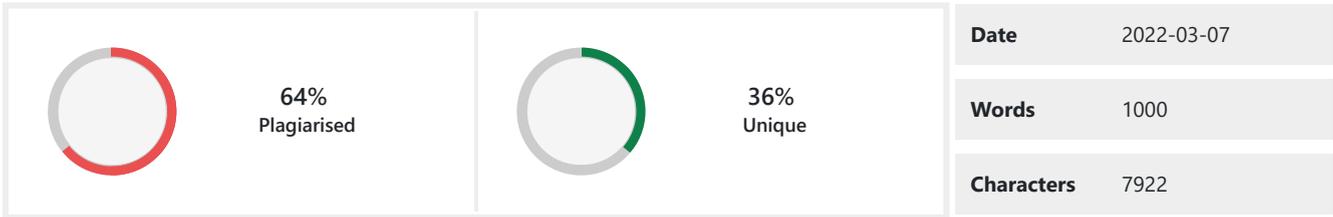


PLAGIARISM SCAN REPORT



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To print this document, select the Coronavirus 2019 (COVID-19) is an infectious disease caused by SARS-CoV-2 (El Zowalaty and Jaerhult, 2020; C. Li et al., 2020). It was first identified in Wuhan, China in December 2019 (Singhal, 2020; Wang et al., 2020; D. Wu et al., 2020).

COVID-19 attacks the respiratory system with fever, tiredness, trouble breathing, cough, and temporary loss of smell and taste as common symptoms of this disease (T.

Li et al., 2020; Singhal, 2020). In severe conditions, COVID-19 can cause pneumonia and damage to various body organs and thereby increasing the mortality risk (Lai et al., 2020).

The high transmission rate, the incubation period that takes days, and the number of asymptomatic people infected caused the rapid spread of the virus (Dietz et al., 2020; Lai et al., 2020; F. Ye et al., 2020).

Hence, it does not require a long time for this epidemic that starting from China to upgrade into a global pandemic that spreads across

continents. It was reported, until July 4, 2020, that more than 11 million cases from 188 countries had been officially published and caused more than 500,000 loss of life.

COVID-19 can be transmitted from humans to humans either through direct contact (Bulut and Kato, 2020) or through objects (Guo et al., 2020; D. X.

Zhang, 2020).

Transmission through direct contact can occur because SARS-CoV-2 can be transmitted via droplets produced by sneezing, coughing, or talking (D.

Wu et al., 2020). The droplets can spread through the air and float in the air for up to 10 min (Morawska and Cao, 2020).

When the droplets are inhaled by people nearby, they might be infected with COVID-19. Besides, the droplets can also fall onto the surface of various objects and last for several days on these objects (Razzini et al., 2020; G. Ye et al., 2020).

When the object is touched, then the person rubs his eyes or touches his mouth, the virus can infect his body. Since vaccines or antiviral drugs have not yet been identified,

keeping the distance and staying at home are campaigned by WHO and governments in each country to reduce the transmission rate of COVID-19 (Chu et al., 2020; Kim, 2020; H.

Wu et al., 2020).

In Indonesia, keeping a safe distance and implementing other pre-ventive measures are health protocols emphasized by the central and regional governments (Soderborg and Muhtadi, 2020).

The country that confirmed its first COVID-19 case in March 2020 prefers to implement a "new normal" policy by relying on the "awareness" of the community to implementing the

discipline health protocol in their daily activities (Djalante et al., 2020).

The problem arises that some people in Indonesia are indicated as not having enough knowledge related to COVID-19 (Fauzi et al., 2020).

Public response on social media shows that many of them accuse the conspiracy behind COVID-19 more than they believe the scientific evidence and government recommendations.

To make it worse, many people are not disciplined in implementing health protocols even though they believe in COVID-19 (Yanti et al., 2020).

Whereas, the number of positive cases and fatalities due to COVID-19 is increasing day by day. It was reported that until July 2020, the number of cases has passed of more than 60,000 with more than 3000 deaths.

As the number of patients, the rate of misinformation, and the number of people with confusion increase, the existence of role models will have a significant impact on the community. One group that can be a role model in this pandemic are those coming from a healthcare background, both healthcare workers and medical students.

Healthcare workers are indirectly responsible for providing knowledge, modeling daily routines, and preventing people from getting sick (Darch et al., 2017; Rachlis et al., 2016; Trause et al., 2014), especially during the pandemic period.

On the other hand, medical students are often considered as healthcare workers who are still in the training period. The health education programs are expected to produce graduates with good knowledge, attitudes, and practices (KAP) during the pandemic.

Thus, their educational process should set them up to behave and act in the pandemic.

However, this kind of program only makes up a small portion of the overall curriculum.

Therefore, KAP evaluation needs to be carried on medical students.

The KAP survey is an essential survey that needs to be carried out during a pandemic (Saefi et al., 2020b). KAP survey is a three-empirically supported construct used to understand healthcare workers' and medical students' behavior change (Chandler, 2018; Raina, 2013).

KAP survey is also important because it can identify basic knowledge, misconceptions, beliefs, behavior, to the respondent's attitude towards disease (Andrade et al., 2020).

Insights, habits, and perspectives of medical students in dealing with a pandemic can also be evaluated through this survey (Noreen et al., 2020). With a good KAP, medical students will have a positive impact in dealing with the pandemic. They can influence the health status and perceptions of their friends and family because they are considered a trusted source of health information (Gohel et al., 2021). Their attitudes and practices during the pandemic will be noticed by the surrounding community.

In addition, in this era full of misinformation, health campaigns are also expected to optimize the involvement of medical students (Noreen et al., 2020).

To meet these expectations, KAP students also need to be evaluated before campaigning for a good life- style.

Therefore, in turn, students with good KAP can become agents of change in their families and communities (Ajilore et al., 2017).

The collapse of the health system has also become a serious problem in the midst of the COVID-19 pandemic. Many hospitals require additional health workers due to a large number of COVID-19 patients.

The increasing number of health workers who are infected with COVID-19 also worsens the condition. Due to the increasingly overwhelmed hospitals, experts also recommend calling retired doctors to return to duty (Mahase, 2020).

The pandemic has also turned health education upside down (Miller et al., 2020).

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