, E. O., & Wada, O. Z. (2021). Safe Reopening of Schools during COVID-19: An Evaluation of Handwash Facilities and Students' Hand Hygiene Knowledge and Practices. European Journal of Environment and Public Health, 5(2), em0072. https://doi.org/10.21601/ejeph/9704

Pejabat Kesihatan WP Putrajaya (2020, August 18). Pergerakan 14 hari taburan kes Covid-19 mengikut lokaliti di Wilayah Persekutuan Putrajaya sehingga 18 Ogos 2021. Facebook. https://www.facebook.com/282946428886976/photos/pb.100069167291038.-2207520000../1188214541693489/?type=3

Perimbanayagam, K. (2021, August 15). Schools in Phase Two to be reopened in stages from Oct 3. NST Online. https://www.nst.com.my/news/nation/2021/08/718219/schools-phase-two-be-reopened-stages-oct-3

Phuc, N., Nguyenid, T., Dinh Hoangid, T., Tran, V. T., Vuid, C. T., Nelson, J., Fodjoid, S., Colebunders, R., Dunne, M. P., & Van Void, T. (2020). Preventive behavior of Viet-namese people in response to the COVID-19 pandemic. https://doi.org/10.1371/journal.pone.0238830

© COPYRIGHT UPM

Pollock, A. M., & Lancaster J.(2020, December 21). Asymptomatic transmission of Covid-19 BMJ;371. https://doi.org/10.1136/bmj.m4851

Quann, J. (2020, September 21). Physical distancing "not being applied as it should be" in schools - ASTI. Newstalk. https://www.newstalk.com/news/physical-distancing-not- applied-schools-asti-1079030

Ramdas, M. (2018). Determinants of Tourist Behaviour Towards the marine Environment in Perhentian Island, Terengganu, Malaysia. [Doctoral theses, Universiti Sains Malaysia]. http://eprints.usm.my/44170/1/MURUGADAS%20RAMDAS.pdf

Rodrigues, I. B., Adachi, J. D., Beattie, K. A., & MacDermid, J. C. (2017). Development and validation of a new tool to measure the facilitators, barriers and preferences to exercise in people with osteoporosis. BMC Musculoskeletal Disorders, 18(1), 1–9. https://doi.org/10.1186/s12891-017-1914-5

Sachs, J., Schmidt-Traub, G., Kroll, C., Lafortune, G., Fuller, G., & Woelm, F. (2021). Sustainable Development Report 2020: The Sustainable Development Goals and Covid-19 Includes the SDG Index and Dashboards. Cambridge: Cambridge University Press. https://doi.org/10.1017/9781108992411

Seshaiyer, P., & McNeely, C. L. (2020). Challenges and Opportunities From COVID ‐ 19 for Global Sustainable Development. World Medical & Health Policy, 12(4), 443 ‐ 453. https://doi.org/10.1002/wmh3.380

Siang, N. H. (2021, May 22). Anglo-Chinese School (Junior) student is first case of school- based COVID-19 transmission: MOE. CNA. https://www.channelnewsasia.com/news/singapore/anglo-chinese-junior-student-first- case-school-transmission-moe-14859820

Tang K. (2020). Movement control as an effective measure against Covid-19 spread in Malaysia: an overview. Zeitschrift fur Gesundheitswissenschaften = Journal of public health, 1–4. Advance online publication. https://doi.org/10.1007/s10389-020-01316-w

The KAP Survey model - Knowledge attitude and practices | Médecins du Monde. (n.d.). Retrieved May 14, 2021, from https://www.medecinsdumonde.org/en/actualites/publications/2012/02/20/kap-survey- model-knowledge-attitude-and-practices

The Merriam-Webster.com Dictionary. https://www.merriam-webster.com/dictionary/knowledge (accessed on 10th June 2021)

The Star (2021, May 19). Thailand postpones start of new school term to June 14. The Star. https://www.thestar.com.my/aseanplus/aseanplus-news/2021/05/19/thailand- postpones-start-of-new-school-term-to-june-14

© COPYRIGHT UPM

Times, N. S. (2020, March 16). 14-day Movement Control Order begins nationwide on Wednesday. NST Online. https://www.nst.com.my/news/nation/2020/03/575180/14- day-movement-control-order-begins-nationwide-wednesday

Ubaidah, A., Mansor, A. N., & Hashim, H. (2021). Challenges of COVID Standard Operating Procedure Compliance in a Secondary Private School. Creative Education, 12(08), 1881–1890. https://doi.org/10.4236/ce.2021.128143

UNICEF. (2021). COVID-19: Schools for more than 168 million children globally have been completely closed for almost a full year, says UNICEF. https://www.unicef.org/press- releases/schools-more-168-million-children-globally-have-been-completely-closed

WHO - World Health Organization. (2020). Considerations for school-related public health measures in the context of COVID-19. World Health Organisation, 2020, 1–10. https://www.who.int/publications-detail/risk-

WHO. (2008). Advocacy, communication and social mobilization for TB control: a guide to developing knowledge, attitude and practice surveys. World Health Organizarion. http://apps.who.int/iris/bitstream/handle/10665/43790/9789241596176_eng.pdf;jsessi onid=269B54B7359C9886937DE576F50FA1A6?sequence=1

World Health Organization. (2020c, March 11). WHO Director-General's opening remarks at the media briefing on COVID-19 - 11 March 2020. https://www.who.int/director- general/speeches/detail/who-director-general-s-opening-remarks-at-the-media- briefing-on-covid-19 11-march-2020

Xue, Q., Xie, X., Liu, Q., Zhou, Y., Zhu, K., Wu, H., Wan, Z., Feng, Y., Meng, H., Zhang, J., Zuo, P., & Song, R. (2021). Knowledge, attitudes, and practices towards COVID-19 among primary school students in Hubei Province, China. Children and Youth Services Review, 120, 105735. https://doi.org/10.1016/j.childyouth.2020.105735

Younie S, Mitchell C, Bisson M-J, Crosby S, Kukona A, Laird K.(2020) Improving young children's handwashing behaviour and understanding of germs: The impact of A Germ's Journey educational resources in schools and public spaces. Plos One. ;15(11):e0242134. Available from: https://journals.plos.org/plosone/article?id=10.1371/journal.pone.0242134

Yung, C. F., Kam, K. Q., Nadua, K. D., Chong, C. Y., Tan, N. W. H., Li, J., Lee, K. P., Chan, Y. H., Thoon, K. C., & Ng, K. C. (2020). Novel Coronavirus 2019 Transmission Risk in Educational Settings. Clinical Infectious Diseases, 72(6), 1055–1058. https://doi.org/10.1093/cid/ciaa794

© COPYRIGHT UPM

Yusof, T. A. (2021, May 5). KL, Putrajaya schools closed tomorrow and Friday. NST Online. https://www.nst.com.my/news/nation/2021/05/688160/kl-putrajaya-schools-closed- tomorrow-and-friday

Zainul, E. (2021, May 10). MCO 3.0 expands to whole country, restrictions from May 12 to June 7. The Edge Markets. https://www.theedgemarkets.com/article/pm-announces- whole-malaysia-under-mco-may-12-june-7

Zamanzadeh, V., Ghahramanian, A., Rassouli, M., Abbaszadeh, A., Alavi-Majd, H., & Nikanfar, A.-R. (2015). Design and Implementation Content Validity Study: Development of an instrument for measuring Patient-Centered Communication. Journal of Caring Sciences, 4(2), 165–178. https://doi.org/10.15171/jcs.2015.017

Zhai, K., Gao, X., & Wang, G. (2018). The Role of Sleep Quality in the Psychological Well-Being of Final Year UndergraduateStudents in China. International Journal of Environmental Research and Public Health, 15(12), 2881. https://doi.org/10.3390/ijerph15122881

© COPYRIGHT UPM

APPENDIX 1

KEMENTERIAN
PENDIDIKAN
MALAYSIA

***STANDARD OPERATING PROCEDURE* (SOP)**
PENCEGAHAN PENULARAN JANGKITAN
PENYAKIT CORONAVIRUS 2019 (COVID-19)
DI SEKOLAH KEMENTERIAN PENDIDIKAN
MALAYSIA

MAC 2020

© COPYRIGHT UPM

***STANDARD OPERATING PROCEDURE* (SOP) PENCEGAHAN PENULARAN COVID-19 DI SEKOLAH KEMENTERIAN PENDIDIKAN MALAYSIA**

1. PENGENALAN

Kementerian Pendidikan Malaysia (KPM) sentiasa mengikuti dan memantau perkembangan penularan jangkitan penyakit Coronavirus 2019 (COVID-19) berdasarkan laporan yang dikeluarkan oleh Kementerian Kesihatan Malaysia (KKM) dan Badan Pertubuhan Kesihatan Dunia (WHO). KPM mengambil perhatian yang serius mengenai penularan virus ini dalam kalangan warga sekolah bawah pentadbiran KPM.

KPM telah mengambil langkah proaktif dengan mengeluarkan surat Langkah Kesiapsiagaan Pencegahan Kejadian Jangkitan 2019 *Novel Coronavirus* (2019-nCOV) di Sekolah Kerajaan dan Bantuan Kerajaan, Kementerian Pendidikan Malaysia untuk meningkatkan kesiapsiagaan sekolah dalam mencegah penularan jangkitan COVID-19 bertarikh 4 Februari 2020 untuk persediaan di peringkat awal kejadian jangkitan penyakit ini dilaporkan di Malaysia. Walau bagaimanapun, berdasarkan perkembangan semasa, garis panduan yang jelas dan terperinci diperlukan oleh pihak sekolah untuk menangani isu penularan jangkitan COVID-19 dalam usaha pencegahan jangkitan penyakit ini dalam kalangan warga sekolah.

2. OBJEKTIF

Tujuan garis panduan ini adalah untuk membantu pengurusan sekolah di bawah KPM termasuklah sekolah swasta akademi dan agama, sekolah antarabangsa dan sekolah ekspatriat yang berdaftar dengan KPM untuk mengambil langkah-langkah mengawal penularan penyakit COVID-19 termasuk mengendalikan warga sekolah yang terlibat dengan perjalanan ke negara-negara yang dikategorikan sebagai negara berisiko tinggi dalam penularan virus COVID-19 iaitu China (Taiwan, Macau, Hong Kong), Republik Korea, Jepun, Itali dan Iran sebagaimana yang dinyatakan dalam kenyataan akhbar Ketua Pengarah Kesihatan Malaysia pada 28 Februari 2020 dan negara-negara lain yang diisytiharkan oleh KKM dari semasa ke semasa. Warga sekolah juga diminta untuk sentiasa melayari laman web KKM untuk mendapatkan perkembangan terkini jangkitan penyakit ini serta mendapatkan senarai terkini negara terjejas dengan wabak COVID-19 sebagai langkah berjaga-jaga.

© COPYRIGHT UPM

3. LANGKAH-LANGKAH MENGAWAL PENULARAN JANGKITAN COVID-19

3.1 Murid dinasihati untuk tidak mengikuti sebarang program yang akan dianjurkan di negara yang terjejas dengan COVID-19 dan dikategorikan sebagai berisiko tinggi oleh KKM seperti China (Taiwan, Macau, Hong Kong), Republik Korea, Jepun, Itali dan Iran serta negara-negara lain yang diisytiharkan oleh KKM dari semasa ke semasa;

3.2 Semua murid yang mempunyai sejarah tinggal atau melawat ke negara-negara yang terjejas dengan COVID-19 dan dikategorikan sebagai berisiko tinggi oleh KKM iaitu China (Taiwan, Macau, Hong Kong), Republik Korea, Jepun, Itali dan Iran serta negara-negara lain yang diisytiharkan oleh KKM dari semasa ke semasa perlu diletakkan bawah Perintah Pengawasan dan Pemantauan (*home surveillance*) untuk memantau status kesihatan mereka secara penilaian kendiri di tempat tinggal masing-masing **selama 14 hari** dari tarikh berlepas dan mereka **tidak perlu hadir** ke sekolah. Pihak sekolah perlu mengambil tindakan selanjutnya seperti berikut:

i. mengenal pasti murid yang tergolong dalam kumpulan yang dinyatakan di atas dan membekalkan butiran peribadi mereka termasuk nama, nombor telefon, alamat tempat tinggal, nama sekolah dan tarikh ketibaan di Malaysia kepada Jabatan Kesihatan Negeri (JKN)/ Pusat Kesihatan Daerah (PKD) yang berdekatan untuk dikemukakan kepada *Crisis Preparedness and Response Centre* (CPRC) Kebangsaan;

ii. memaklumkan kepada mereka untuk mendapatkan rawatan di hospital jika mengalami gejala jangkitan saluran pernafasan seperti demam, batuk atau sesak nafas dalam tempoh tersebut; dan

iii. mereka hadir semula ke sekolah setelah 14 hari atau disahkan sihat oleh KKM; dan

iv. merujuk kepada carta alir pengurusan murid yang pulang atau datang dari negara yang terjejas dengan wabak penyakit COVID-19 seperti di Lampiran 1 dan 2.

3.3 Pihak sekolah swasta akademik dan agama, sekolah antarabangsa dan sekolah ekspatriat hendaklah memberikan *letter of absence* (LOA) kepada murid yang diletakkan di bawah *home surveillance* untuk tempoh 14 hari.

3.4 Menasihatkan murid dan warga sekolah yang lain untuk segera mendapatkan rawatan perubatan sekiranya mengalami gejala seperti demam, batuk atau sesak nafas dan menasihatkan mereka agar tidak hadir ke sekolah sehinggalah mereka sembuh;

© COPYRIGHT UPM

3.5 Jika terdapat murid yang bergejala tetapi masih hadir ke sekolah, mereka perlulah diasingkan seperti di bilik kesihatan sementara menghubungi ibu bapa/penjaga untuk menjemput anak/anak jagaan mereka pulang dan mendapatkan rawatan selanjutnya. Bagi warga sekolah lain yang menunjukkan gejala tersebut, pelepasan perlu diberikan untuk mereka pulang dan mendapatkan rawatan lanjut;

3.6 Sekiranya terdapat kes warga sekolah yang disahkan positif mendapat jangkitan penyakit ini, pihak sekolah perlu melaporkan kepada JKN/PKD untuk tindakan kawalan pencegahan wabak secara serta merta dan pihak sekolah perlu mematuhi nasihat dan arahan selanjutnya oleh JKN/PKD;

3.7 Memastikan murid yang tinggal di asrama yang bergejala diasingkan sementara menghubungi segera ibu bapa/penjaga untuk menjemput anak/anak jagaan mereka pulang dan mendapatkan rawatan selanjutnya;

3.8 Mendapatkan kerjasama dengan JKN/PKD untuk menjalankan saringan suhu di pintu masuk sekolah bagi mana-mana sekolah yang melaporkan kejadian jangkitan atau ketidakhadiran dalam kalangan warga sekolah yang tinggi. Dapatan daripada aktiviti saringan suhu ini perlu dilaporkan kepada pihak PPD dan PKD yang berhampiran;

3.9 Mewujudkan kesedaran mengenai kepentingan menjaga kebersihan dan kesihatan diri kepada warga sekolah, khususnya murid-murid. Mereka perlu diingatkan agar sentiasa mengekalkan tahap kebersihan diri yang tinggi, amalan kerap membasuh tangan dengan menggunakan air dan sabun atau *hand sanitizer*, mengamalkan adab batuk yang baik dan mengamalkan cara hidup sihat;

3.10 Menasihati murid terutama yang bergejala untuk berada di rumah dan tidak pergi ke tempat tumpuan ramai. Sekiranya perlu ke tempat awam, mereka dinasihatkan untuk memakai penutup mulut dan hidung (*face mask*);

3.11 Memberi kefahaman kepada ibu bapa/penjaga mengenai peranan mereka dalam usaha mencegah penularan wabak jangkitan penyakit ini di sekolah dan peka kepada status kesihatan anak/anak jagaan mereka serta tidak menghantar anak/anak jagaan mereka yang sakit ke sekolah sehingga sembuh sepenuhnya; dan

3.12 Pelaksanaan aktiviti di luar bilik darjah boleh diadakan dengan merujuk kepada garis panduan yang dikeluarkan oleh KKM dan pihak sekolah boleh membuat pertimbangan yang sewajarnya sekiranya perlu untuk menunda atau membatalkan aktiviti tersebut.

© COPYRIGHT UPM

4. PENUTUPAN DAN DISINFEKSI SEKOLAH

4.1 Proses disinfeksi perlu dilakukan dengan panduan dan nasihat daripada JKN/PKD.

4.2 Sebarang tindakan penutupan sekolah atau kelas adalah tertakluk kepada Pengetua dan Guru Besar setelah mendapat nasihat JKN/PKD.

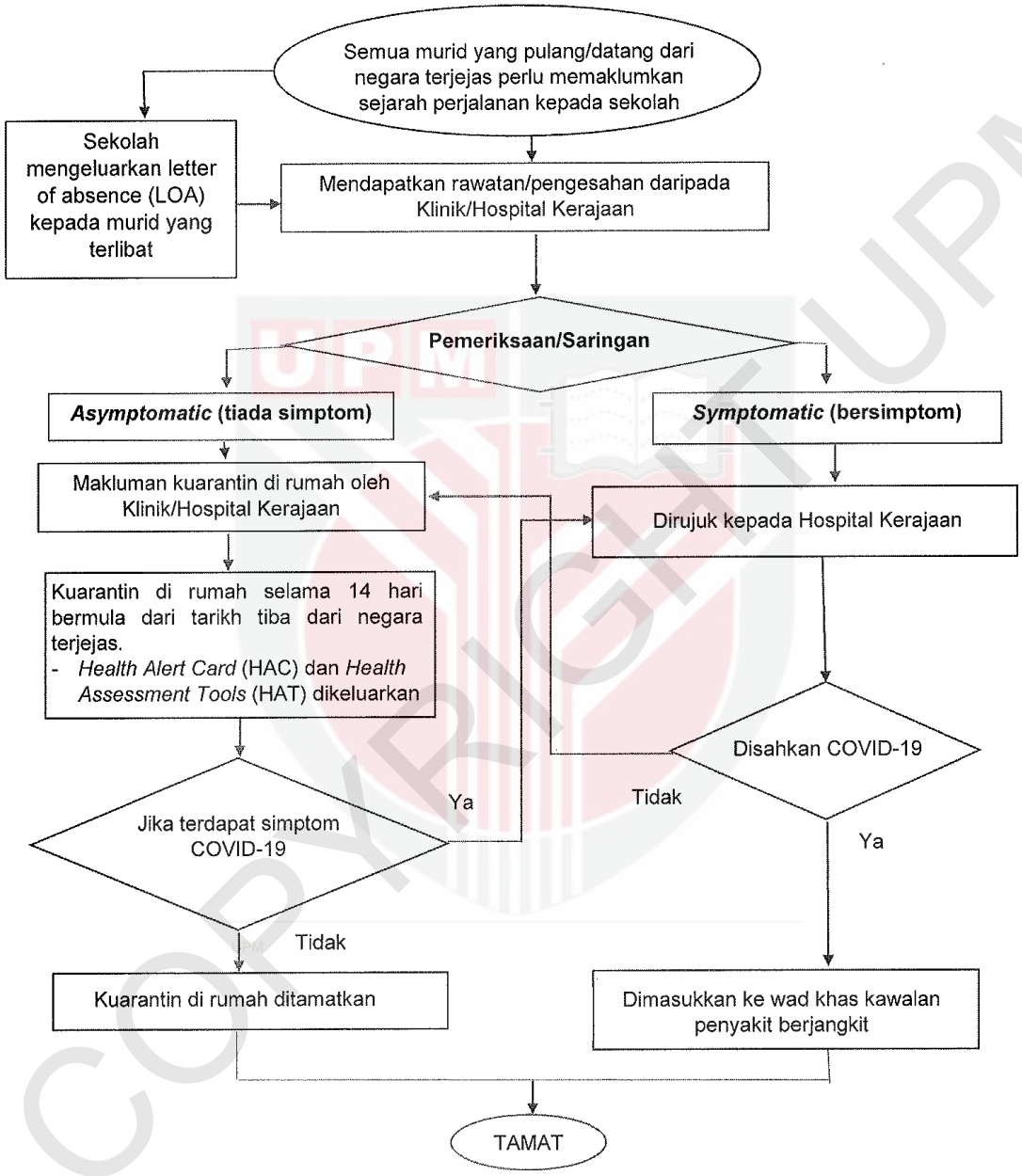
5. PENUTUP

KPM mengharapkan agar pihak Jabatan Pendidikan Negeri (JPN)/ Pejabat Pendidikan Daerah (PPD)/ sekolah mematuhi SOP ini untuk mencegah penularan wabak penyakit COVID-19 dalam kalangan warga sekolah terutamanya murid.

© COPYRIGHT UPM

Lampiran 1

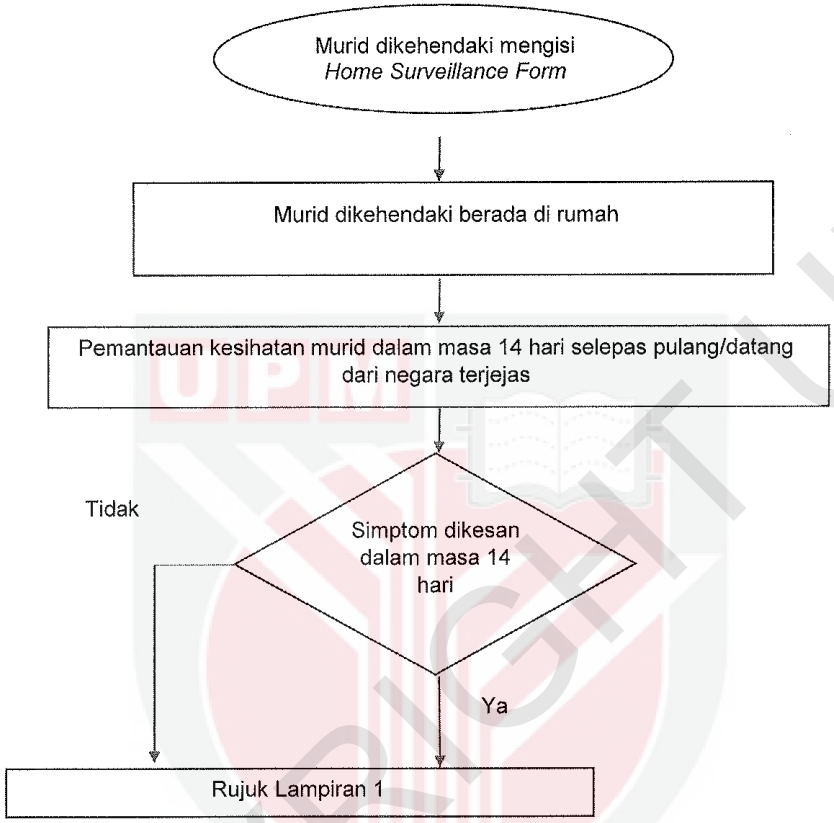
CARTA ALIR PENGURUSAN MURID YANG PULANG/DATANG DARI NEGARA TERJEJAS WABAK PENYAKIT COVID-19 YANG DIISYTIHARKAN OLEH KEMENTERIAN KESIHATAN MALAYSIA



© COPYRIGHT UPM

Lampiran 2

GARIS PANDUAN PEMANTAUAN/KUARANTIN DI RUMAH



© COPYRIGHT UPM

HOME ASSESMENT TOOL

Name	:	
No. Identity Card / Passport No.	:	
No. Telephone	:	Mobile: ..... Home: .....
Home Address	:	
Date Arrival in Malaysia	:	
Flight No.	:	

TABLE FOR DAILY MONITORING

INSTRUCTION: Please (√) the symptoms that you experience for each day.

Day 1	Day 2	Day 3	Day 4	Day 5	Day 6	Day 7
Date: ...../...../.....	**Date:** ...../...../.....	**Date:** ...../...../.....	**Date:** ...../...../.....	**Date:** ...../...../.....	**Date:** ...../...../.....	**Date:** ...../...../.....
Symptoms : Fever ( ) Sore throat ( ) Cough ( ) Shortness of breath ( )	**Symptoms :** Fever ( ) Sore throat ( ) Cough ( ) Shortness of breath ( )	**Symptoms :** Fever ( ) Sore throat ( ) Cough ( ) Shortness of breath ( )	**Symptoms :** Fever ( ) Sore throat ( ) Cough ( ) Shortness of breath ( )	**Symptoms :** Fever ( ) Sore throat ( ) Cough ( ) Shortness of breath ( )	**Symptoms :** Fever ( ) Sore throat ( ) Cough ( ) Shortness of breath ( )	**Symptoms :** Fever ( ) Sore throat ( ) Cough ( ) Shortness of breath ( )

Day 8	Day 9	Day 10	Day 11	Day 12	Day 13	Day 14
Date: ...../...../.....	**Date:** ...../...../.....	**Date:** ...../...../.....	**Date:** ...../...../.....	**Date:** ...../...../.....	**Date:** ...../...../.....	**Date:** ...../...../.....
Symptoms : Fever ( ) Sore throat ( ) Cough ( ) Shortness of breath ( )	**Symptoms :** Fever ( ) Sore throat ( ) Cough ( ) Shortness of breath ( )	**Symptoms :** Fever ( ) Sore throat ( ) Cough ( ) Shortness of breath ( )	**Symptoms :** Fever ( ) Sore throat ( ) Cough ( ) Shortness of breath ( )	**Symptoms :** Fever ( ) Sore throat ( ) Cough ( ) Shortness of breath ( )	**Symptoms :** Fever ( ) Sore throat ( ) Cough ( ) Shortness of breath ( )	**Symptoms :** Fever ( ) Sore throat ( ) Cough ( ) Shortness of breath ( )

NOTE: *Days of self monitoring can be added to the instructed period IF a person has recurrent exposure to the risk of infection.*

© COPYRIGHT UPM

Please do all the below while you are under home surveillance:

- *Be contactable at all time.*
- *Stay at home during the self-monitoring period.*
- *Limit visitors to your house.*
- *List the name of those visiting you.*
- *Always practice good cough etiquette.*
- *If you develop any symptom, always wear face mask. If you do not wear face mask, close your mouth and nose with tissues when coughing or sneezing. Throw the tissues into closed dustbin and **immediately WASH YOUR HANDS** with soap or hand sanitizer.*
- *Limit your distance with healthy person(s) to at least 1 meter.*
- *Wear face mask when you go out of your room and avoid contact with others.*
- *Open all windows in your house to ensure good ventilation.*
- *Do not share utensils, tableware and personal hygiene items.*

MONITOR YOURSELF FOR ANY SYMPTOMS

*If you develop fever or cough or sore throat, **IMMEDIATELY contact the District Health Office at _____.***

© COPYRIGHT UPM

Appendix 2

List of selected schools based on random sampling for South Selangor	
No.	**Districts (Mukim)**
	Kuala Langat (Tanjung 12(1))
1.	**Sekolah Kebangsaan Sg. Kelambu**
2.	**Kolej Vokasional Sultan Abdul Samad**
	Hulu Langat (Kajang)
1.	**Sekolah Kebangsaan Bandar Baru Bangi**
2	**Sekolah Kebangsaan Jalan 3**
3	**Sekolah Menengah Kebangsaan Bandar Seri Putra**
	Sepang (Dengkil)
1.	**Sekolah Kebangsaan Jenderam**
2.	**Sekolah Menengah Kebangsaan Cyberjaya**
List of selected schools based on random sampling for Putrajaya	
	Precincts
	Precincts 9
1.	**Sekolah Kebangsaan Putrajaya Presint 9(1)**
2.	**Sekolah Menengah Kebangsaan Putrajaya Presint 9(2)**
	Precincts 11
1.	**Sekolah Kebangsaan Putrajaya Presint 11(1)**
2.	**Sekolah Kebangsaan Putrajaya Presint 11(2)**
3.	**Sekolah Menengah Kebangsaan Putrajaya Presint 11(1)**

© COPYRIGHT UPM

	Precincts 17
1.	***Sekolah Kebangsaan Putrajaya Presint 17(1)***

© COPYRIGHT UPM

© COPYRIGHT UPM

Appendix 3

QUESTIONNAIRE FORM

BORANG KAJI SELIDIK

KNOWLEDGE, ATTITUDE AND PRACTICE COVID-19 '*SOP*' COMPLIANCE AMONG SCHOOL ADMINISTRATORS AND TEACHERS IN SELANGOR, KUALA LUMPUR & PUTRAJAYA

PENGETAHUAN, SIKAP DAN AMALAN TERHADAP PEMATUHAN SOP COVID-19 DI KALANGAN PENGURUSAN SEKOLAH DI SELANGOR, KUALA LUMPUR & PUTRAJAYA

ID NO./*NO.ID:* **……**

DATE/*TARIKH***: ……**

QUESTIONS INSTRUCTIONS:

Arahan soalan:

1. **THIS QUESTIONNAIRE FORM CONSISTS OF SEVERAL SECTIONS: -**
   Borang soal selidik ini terdiri daripada beberapa bahagian: -

   SECTION A : BACKGROUND INFORMATION

   BAHAGIAN A : MAKLUMAT DIRI

   SECTION B : OCCUPATIONAL INFORMATION

   BAHAGIAN B : MAKLUMAT PEKERJAAN

   SECTION C : LIFESTYLE INFORMATION

   BAHAGIAN C : MAKLUMAT GAYA HIDUP

   SECTION D : KNOWLEGDE

© COPYRIGHT UPM

BAHAGIAN D : PENGETAHUAN

SECTION E : ATTITUDE

BAHAGIAN E : SIKAP

SECTION F : PRACTICE

BAHAGIAN F : AMALAN

2. **YOU ARE REQUIRED TO ANSWER ALL QUESTIONS IN THIS QUESTIONNAIRE.**
   Anda dikehendaki menjawab semua soalan dalam soal selidik ini.

3. **PLEASE MARK THE ANSWER IN THE PROVIDED ANSWER SECTION.**
   Sila tandakan jawapan di bahagian yang telah disediakan.

4. **THE QUESTIONNAIRE SHOULD BE RETURNED TO THE RESEARCHER AFTER COMPLETING ALL THE QUESTIONS.**
   Borang soal selidik hendaklah dikembalikan kepada penyelidik selepas menjawab semua soalan

© COPYRIGHT UPM

SECTION A : BACKGROUND INFORMATION

BAHAGIAN A: MAKLUMAT DIRI

A1 AGE :

Umur

A2 GENDER : ☐ **MALE** *Lelaki* ☐ **FEMALE** *Perempuan*

A3 RACE : ☐ **MALAY** *Melayu* ☐ **CHINESE** *Cina*

☐ **INDIAN** *India* ☐ **OTHERS** *Lain-lain*

A4 MONTHLY INCOME :

Pendapatan Bulanan

A5 PLACE OF RESIDENCE : ☐ **KUALA LUMPUR** ☐ **PUTRAJAYA**

Tempat Tinggal

☐ **SELANGOR**

DISTRICTS/PRECINCT :

Daerah/Presint _____

MUKIM : _____

© COPYRIGHT UPM

A6 SCHOOL :

Sekolah _____

A7 SCHOOL LOCATION : ☐ **KUALA LUMPUR** ☐ **PUTRAJAYA**

Lokasi Sekolah

☐ **SELANGOR**

DISTRICTS/PRECINCT :

Daerah/Presint _____

MUKIM : _____

A8 SOURCE OF COVID-19 KNOWLEDGE : ☐ **MINISTRY OF HEALTH** *Kementerian Kesihatan* ☐ **MINISTRY OF EDUCATION** *Kementerian Pendidikan*

Sumber Pengetahuan COVID-19

☐ ***MINISTRY OF COMMUNICATION AND MULTIMEDIA*** Kementerian Komunikasi dan Multimedia ☐ **SOCIAL MEDIA** *Media Sosial*

☐ **FAMILY** *Keluarga* **FRIENDS** *Rakan-rakan*

____

© COPYRIGHT UPM

	OTHERS *Lain-lain*

© COPYRIGHT UPM

SECTION B: OCCUPATIONAL INFORMATION

BAHAGIAN B: MAKLUMAT PEKERJAAN

B1: **Have you worked at a different school before?**

Pernah anda bekerja di tempat lain sebelum ini?

1. ☐ **Yes** *Ya*

2. ☐ **No** *Tidak*

B2: **If yes, what was your previous position?**

Jika ya, apakah jawatan anda dahulu?

_____

B3: **How long have you worked as (previous position as stated above)?**

Berapa lamakah anda telah bekerja sebagai (pekerjaan dahulu seperti di atas)?

_____ **years** / *tahun*

B4: **What is your position now?**

Apakah jawatan anda sekarang?

-

_____

B5: **How long have you worked as (current position as stated in B4)?**

Berapa lamakah anda telah bekerja sebagai (pekerjaan seperti di B4)?

_____ **years** / *tahun*

© COPYRIGHT UPM

B6: **Have you ever handle any infectious disease (e.g. dengue) cases in school?**

Pernahkan anda menangani kes penyakit berjangkit (e.g. denggi) di sekolah ?

1. ☐ **Yes** *Ya*
2. ☐ **No** *Tidak*

If yes, state type of infectious disease _____

Jika ya, nyatakan jenis penyakit berjangkit_____

B7: **Have you ever manage any infectious disease program (e.g. dengue prevention program) in school?**

Pernahkan anda mengelola program berkaitan penyakit berjangkit (e.g. program pencegahan denggi) di sekolah ?

1. ☐ **Yes** *Ya*
2. ☐ **No** *Tidak*

If yes, state type of program _____

Jika ya, nyatakan jenis program_____

B8: **Have you been exposed to any infectious diseases (at school) as stated below:**

Pernahkah anda terdedah dengan sebarang penyakit berjangkit seperti dinyatakan dibawah:

1. ☐ **Dengue fever** *Demam denggi*
2. ☐ **Tuberculosis (TB)** *Tuberkulosis (TB)*
3. ☐ **Hand, foot and mouth disease** *Penyakit tangan, kaki dan mulut*
4. ☐ **Food Poisoning** *Keracunan makanan*
5. ☐ **Measles**

☐ **Others: _____**

© COPYRIGHT UPM

Demam campak *Lain-lain:*_____

© COPYRIGHT UPM

SECTION C: LIFESTYLE INFORMATION

BAHAGIAN D: MAKLUMAT GAYA HIDUP

D1 **I take illegal drugs (any type).**

Saya mengambil dadah (sebarang jenis dadah).

☐ **Never** *Tidak pernah*

☐ **Rarely** *Jarang-jarang*

☐ **Sometimes** *Kadang-kadang*

☐ **Often** *Selalu*

☐ **Always** *Sangat kerap*

D2 **I smoke.**

Saya merokok.

☐ **Never** *Tidak pernah*

☐ **Rarely** *Jarang-jarang*

☐ **Sometimes** *Kadang-kadang*

☐ **Often** *Selalu*

☐ **Always** *Sangat kerap*

If yes, _____ smokes a day

Jika ya, _____ batang sehari

D3 **I do any physical activities.**

Saya melakukan sebarang aktiviti fizikal.

_____ _____ _____

© COPYRIGHT UPM

☐ **Never** *Tidak pernah*	☐ **Rarely** *Jarang-jarang*	☐ **Sometimes** *Kadang-kadang*
☐ **Often** *Selalu*	☐ **Always** *Sangat kerap*	

If yes, state _____

Jika ya, nyatakan _____

D4 **I experienced "negative stress" lately**

Saya mengalami tekanan negatif kebelangkangan ini

☐ **Never** *Tidak pernah*	☐ **Rarely** *Jarang-jarang*	☐ **Sometimes** *Kadang-kadang*
☐ **Often** *Selalu*	☐ **Always** *Sangat kerap*	

D5 **I experienced a lot of stress in my daily life**

Saya mengalami banyak tekanan dalam kehidupan seharian

☐ **Never** *Tidak pernah*	☐ **Rarely** *Jarang-jarang*	☐ **Sometimes** *Kadang-kadang*
☐ **Often**	☐ **Always**	

© COPYRIGHT UPM

☐	*Selalu*	☐	*Sangat kerap*

D6 **I experienced trouble in sleeping.**

Saya mengalami kesukaran untuk tidur.

☐	**Never** *Tidak pernah*	☐	**Rarely** *Jarang-jarang*	☐	**Sometimes** *Kadang-kadang*
☐	**Often** *Selalu*	☐	**Always** *Sangat kerap*		

D7 **I experienced sleep disturbances.**

Saya mengalami gangguan ketika tidur.

☐	**Never** *Tidak pernah*	☐	**Rarely** *Jarang-jarang*	☐	**Sometimes** *Kadang-kadang*
☐	**Often** *Selalu*	☐	**Always** *Sangat kerap*		

© COPYRIGHT UPM

SECTION D: KNOWLEDGE

BAHAGIAN E: PENGETAHUAN

PLEASE CIRCLE YOUR ANSWER USING *THE SCALE OF 1 TO 5* AS FOLLOWS:

*Sila bulatkan jawapan anda dengan menggunakan **skala 1 hingga 5** seperti di bawah:*

1	2	3	4	5
STRONGLY DISAGREE Sangat Tidak Setuju	**DISAGREE** Tidak Setuju	**NEITHER AGREE NOR DISAGREE** Ragu-ragu	**AGREE** Setuju	**STRONGLY AGREE** Sangat Setuju

	Knowledge about COVID-19					
K1	**COVID-19 is a viral infection** *COVID-19 adalah jangkitan virus*	1	2	3	4	5
K2	**COVID-19 can cause severe acute respiratory syndrome** *COVID-19 boleh menyebabkan sindrom pernafasan yang teruk*	1	2	3	4	5
K3	**The first case of human infection in Wuhan, China** *Kes pertama jangkitan manusia di Wuhan, China*	1	2	3	4	5
	Knowledge about COVID-19 Transmission					
K4	**COVID-19 can transmit through droplets during coughing or sneezing** *COVID-19 boleh menular melalui titisan semasa batuk atau bersin*	1	2	3	4	5
K5	**COVID-19 virus can transmit via airborne** *COVID-19 boleh menular melalui udara*	1	2	3	4	5
K6	**COVID-19 virus can be transmitted by touching surfaces and devices contaminated by virus COVID-19** *Virus COVID-19 boleh dijangkiti dengan menyentuh permukaan dan peranti yang tercemar oleh virus COVID-19*	1	2	3	4	5
K7	**COVID-19 can spread through close contact with infected persons** *COVID-19 boleh tersebar melalui kontak rapat dengan orang yang dijangkiti*	1	2	3	4	5
K8	**COVID-19 transmit via hand shaking** *COVID-19 boleh menular melalui bersalaman tangan*	1	2	3	4	5

© COPYRIGHT UPM

K9	**Someone infected can transmit the virus even if they are not showing symptoms** *Orang yang dijangkiti boleh menyebarkan virus walaupun tidak menunjukkan sebarang simptom*	1	2	3	4	5
K10	**Students, staff and etc. can wear face masks to prevent the infection by the COVID-19 virus** *Murid, kakitangan dan lain-lain boleh memakai pelitup muka bagi mencegah jangkitan virus COVID-19*	1	2	3	4	5
	Knowledge about COVID-19 Symptoms					
K11	**Fever, cough, and shortness of breath are COVID-19 symptoms** *Demam, batuk dan sesak nafas adalah simptom COVID-19*	1	2	3	4	5
K12	**Symptom of COVID-19 similar to SARS virus** *Simptom COVID-19 adalah sama seperti virus SARS*	1	2	3	4	5
K13	**Patient with underlying chronic diseases is at higher risk of infection** *Pesakit yang mempunyai sejarah penyakit kronik adalah berisiko tinggi untuk dijangkiti*	1	2	3	4	5
K14	**People with age over 60 years old have a higher risk of developing severe disease and death** *Golongan yang berumur 60 tahun ke atas adalah berisiko tinggi untuk mendapat penyakit yang teruk dan membawa kepada kematian.*	1	2	3	4	5
	Knowledge about COVID-19 SOP					
K15	**There is a COVID-19 SOP particularly for educational institution (school)** *Terdapat SOP COVID-19 yang perlu dipatuhi di institusi Pendidikan (sekolah)*	1	2	3	4	5
K16	**School administrators and teachers must conduct screening test at the entrance** *Pihak sekolah perlu melakukan ujian saringan di pintu masuk sekolah*	1	2	3	4	5
K17	**The school administrators and teachers must provide a Letter of Absence (LOA) to the student who is not allowed to school in relation of COVID-19** *Pihak sekolah perlu memberikan Letter of Absence (LOA) kepada murid yang tidak dibenarkan ke sekolah berkaitan dengan COVID-19*	1	2	3	4	5
K18	**School assembly is not allowed** *Perhimpunan sekolah tidak dibenarkan*	1	2	3	4	5

© COPYRIGHT UPM

K19	**Students or staff who have contact with someone infected should be immediately isolated. Close contact should remain in the isolation room for at least 10 days or as directed by the PKD** *Pelajar atau kakitangan yang mempunyai hubungan dengan seseorang yang dijangkiti harus segera diasingkan. Kontak rapat perlu kekal berada di bilik pengasingan selama sekurang-kurangnya 10 hari atau seperti yang diarahkan oleh PKD.*	1	2	3	4	5
K20	**Wearing a mask is compulsory around school area** *Memakai pelitup muka di kawasan sekolah adalah diwajibkan*	1	2	3	4	5
K21	**Cocurricular activities is not allowed in school** *Aktiviti kokurikulum di sekolah tidak dibenarkan*	1	2	3	4	5
K22	**Student absenteeism during pandemic is one of discipline issue** *Ketidakhadiran murid ke sekolah ketika pandemic dianggap satu kesalahan disiplin*	1	2	3	4	5
K23	**Students with symptoms is not allowed to attend school** *Murid bergejala tidak dibenarkan hadir ke sekolah*	1	2	3	4	5
K24	**Students are allowed to eat at canteen during break** *Murid dibenarkan makan di kantin ketika waktu rehat*	1	2	3	4	5
K25	**School operation is based on phases in the National Recovery Plan (NRP)** *Pengoperasian sekolah adalah berdasarkan fasa-fasa di dalam Pelan Pemulihan Negara (PPN)*	1	2	3	4	5

© COPYRIGHT UPM

SECTION E: ATTITUDES

BAHAGIAN F: SIKAP

PLEASE CIRCLE YOUR ANSWER USING *THE SCALE OF 1 TO 5* AS FOLLOWS:

*Sila bulatkan jawapan anda dengan menggunakan **skala 1 hingga 5** seperti di bawah:*

1	2	3	4	5
STRONGLY DISAGREE Sangat Tidak Setuju	**DISAGREE** Tidak Setuju	**NEITHER AGREE NOR DISAGREE** Ragu-ragu	**AGREE** Setuju	**STRONGLY AGREE** Sangat Setuju

AT1	**I believe COVID-19 can be prevented by good hygiene practices** *Saya percaya COVID-19 boleh dicegah melalui amalan kebersihan yang baik*	1	2	3	4	5
AT2	**I am interested in knowing the methods of prevention of COVID-19** *Saya berminat untuk mengetahui cara mencegah COVID-19*	1	2	3	4	5
AT3	**I believe everyone is responsible for preventing the spread of the COVID-19** *Saya percaya semua orang bertanggungjawab untuk mencegah penularan COVID-19*	1	2	3	4	5
AT4	**The Movement Control Order (MCO) was an effective effort by government to prevent the spread of the disease** *Perintah Kawalan Pergerakan (PKP) adalah satu usaha yang efektif oleh kerajaan bagi membendung penularan penyakit*	1	2	3	4	5
AT5	**If I get infected with COVID-19, I will not spread the virus to others to get them infected too** *Jika saya dijangkiti COVID-19, saya tidak akan menyebarkan virus ini daripada menjangkiti orang lain*	1	2	3	4	5
AT6	**I agree that COVID-19 will successfully controlled** *Saya bersetuju bahawa COVID-19 akan berjaya dikawal*	1	2	3	4	5
AT7	**I agree that compliance to SOP can prevent COVID-19 transmission** *Saya bersetuju bahawa kepatuhan pada SOP dapat mencegah penularan COVID-19.*	1	2	3	4	5
AT8	**I believe that vaccine can protect us against COVID-19 infection**	1	2	3	4	5

© COPYRIGHT UPM

	Saya percaya bahawa vaksin dapat melindungi kita daripada mendapat jangkitan COVID-19					
AT9	**The Ministry of Education has provided the educational institution with adequate SOP and information on COVID-19** *Kementerian Pendidikan telah menyediakan SOP dan informasi yang mencukupi mengenai COVID-19*	1	2	3	4	5
AT10	**The SOP provided is easy to understand and comply by the school administrators and teachers** *SOP yang disediakan amat mudah untuk difahami dan dipatuhi oleh pihak sekolah*	1	2	3	4	5

SECTION F: PRACTICE

BAHAGIAN G: AMALAN

PLEASE CIRCLE YOUR ANSWER USING *THE SCALE OF 1 TO 5* AS FOLLOWS:

*Sila bulatkan jawapan anda dengan menggunakan **skala 1 hingga 5** seperti di bawah:*

1	2	3	4	5
NEVER	**RARELY**	**SOMETIMES**	**OFTEN**	**ALWAYS**
Tidak pernah	Jarang-jarang	Kadang-kadang	Selalu	Sangat kerap

P1	**I do not go on vacation during outbreak.** *Saya tidak pergi melancong ketika wabak*	1	2	3	4	5
P2	**I do not go to any crowded place** *Saya tidak pergi ke tempat yang sesak*	1	2	3	4	5
P3	**I notify District health office or specific parties if students or staff infected with** **COVID-19** *Saya memberitahu Pejabat Kesihatan Daerah (PKD) atau pihak berkenaan jika murid atau kakitangan dijangkiti COVID-19*	1	2	3	4	5
P4	**I wear a face mask when go out** *I memakai pelitup muka bila keluar*	1	2	3	4	5
P5	**I cover mouth and nose with tissue when coughing or sneezing** *Saya menutup mulut dan hidung dengan tisu ketika batuk atau bersin*	1	2	3	4	5

© COPYRIGHT UPM

P6	**I wash my hands before and after each action** *Saya mencuci tangan sebelum dan selepas membuat sesuatu perkara*	1	2	3	4	5
P7	**I stand 1-meter away from others (1 meter social distance)** *Saya mengekalkan jarak sosial 1 meter dari orang sekeliling (penjarakan sosial 1 meter)*	1	2	3	4	5
P8	**I wash hands with soap or hand sanitizer that contains at least 70% alcohol** *Saya mencuci tangan dengan sabun atau pembersih tangan yang mengandungi sekurangnya 70% alkohol*	1	2	3	4	5
P9	**I refer to the Standard Operating Procedure (SOP) issued by MOH, MKN and MOE from time to time** *Saya merujuk Prosedur Operasi Standard (SOP) yang dikeluarkan oleh KKM, MKN dan KPM dari semasa ke semasa*	1	2	3	4	5
P10	**I ensure all students, staff and etc. always wear face mask throughout the period of school** *Saya memastikan semua pelajar, kakitangan dan lain-lain sentiasa memakai pelitup muka sepanjang tempoh persekolahan.*	1	2	3	4	5
P11	**I supervise and ensure students or staff with temperatures above 37 ° C or having any symptoms are not allowed to attend school** *Saya menyelia dan memastikan pelajar atau kakitangan yang bersuhu melebihi 37°C atau bergejala tidak dibenarkan hadir ke sekolah*	1	2	3	4	5
P12	**I given a Letter of Absence (LOA) to students or staffs whose infected with COVID-19 or under quarantine.** *Saya memberikan surat ketidakhadiran (LOA) kepada pelajar dan kakitangan yang telah dijangkiti atau yang sedang dalam tempoh kuarantin.*	1	2	3	4	5
P13	**I ensure good ventilation in the classroom** *Saya memastikan bilik darjah mempunyai pengudaraan yang baik*	1	2	3	4	5
P14	**I make sure that the table arrangement in the classroom is rotated** *Saysa memastikan susun atur meja di kelas dengan penggiliran*	1	2	3	4	5
P15	**I supervise and ensure all the students to eat in the classroom during break** *Saya menyelia dan memastikan murid makan di dalam kelas ketika waktu rehat.*	1	2	3	4	5

© COPYRIGHT UPM

P16	**I provide hand washing place with soap or hand sanitizer containing 70% alcohol** *Saya menyediakan tempat membasuh tangan berserta sabun atau pembersih tangan yang mengandungi 70% alkohol*	1	2	3	4	5
P17	**I ensure no mass gathering or school assembly within school area** *Saya memastika tiada perhimpunan sekolah dijalankan di kawasan sekolah*	1	2	3	4	5
P18	**I ensure no curriculum activities is allowed in school area** *Saya memastikan tiada aktiviti kokurikulum dijalankan di kawasan sekolah*	1	2	3	4	5

© COPYRIGHT UPM

Appendix 4

JAWATANKUASA ETIKA UNIVERSITI UNTUK PENYELIDIKAN MELIBATKAN MANUSIA (JKEUPM)
UNIVERSITI PUTRA MALAYSIA, 43400 UPM SERDANG, SELANGOR, MALAYSIA

FORM 2.4: RESPONDENT'S INFORMATION SHEET AND INFORMED CONSENT FORM

Please read the following information carefully and do not hesitate to discuss any questions you may have with the researcher.

1. STUDY TITLE : Factors Associated With Covid-19 SOP Compliance Among School administrators and teachers In South Selangor Districts (Hulu Langat, Kuala Langat, Sepang) And Putrajaya 2021: A Cross Sectional Study on KAP

2. INTRODUCTION:

In late December 2019, countries all over the world had been shocked by a newly discovered coronavirus which was initially found in Wuhan City, Hubei Province, China. As on 11 February 2020 World Health Organization (WHO) had announced that this unknown etiology named as coronavirus disease 2019 also known as Covid-19 (WHO, 2020). Covid-19 then had been declared as a pandemic as it had spread in multiple countries in the world.

Malaysian Government had enforced MCO 1.0 starting from 18 March until 3 May 2020 which allow only essential services be operated. Education sector is one of the affected sectors where all public and private schools, universities, kindergarten, daycare, tahfiz centre and others were enforced to be closed (Times, 2020). The enforcement of strict Movement Control Order (MCO 1.0) has shown a great news when there is decreasing of daily new Covid-19 cases after 14 April 2020 (Department of Statistics Malaysia (DOSM), 2020).Therefore, government had announced economic sectors, educational sectors and other to resume their operation with the condition that all sectors is obligated to adhere with the Standard Operating Procedures (SOPs) that have been enforced by the government.

In Malaysia, Ministry of Education (MOE) had developed a new guideline for schools opening which Is Guidelines for Management and Operation of Schools in

© COPYRIGHT UPM

New Norm 2.0 which revised accordance with previous guidelines of operation schools in new norm (5 October 2020) also based on guidelines on reopening of schools (4 Jun 2020).

As of April 2021, there are about 5000 Covid-19 cases related to 83 clusters of education. In Selangor there are some Covid-19 clusters that are linked with education sectors. Until May 2021 the clusters from education sectors that were reported by Ministry of Health are Jalan Bukit Naga, Persiaran Setia Prima and Jalan Wau clusters in Shah Alam, Jalan Kuala Garing cluster in Rawang, Taman Medan in Petaling Jaya, Jalan Langat Ceria which involve Hulu Langat, Petaling, Klang, Kuala Langat, Gombak and Sepang districts; and others.

To assure that the schools comply with the SOPs, understanding the COVID-19 basic information, transmissions and symptoms is essential. To ensure that the public's understanding on Covid-19 in influencing the success of preventing its transmission, a reliable tool has been used which is Knowledge, Attitude, and Practice (KAP) study. Thus, the purpose of this study is to identify the determinant factors of knowledge, attitude and practice towards COVID-19 SOP compliance among school administrators and teacherss in Southern Selangor districts (Hulu Langat, Kuala Langat, Sepang) and Putrajaya.

3. WHAT WILL YOU HAVE TO DO?

Respondent are required to answer some questions in the questionnaire that will be provided.

The questionnaire will comprise four parts which includes sociodemographic backgrounds, lifestyle, occupational factors and KAP. The KAP questionnaire includes questions on knowledge about COVID-19, its transmission, symptoms and SOP, Attitude towards COVID-19 and practices towards COVID-19. Besides, information regarding respondent demographic details, were also asked.

4. WHO SHOULD NOT PARTICIPATE IN THE STUDY?

The exclusion criteria are the staff that do not involve directly with school administrators and teachers, below 18 years old, and do not have experience in school administrators and teachers during pandemic COVID-19.

© COPYRIGHT UPM

© COPYRIGHT UPM

5. WHAT WILL BE THE BENEFITS OF THE STUDY:

(a) TO YOU AS THE SUBJECT?

Subjects able to identify and understand their level of knwoledge, attitude and practice towards Covid-19 SOP compliance. Besides, the results that will be obtained can be used to plan further action to safely operate the schools so that it able to prevent any transmission of virus in the schools settings.

(b) TO THE INVESTIGATOR?

By conducting this KAP survey on Covid-19 SOP compliance among schools management, we will be able to identify the knowledge gaps, cultural beliefs and behavioral patterns which may help in identify needs, problems and barriers in terms of SOP compliance which then will be able to help in plan and implement interventions. The data that will be obtained also could be generalised in the nationwide and be used to show progress to the funding bodies.

6. WHAT ARE THE POSSIBLE RISKS?

There is no possible risks arise when participating this study as this study only use questionnaires to identify the knowledge,attitude and practice of Covid-19 SOP Compliance.

7. WILL THE INFORMATION THAT YOU PROVIDE AND YOUR IDENTITY REMAIN CONFIDENTIAL?

Yes, all the information that you provided and your identity will remain cofidential and anonymous.

8. WHO SHOULD YOU CONTACT IF YOU HAVE ADDITIONAL QUESTIONS DURING THE COURSE OF THE RESEARCH?

If you have any additional questions regarding this research, feel free to contact me Nurfatihah binti Samat on +60187820321 or fatihahsamat23@gmail.com or you can contact our principal investigator/supervisor Assoc. Prof. Dr. Karmegam Karuppiah on +60135818331 or megam@upm.edu.my.

© COPYRIGHT UPM

Please initial here if you have read and understood the contents of this page_____

9. CONSENT

I …… Identity Card No. …… address…… ……... ……..hereby voluntarily agree to take part in the research stated above *(clinical /drug trial/video recording/ focus group/interview-based/ questionnaire-based).

I have been informed about the nature of the research in terms of methodology, possible adverse effects and complications (as written in the Respondent's Information Sheet). I understand that I have the right to withdraw from this research at any time without giving any reason whatsoever. I also understand that this study is confidential and all information provided with regard to my identity will remain private and confidential.

I* wish / do not wish to know the results related to my participation in the research

I agree/do not agree that the images/photos/video recordings/voice recordings related to me be used in any form of publication or presentation (if applicable)

* delete where necessary

Signature ……..…… Signature ……..…….
(Respondent) (Witness)

Date :…….. Name :……..

I/C No. :…….…..

I confirm that I have explained to the respondent the nature and purpose of the above-mentioned research.

© COPYRIGHT UPM

Date ……..…… Signature ……..…….

(Researcher)

© COPYRIGHT UPM

BORANG 2.4: PENERANGAN DAN PERSETUJUAN RESPONDEN

Sila baca maklumat berikut dengan teliti. Sekiranya anda mempunyai sebarang pertanyaan, sila kemukakan kepada penyelidik.

1.TAJUK KAJIAN: Pengetahuan, Sikap dan Amalan Terhadap Pematuhan SOP Covid-19
di Kalangan Pengurusan Sekolah di daerah Selatan Selangor (Hulu Langat, Kuala Langat, Sepang) dan Putrajaya

2. PENGENALAN

Pada akhir Disember 2019, negara di seluruh dunia dikejutkan dengan 'Novel Coronavirus' yang pada awalnya dijumpai di Bandar Wuhan, Wilayah Hubei, China. Pada 11 Februari 2020 Pertubuhan Kesihatan Sedunia (WHO) telah mengumumkan bahawa etiologi yang tidak diketahui ini dinamakan sebagai penyakit coronavirus 2019 juga dikenali sebagai Covid-19 (WHO, 2020). Covid-19 kemudian diisytiharkan sebagai pandemik kerana merebak di beberapa negara di dunia.

Kerajaan Malaysia telah menguatkuasakan Perintah Kawalan Pergerakan PKP bermula dari 18 Mac hingga 3 Mei 2020 yang hanya membenarkan perkhidmatan penting dikendalikan. Sektor pendidikan ialah salah satu sektor yang terjejas di mana semua sekolah awam dan swasta, universiti, tadika, pusat asuhan kanak-kanak, pusat tahfiz dan lain-lain dipaksa ditutup (Times, 2020). Penguatkuasaan Perintah Kawalan Pergerakan yang ketat (PKP) telah menunjukkan berita baik apabila terdapat penurunan kes Covid-19 baru setiap hari selepas 14 April 2020 (Jabatan Perangkaan Malaysia (DOSM), 2020). Oleh itu, kerajaan telah mengumumkan sektor ekonomi , sektor pendidikan dan lain-lain untuk meneruskan operasi mereka dengan syarat bahawa semua sektor wajib mematuhi Prosedur Operasi Standard (SOP) yang telah dikuatkuasakan oleh kerajaan.

Di Malaysia, Kementerian Pendidikan Malaysia (KPM) telah mengeluarkan garis panduan baru bagi pembukaan sekolah iaitu Garis Panduan Pengurusan dan Pengoperasian Sekolah Dalam Norma Baharu 2.0 yang telah dikemas kini

© COPYRIGHT UPM

berdasarkan Garis Panduan Pengurusan dan Pengoperasian Sekolah Dalam Norma Baharu yang telah dikeluarkan pada 5 Oktober 2020 dan Garis Panduan Pengurusan Pembukaan Semula Sekolah pada 4 Jun 2020.

Sehingga April 2021, terdapat kira-kira 5000 kes Covid-19 yang berkaitan dengan 83 kluster pendidikan. Di Selangor terdapat beberapa kluster Covid-19 yang berkaitan dengan sektor pendidikan. Sehingga Mei 2021, kluster dari sektor pendidikan yang dilaporkan oleh Kementerian Kesihatan adalah kluster Jalan Bukit Naga, Persiaran Setia Prima dan Jalan Wau di Shah Alam, kluster Jalan Kuala Garing di Rawang, Taman Medan di Petaling Jaya, Jalan Langat Ceria yang melibatkan Hulu Daerah Langat, Petaling, Klang, Kuala Langat, Gombak dan Sepang; dan lain lain.

Bagi memastikan sekolah mematuhi SOP, memahami maklumat, penularan dan gejala-gejala COVID-19 ialah amat penting. Bagi memastikan bahawa pemahaman masyarakat tentang Covid-19 dalam mempengaruhi keberhasilan mencegah penularannya, kaedah yang berkesan dan tepat telah digunakan iaitu kajian Pengetahuan, Sikap, dan Amalan (KAP). Oleh itu, tujuan kajian ini adalah untuk mengenal pasti faktor-faktor penentu pengetahuan, sikap dan amalan terhadap pematuhan COVID-19 SOP di kalangan pengurusan sekolah di daerah Selangor Selatan (Hulu Langat, Kuala Langat, Sepang) dan Putrajaya**.**

3. APAKAH YANG PERLU ANDA LAKUKAN?

Responden diminta untuk menjawab beberapa soalan dalam soal selidik yang akan disediakan.

Soal selidik ini akan merangkumi empat bahagian yang merangkumi latar belakang sosiodemografi, gaya hidup, faktor pekerjaan dan KAP. Soal selidik KAP merangkumi soalan mengenai pengetahuan mengenai COVID-19, penularan, gejala dan SOP, sikap terhadap COVID-19 dan amalan terhadap COVID-19. Selain itu, informasi mengenai detail demografi responden juga dikehendaki.

4. SIAPA YANG TIDAK BOLEH MENYERTAI KAJIAN INI?

Mereka yang tidak layak menyertai kajian ini ialah kakitangan yang tidak terlibat secara langsung dengan pengurusan sekolah, berumur di bawah 18 tahun, dan

© COPYRIGHT UPM

tidak mempunyai pengalaman dalam pengurusan sekolah semasa pandemik COVID-19.

5. APAKAH FAEDAH MENYERTAI KAJIAN INI?

a) KEPADA ANDA SEBAGAI PESERTA?

Subjek dapat mengenal pasti dan memahami tahap pengetahuan, sikap dan amalan mereka terhadap pematuhan Covid-19 SOP. Selain itu, keputusan dari kajian yang akan diperoleh juga dapat digunakan untuk merencanakan tindakan selanjutnya bagi mengendalikan pembukaan sekolah dengan selamat serta dapat mengelakkan penularan virus di dalam kawasan sekolah.

b) KEPADA PENYELIDIK?

Dengan melakukan tinjauan KAP mengenai pematuhan SOP Covid-19 di kalangan pengurusan sekolah, kita akan dapat mengenal pasti jurang pengetahuan, kepercayaan budaya dan corak tingkah laku yang dapat membantu mengenal pasti keperluan, masalah dan halangan dari segi pematuhan SOP yang kemudiannya dapat untuk membantu merancang dan melaksanakan program intervensi. Data yang akan diperoleh juga dapat digeneralisasikan di seluruh negara dan digunakan untuk menunjukkan kemajuan kepada badan pendanaan.

6. ADAKAH IA BERISIKO?

Tidak ada risiko yang akan timbul semasa mengambil bahagian dalam kajian ini kerana kajian ini hanya menggunakan soal selidik untuk mengenal pasti pengetahuan, sikap dan amalan Pematuhan SOP Covid-19.

7. ADAKAH MAKLUMAT DAN IDENTITI SAYA KEKAL RAHSIA?

Ya, semua maklumat yang anda berikan dan identiti anda akan dirahsiakan.

8. SIAPA YANG SAYA PERLU HUBUNGI SEKIRANYA SAYA MEMPUNYAI SOALAN TAMBAHAN SEMASA MENGIKUTI

© COPYRIGHT UPM

PENYELIDIKAN INI?

Sekiranya anda mempunyai sebarang soalan tambahan semasa mengikuti penyelidikan ini, jangan berasa ragu untuk menghubungi saya Nurfatihah binti Samat di talian +60187820321 atau fatihahsamat23@gmail.com atau anda boleh menghubungi penyelia saya Assoc. Prof. Dr. Karmegam Karuppiah on +60135818331 or megam@upm.edu.my .

Sila tandatangan di sini sekiranya anda telah membaca dan memahami kandungan halaman ini _____

© COPYRIGHT UPM

9. PERSETUJUAN

Saya…… No Kad Pengenalan. ……

beralamat……

……..dengan ini bersetuju untuk mengambil bahagian secara sukarela dalam penyelidikan yang tersebut di atas *(kajian klinikal/percubaan ubat-ubatan/rakaman video/kumpulan sasaran/temuduga/ soal selidik).

Saya telah diberi penjelasan secara menyeluruh mengenai penyelidikan ini dari segi metodologi, risiko dan komplikasi (seperti tertulis pada Helaian Penerangan Responden). Saya memahami bahawa saya berhak menarik diri dari penyelidikan ini pada bila-bila masa tanpa memberi sebarang alasan.Saya juga memahami bahawa sebarang maklumat yang berkaitan identiti saya akan dirahsiakan.

Saya* berminat / tidak berminat untuk mengetahui keputusan kajian yang melibatkan saya.

Saya setuju/tidak bersetuju untuk imei/gambar/rakaman video/ rakaman suara digunakan dalam apa jua bentuk penerbitan atau pembentangan. (sekiranya berkaitan).

*potong yang tidak berkenaan

Tandatangan ……..…… Tandatangan ……..…….

(*Responden*) (*Saksi*)

Tarikh :…….….. Nama :……..

No. K/P: ……..…..

© COPYRIGHT UPM

Saya mengesahkan bahawa saya telah menerangkan kepada responden ini sifat dan tujuan penyelidikan yang tersebut di atas.

Tarikh ……..…… Tandatangan
……..…….

(*Penyelidik*)

© COPYRIGHT UPM