

Scheme of Government Policy in Accelerating COVID-19 Vaccination for Elderly Groups in Indonesia

Dodi Al Vayed, Suswanta, Akhdiva Elfi Istiqoh

Department of Government Affairs and Administration, Jusuf Kalla School of Government,
Universitas Muhammadiyah Yogyakarta, Yogyakarta, Indonesia
Jl. Flora No. 1, Bulaksumur, Yogyakarta 55281, Indonesia
Email: dodi.vayed@gmail.com

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ABSTRACT

COVID-19 vaccination must be given to the elderly group (> 60 years) because it is at high risk of being infected with COVID-19 with a high mortality rate. This study aims to analyze the implementation of government policies in reducing the spread of COVID-19 through accelerating vaccines for the elderly (elderly) in Indonesia, and this study used a qualitative research method. The data sources for this research were online news media and the Nvivo 12 plus application as software for data analysis. The results of the study showed that the factors causing the slow process of vaccination for the elderly were lack of socialization regarding COVID-19 vaccination, hoax news related to vaccination, limited access to vaccine services, and comorbidities or comorbidities for the elderly. Vaccination for the elderly group was carried out by classification. Tasks through the central Government were then handed over to the provincial Governor and district and city governments, according to the bureaucratic structure such as the UPTD puskesmas in every region in Indonesia.

Keywords: Policy; COVID-19 Vaccine; Elderly

INTRODUCTION

This study aims to look at the government policy scheme in accelerating COVID-19 vaccination for the elderly in Indonesia. At the beginning of 2020, the world was shocked due to the COVID-19 Pandemic, causing changes in the order in every country, especially the policy arrangements and services to the community (1). The Indonesian Government has made various intervention efforts to tackle the COVID-19 Pandemic, from prevention efforts to wearing masks, washing hands, and maintaining distance (3M) (2). However, it has not been considered effective in reducing the spread of the COVID-19 virus, coupled with the indiscipline of the community members in complying with health protocols (3). It is caused by people who still have an attitude of indifference, economic motives, and feel they are at low risk of transmitting the COVID-19 virus (4).

Accelerating the handling of the COVID-19 Pandemic, the strategy adopted is the administration of vaccines to provide immunity in the form of vaccinations to every citizen (5). Giving this vaccine is the state's effort to protect the right to health for every citizen during a pandemic (6). Based on the presidential regulation of the Republic of Indonesia number 14 of 2021 concerning Amendments to presidential regulation number 99 of 2020 concerning the procurement of vaccines and the implementation of vaccinations in the context of tackling the coronavirus disease 2019 (COVID-19) pandemic (7). The Indonesian Government's

policy by implementing the COVID-19 vaccination program nationwide aims to reduce the risk of transmission of COVID-19 by complying with health protocols (8).

Based on graphic data, Figure 1 shows that vaccination has not been able to reach the desired targets (9). It can be seen that the number of the first vaccine is still far from the target to be achieved, namely 140,205,046. The second vaccine is 96,519,346, and the third vaccine is 1,222,471, while the target must be achieved 208,265,720 (10). In seeking the acceleration of vaccines for the community, cooperation between the Government and the people is needed to achieve the vaccination target properly (11).

Effort Public Goods carried out by the Government as an important job during a pandemic (Obligatory Public Health Functions) (12). Therefore, the Central Government must fully bear all vaccination costs (13). The Indonesian Government itself has made efforts to meet the need for vaccinations with various schemes starting from Government to Government (G to G) or directly to vaccine (14). Has gone through various studies and trials to ensure the efficacy and safety of the vaccine (15).

10% in 2020. Based on data (16), the elderly (80 years and over) are 8.50% which causes the body to experience a decline due to aging. Almost all organ functions and movements decrease, followed by a decreased immunity because body armor does not work as strongly as when young

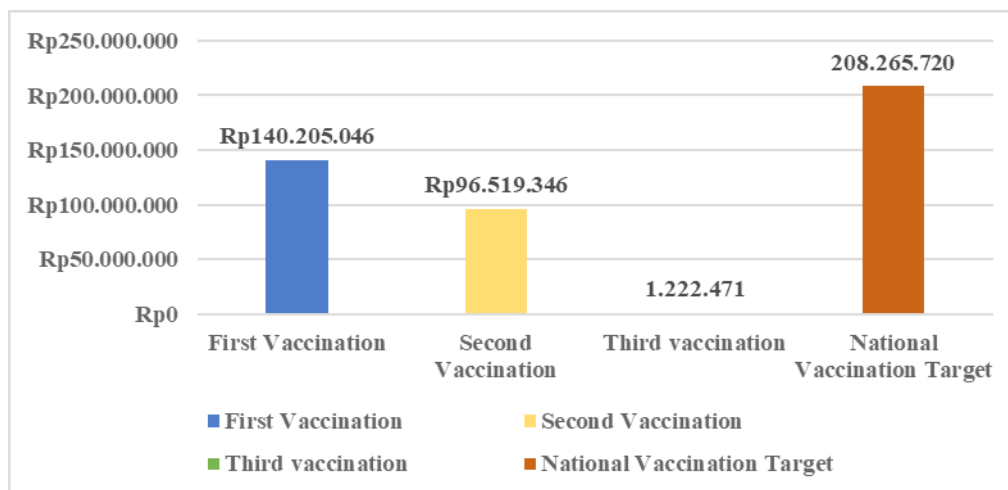


Figure 1. National Vaccination Data as of 1 December 2021

Source: Ministry of Communication and Informatics Vaccine Data of the Republic of Indonesia 2021

(Purnama & Suhada, 2019). Followed by the middle elderly (70-79 years) at 27.68%, and the young elderly (60-69 years) dominate with a magnitude of 63.82% (6). As a result, the elderly group is susceptible to various types of diseases, including COVID-19 which is caused by the Sars-Cov2 virus (17).

In connection with COVID-19, the elderly are very susceptible to infection with this virus, and this is evidenced by the large number of elderly patients who were both being treated and died when the initial COVID-19 infection spread in China (18). The Task Force for Handling COVID-19 in Indonesia noted that men accounted for the percentage of the sex of survivors of COVID-19 who died (19). The breakdown is 55.7% for men and 44.3% for women. Meanwhile, the elderly (elderly) aged 60 years are the biggest contributor to deaths, with total deaths reaching 50%. This means that in the 18 months since the Covid-19 Pandemic hit Indonesia, around 27,797 older people have died from COVID-19 (20). In addition, chronic diseases can help increase the risk of COVID-19 in the elderly. Both the risk of being infected with COVID-19 and being infected with the virus cause health threats, severe illness, and even death (21).

COVID-19 vaccination must be carried out for the elderly group because it is at high risk of being infected with COVID-19 with a high mortality rate (22). Therefore, services for administering vaccines for the elderly require a specific strategy to be able to convince the elderly to vaccinate against COVID-19 (23). Several previous research articles have discussed the vaccination of the elderly group. Namely, there is research from Erwin Silitonga, Taruli Rohana Sinaga, and Siska Dwi Ningsih on the Socialization of the COVID-19 Vaccine in the Elderly Group in Hamlet 14, Pematang Johar Village, Labuhan Deli District (24). Then research from Ida

Masnita Sigalingging and Maria Shelly, who wrote an article about Forming Elderly Perceptions About Vaccination of COVID-19 in Merauke Regency in this article leads us to find out the perceptions of the elderly in Merauke Regency regarding COVID-19 vaccination (25). The difference between this research and previous research is that this research is more focused on government policy schemes in accelerating COVID-19 vaccination for the elderly in Indonesia based on the theory of policy implementation according to Edward III and processed using Nvivo 12 plus so that it becomes a form of novelty from previous research.

METHODS

The qualitative method used in this study is a qualitative method. This aims to describe the data obtained in a systematic, factual, and accurate manner regarding the facts contained in a news information text by the media (26). The research data is secondary data obtained from online news media that is relevant to the research being studied. Table 1 shows the news sources analyzed by researchers regarding government policy schemes in accelerating COVID-19 vaccination for the elderly in Indonesia:

Based on table 1 above, it can be seen that the researcher analyzed six online media. This study uses six online news media, of course by looking at online media brand trust, and has high credibility based on Semrush, which is online-based software to assist in planning and implementation. Efforts in SEO (search engine optimization), SEM (search engine marketing), social media research, and video advertising. Semrush also updates the rankings of news websites or online media worldwide, including in Indonesia, every day. Furthermore, the stages of data analysis can be seen in Figure 1

Table 1. Online Media Sources

| Online Media | Website | Media Consumption | Brand Trust Online Media | News about elderly vaccination in Indonesia |
|----------------------|-------------------------------|-------------------|--------------------------|---|
| Detik.com | https://www.detik.com | 60% | 61% | 50 |
| Kompas online | https://www.kompas.com | 37% | 65% | 48 |
| CNN.com | https://www.cnnindonesia.com/ | 35% | 66% | 40 |
| Sindo News | https://www.sindonews.com | 16% | 49% | 42 |
| Tribunnews Online | https://www.tribunnews.com/ | 34% | 52% | 53 |
| Metro Tv News Online | https://www.metrotvnews.com/ | 28% | 55% | 44 |

Source: Compiled by Researchers, 2022

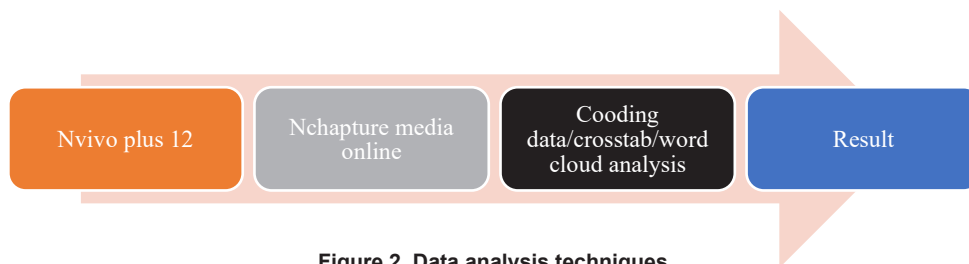


Figure 2. Data analysis techniques

This data was obtained using the Ncapture feature on Nvivo 12 Plus. The Ncapture feature is a web browser extension developed to capture web content in the form of the website content, social media, and other document content, such as scientific articles. Nvivo 12 Plus analysis uses the crosstab query analysis feature. This feature displays the percentage of news data encoded manually using the N Vivo 12 Plus feature. Furthermore, the author uses Word cloud analysis, one of Nvivo12 Plus' featured tools, to see words or concepts frequently appearing in research files to visualize and collect data/words with similarities and differences.

RESULTS AND DISCUSSION

The Indonesian Government's policy of implementing the COVID-19 vaccination program nationwide aims to reduce the risk of transmission of the Corona Virus as the cause of COVID-19 disease and comply with health protocols (27). Based on the Circular of the Minister of Health No. HK.02.02/II/368/2021 regarding the implementation of COVID-19 vaccination for the elderly, comorbid, and survivors of COVID-19 and delayed targets (28). Within the Ministry of Social Affairs scope, a commitment was made to provide access to the COVID-19 vaccination for all levels of Indonesian society, especially the elderly group belonging to the COVID-19 vulnerable group (6). This vaccination is the right solution to reduce the risk of transmission of COVID-19 disease, and people who are affected do not get worse (29).

Based on the vaccination data listed in the background, as a whole, it shows that it is still unable to reach the desired targets. It can be seen that the number of the 1st vaccine is still far from

the target to be achieved, namely 140,205,046 and the 2nd vaccine is 96,519,346, and the 3rd vaccine is 1,222,471 while the target that must be achieved is 208,265,720. Cooperation between the Government and the people is needed to accelerate vaccines to the public so that the vaccination target can be achieved properly, especially for elderly groups in all regions in Indonesia. Considering that the elderly are a group that is vulnerable to transmission of COVID-19, a special strategy is needed in providing COVID-19 vaccine services to the elderly. So that the acceleration of vaccines against senile can meet the target and be evenly distributed in all regions of Indonesia.

Based on the graph above, it can be seen that the vaccination process is still relatively slow and is still far from the target the Indonesian Government wants to achieve regarding co-19 vaccination of the elderly (elderly). So far, the strategy undertaken has not been effective in accelerating the vaccination of the elderly in Indonesia. To achieve the target of vaccinating the elderly in Indonesia, the Government must first identify the factors that can delay the vaccination process for the elderly.

Factors hindering the process of vaccinating the elderly in Indonesia

To achieve the target of vaccinating the elderly in Indonesia, the Government must first identify factors that can cause delays during the vaccination process (30). Based on research from Elise PaulAndrew SteptoeDaisy Fancourt, the factors that hindered the implementation of special vaccinations for the elderly was distrust in the safety benefits of vaccines and their unpredictable effects (Paul et al., 2021). Based on

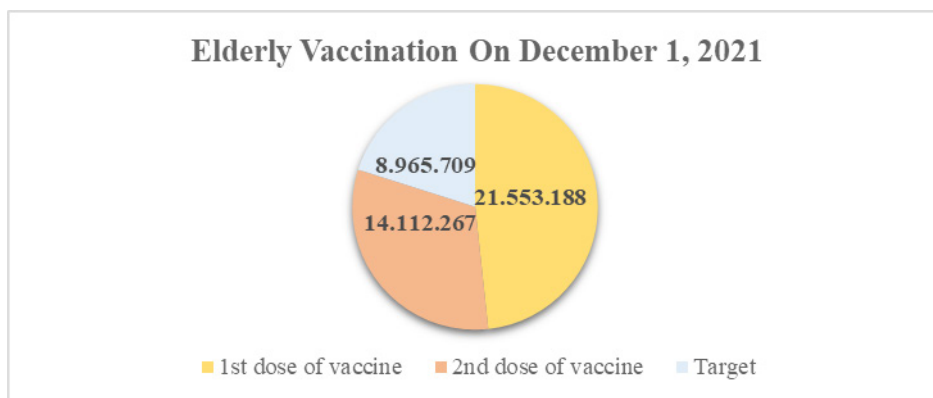


Figure 3. National Elderly Vaccination Data on 1 December 2021

Source: Ministry of Health Vaccine Data

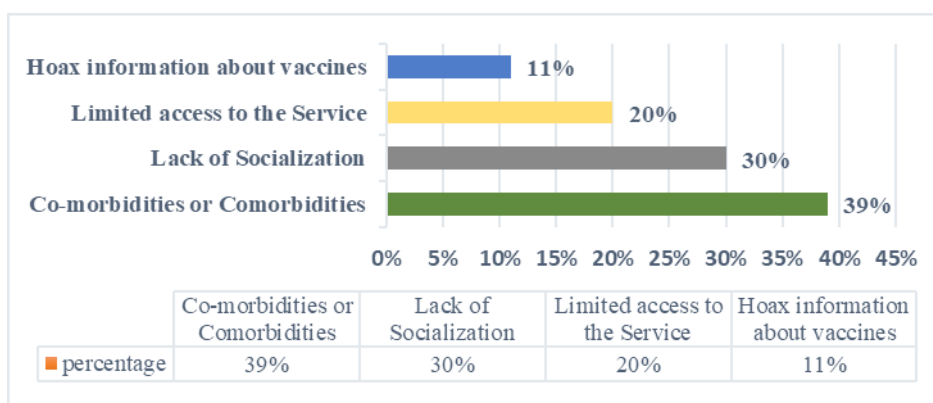


Figure 4. Factors inhibiting the process of accelerating vaccines for the elderly group

Source: Processed by Researchers Using the N Vivo Application

data obtained in the mass media, in this study, the researchers added factors that caused the slow process of vaccination for the elderly, namely lack of socialization regarding COVID-19 vaccination, hoax news related to vaccination, limited access to vaccine services, and comorbidities for the elderly.

. based on data sources through mass media that are managed using Nvivo 12 plus. It can be seen in the picture below regarding the inhibiting factors for the vaccination process for the elderly (elderly):

Based on the picture above, it can be seen that comorbid or comorbid diseases are the most common reason for the elderly group not to carry out the COVID-19 vaccine, namely as many as 39% due to congenital or comorbid diseases that can only be vaccinated unless their blood pressure is above 180/110mmHg, diabetes can be vaccinated as long as there are no complications chronic, elderly with tuberculosis or tuberculosis for at least two weeks, routine healing, there are recommendations for treating doctors for patients with blood cancer, cancer of solid tumors, blood disorders in the form of thalassemia, and immunohematology. Due to the presence of comorbid diseases, it is one of the biggest inhibiting factors for the elderly to receive the COVID-19 vaccine.



Figure 5. Vaccination information for COVID-19 in the elderly group

Source: Ministry of Health of the Republic of Indonesia

Lack of socialization and education related to the importance of vaccination causes the elderly group to lack insight and information about vaccines by 30% and evidenced by changes in attitudes and behavior of the community, especially in the elderly group to be vaccinated, behavior change is influenced by determinants such as beliefs, education level, age, environmental surroundings,

and the socio-economic status of the people who can influence people's behavior to vaccinate (31). Furthermore, the limited access to vaccination services for the elderly group, namely as much as 20%, is due to the difficulty of access for the elderly group to reach vaccine centers, as stated by Siti Nadia Tarmizi on 10 October 2021, who acts as the spokesperson for COVID-19 vaccination for the Ministry of Health of the Republic of Indonesia (Kemenkes RI).

Siti Nadia Tarmizi said the obstacle in accelerating the acceleration of vaccines for the elderly was the limited access to services which caused the vaccine acceleration process to be hampered because the elderly group was unable to reach the center of the vaccine service unit directly, especially in remote areas and was afraid of queues and creating crowds at the time of vaccine, while the elderly's level of strength has greatly decreased due to the age factor (32). and the spread of fake news related to vaccines, causing the elderly group to be afraid of getting vaccinated, as many as 11%. The occurrence of the COVID-19 Pandemic exposed the public, especially the elderly group, to various news related to the COVID-19 vaccine. Information is obtained from various sources, both trusted and fake news or hoaxes (33).

One of the posts shows a screenshot showing that people vaccinated against COVID-19 have a higher death rate compared to the unvaccinated population. The truth of the news is false. Quoted from Kumparan.com reported from usatoday.com, according to an epidemiologist and clinical professor in Colorado, Lisa Miller, this figure cannot be proven or confirmed. According to him, to calculate an accurate number of deaths, the total positive cases of COVID-19 among vaccinated patients must be known. But we don't have that number yet," said Lisa Miller. Lisa also ensured that the number of infections due to vaccines was quite small compared to more than 100 million US adults who had been fully vaccinated on 30 April 2021. So

that reports of deaths were higher than the group that had been getting vaccinated from those who are not vaccinated is certain not to be right or wrong

Implementation of policies in accelerating vaccines for the elderly in Indonesia

According to Edward III, implementing public policies in their development is a model aimed at seeing the extent to which these policies are implemented and what are the factors hindering the policy implementation (44). According to Edward III's theory, four variables are very useful in determining the successful implementation of a policy: communication, resources, disposition, and bureaucratic structure (34).

Based on the four indicators of policy implementation above, which are used to measure the success rate of vaccination for the elderly in Indonesia, of the four variables analyzed, the most prominent indicator is the bureaucratic structure which is 36.21%, then the second indicator of success is resources which is as much as 27.59%, communication 24.14%, and indicators of successful implementation of accelerated vaccination for the elderly in Indonesia based on the disposition of 12.07%.

Vaccination of the elderly in Indonesia must be carried out with effective and efficient outreach to service facility staff, as well as socialization with the elderly group of people (35). Channeling communication through outreach is very important (36). According to Edward III, information about public policy must be provided to policy actors so that they can understand what they are doing to implement the policy so that the goals and objectives of the policy can be fulfilled (37). Expanding policy information on the COVID-19 vaccine program for the elderly in Indonesia, the central Government takes advantage of national publications through social media and mass media to assist the organizers and the public receiving the vaccine to facilitate the elderly group in obtaining

[DISINFORMASI] Data Tingkat Kematian Orang Divaksin Lebih Tinggi dari yang Tidak Divaksin



Figure 6. Hoax news about the COVID-19 vaccine

Source: Ministry of Communication and Information of the Republic of Indonesia

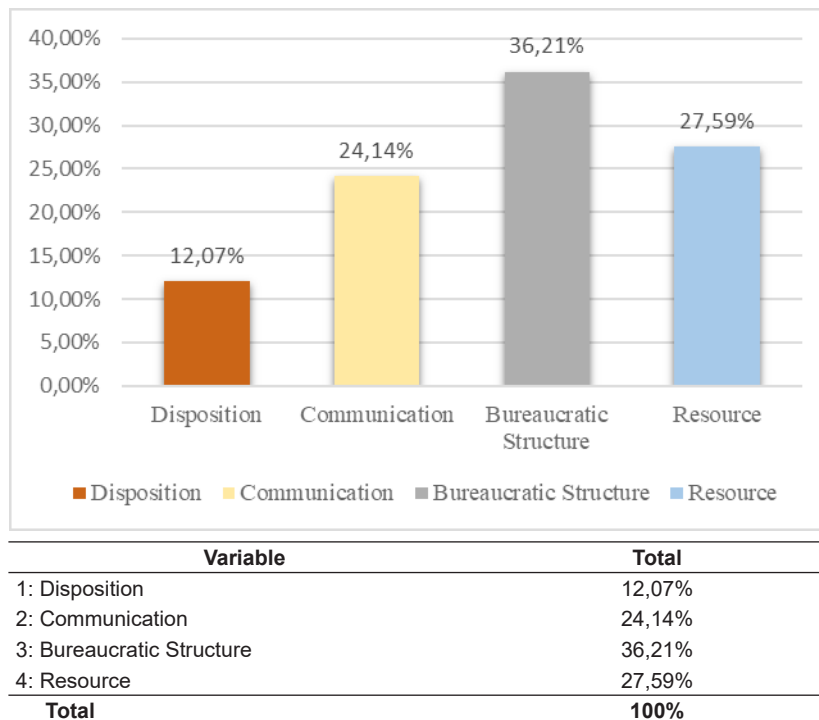


Figure 6. Presentation of analyzed data

Source: Processed by Researchers Using the N Vivo Application

information about the elderly vaccination policy in Indonesia (38).

Edward III is of the view that resources have an important role in implementing policies, the failure to achieve policy implementation often occurs due to incompetent staff in their field, insufficient staff, and the appointment of staff or personnel must have a high sense of dedication to the policies being carried out (39).in carrying out their duties as policy executors, medical personnel involved in COVID-19 vaccination in Indonesia are experts in their fields and have high knowledge and accuracy so that the administration of the COVID-19 vaccine to the elderly group can be ensured to be safe and accurate when injected into the elderly group's body.

Health workers carry out vaccinations for the elderly by visiting homes for the elderly who are ready to be vaccinated or often called the door-to-door or door-to-door strategy. In addition to medical personnel, budget resources also play an important role in accelerating vaccines for the elderly. Budget resources in accelerating vaccines for the elderly group are borne by the state budget or APBN, especially for implementing vaccinations for the elderly group in Indonesia.

Suppose a policy implementation is to be effective and efficient. In that case, implementers must not only understand what must be achieved and then have the necessary resources, but they must also have the will to carry out the policy (34). The officers implementing the vaccination

policy are selected by people who are dedicated to the elderly in Indonesia, and it is hoped that the person implementing the policy will be accepted by the elderly group (40.). The driving factors in the form of rewards or intensive giving to health workers make vaccination officers able to carry out their duties properly and have a great sense of responsibility in carrying out vaccination programs for the elderly (41).

Vaccination for the elderly group is carried out with a classification of tasks through the central Government, then handed over to the provincial Governor, and district and city governments, in accordance with the bureaucratic structure such as the UPTD puskesmas in every region in Indonesia (42). According to Edwar III, the bureaucratic structure must include aspects such as bureaucratic structure, division of authority, relations of organizational units, and others so that the main tasks, authorities, and functions for carrying out vaccinations against the elderly group can be effective, efficient and conducive (43).

The government policy scheme accelerating COVID-19 vaccination for the elderly in Indonesia can also be seen using word cloud analysis to find out what kind of narrative is used in the news media. Collection of popular words in the news media and count using Nvivo 12 plus with a maximum displayed on the analysis image is 50 words. The dissemination of narratives in the news media regarding the implementation of vaccination policies

- Corona (Covid-19) telah menjadi salah satu perhatian serius bagi semua negara sejak akhir 2019 hingga saat ini , bahkan hingga beberapa tahun ke depan . Bagaimana tidak , virus yang berasal dari salah satu provinsi di Tio. *Jurnal Ilmu Hukum*, 17, 35–47.
9. Wulanningrum, H. (2021). Evaluasi Diseminasi Informasi Vaksinasi Covid-19 Melalui Media Sosial Kementerian Komunikasi Dan Informatika. In *Proceeding Komunikasi dan Kehumasan Dinamika dan Strategi Humas Pemerintah di Indonesia* (Vol. 1). https://iprahumas.id/po-content/uploads/Proceeding_Iprahumas_2021.pdf#page=78
 10. Kominfo 2021. (n.d.). *Data Vaksinasi COVID-19 (Update per 1 Desember 2021)*.
 11. Purnawan, A. R. (2019). *Implementasi Big Data dalam Penanganan Pandemi Covid-19 di Indonesia Implementation of Big Data in Handling the Covid-19 Pandemic in Indonesia*.
 12. Niken, N., Mia, P., Septiana, S., Reyhan, R., Argha, A., & Putra, P. (2021). Implementasi Kebijakan Vaksinasi Covid-19 di Kota Boyolali. *Jurnal Health Sains*, 2(11), 2138–2144. <https://doi.org/10.46799/jsa.v2i11.343>
 13. Alfreda, J. (2021). Tinjauan Komunikasi Publik Di Era Pandemi Covid-19 Terkait Optimalisasi Vaksinasi Covid-19. In *Jurnal Sosioedukasi Ilmu Pendidikan dan Sosial*. <https://ejournal.unibabwi.ac.id/index.php/sosioedukasi/article/view/1505>
 14. Yanuarti, R. (2021). Analisis Media Sosial Twitter Terhadap Topik Vaksinasi Covid-19. *JUSTINDO (Jurnal Sistem Dan Teknologi Informasi Indonesia)*, 6(2), 121–130. <https://doi.org/10.32528/justindo.v6i2.5503>
 15. Nining Anggraini, N., Damayanti, F., Mulyanti, L., Studi dan Profesi Kebidanan, P. S., & Ilmu Keperawatan Dan Kesehatan, F. (2022). Pelaksanaan Vaksinasi Massal Covid-19 Di Universitas Muhammadiyah Semarang Mass Vaccination of Covid-19 At University of Muhammadiyah Semarang. *Jurnal Pengabdian Masyarakat Kebidanan*, 4(1), 6–10.
 16. Badan Pusat Statistik, 2019. (2019). *Badan Pusat Statistik*.
 17. Syahrudin, S. (2020). Kebugaran Jasmani Bagi Lansia Saat Pandemi Covid-19. *JUARA : Jurnal Olahraga*, 5(2), 232–239. <https://doi.org/10.33222/juara.v5i2.943>
 18. Lukas, S., & Alfi, I. B. (2020). Penyuluhan Kesehatan : Pentingnya Vaksinasi Lansia Guna Tercapainya Pandemi Yang Terkontrol. *Berdikari*, 1(1), 1–11.
 19. Maywati, S., Annashr, N. N., Faturrahman, Y., & Santiana. (2022). Upaya peningkatan kesiapan lansia dalam program Vaksinasi COVID-19. *Jurnal Masyarakat Mandiri*, 6(1), 696–707.
 20. Martini, S., Kusumawaty, I., & Yunike, Y. (2021). PERSEPSI DAN KESIAPAN LANSIA MENERIMA VAKSIN COVID-19 PENDAHULUAN Penyakit Coronavirus 2019 (COVID- 19) telah dinyatakan sebagai pandemi pada Maret 2020 (Reiter et al ., 2020). Pandemi ini telah menyebar ke seluruh dunia dengan jutaan orang terinfeksi. *Jurnal 'Aisyiyah Medika*, 6(2), 50–64.
 21. Ali, S., Khalid, A., & Zahid, E. (2021). Is COVID-19 Immune to Misinformation? A Brief Overview. *Asian Bioethics Review*, 13(2), 255–277. <https://doi.org/10.1007/s41649-020-00155-x>
 22. Yuningsih, A. (2022). Hubungan Pengetahuan Dengan Kesiapan Lansia Dalam Menerima Vaksin COVID-19. *Healthcare Nursing Journal*, 4(2), 398–403. <https://journal.umtas.ac.id/index.php/healthcare/article/view/2413/1164>
 23. Retno, D. P., Ningrum, D. M., Natalia, O., Maryam, S., Jupriadi, L., & Alfandi, Z. (2022). Determinan kepatuhan terhadap vaksin COVID-19 pada lansia di wilayah kerja Puskesmas Suela Kabupaten Lombok Timur. *Jurnal Ilmu Kefarmasian*, 3(2), 165–170.
 24. Silitonga, E., Sinaga, T. R., & Ningsih, S. D. (2021). Sosialisasi Vaksin Covid-19 Pada Kelompok Lanjut Usia Di Dusun 14 Desa Pematang Johar Kecamatan Labuhan Deli. *Jurnal Abdimas Mutiara*, 2(September), 169–175. <http://114.7.97.221/index.php/JAM/article/view/2190>
 25. Sigalingging, I. M., & Sherlly, M. (2021). Pembentukan Persepsi Lansia Tentang Vaksinasi Covid-19 Di Kabupaten Merauke. *Jurnal Signal*, 9(2), 227–235. <http://jurnal.ugj.ac.id/index.php/Signal/article/view/5929>
 26. Rahadi, D. R. (2020). *Konsep Penelitian Kualitatif*.
 27. Rahayu, R. N. (2021). Vaksin Covid 19 Di Indonesia : Analisis Berita Hoax. *Intelektiva : Jurnal Ekonomi, Sosial & Humaniora Vaksin*, 02 no. 07(07), 39–49.
 28. Riskesdas. (2021). Surat Edaran Nomor HK.02.02/I/368/2021, tanggal 11 Februari 2021, tentang Pelaksanaan Vaksinasi COVID-19 pada Kelompok Sasaran Lansia, Komorbid dan Penyintas COVID-19, serta Sasaran Tunda. *Kementerian Kesehatan RI*, 4247608(021), 613–614.
 29. Ritunga, I., Lestari, S. H., Santoso, J. L., Effendy, L. V., Siahaan, S. C. P. T., Lindarto, W. W., Nurhadi, S., Irham, I. M. M., & Monica, T. (2021). Penguatan Program Vaksinasi Covid-19 Di Wilayah Puskesmas Made Surabaya Barat. *Jurnal ABDINUS : Jurnal Pengabdian Nusantara*, 5(1), 45–52. <https://doi.org/10.29407/ja.v5i1.15953>
 30. Shadiq, A. F., Said, M. M., & Hayat. (2021). Strategi Dinas Kesehatan Kabupaten Sumenep

- Dalam Gerakan Vaksinasi Covid-19. *Madani Jurnal Politik Dan Sosial Kemasyarakatan*, 13(3), 298. <http://repository.unisma.ac.id/handle/123456789/4816>
31. Yuningsih, R. (2022). *SISTEM “ JEMPUT BOLA ” PERCEPATAN VAKSINASI COVID-19. 2022*(September 2021).
 32. Asiyah, N. (2021). The Effectiveness of Giving the COVID-19 Vaccine in Pregnancy. *Urecol Journal. Part C: Health Sciences*, 1(2), 54. <https://doi.org/10.53017/ujhs.76>
 33. Susilawati, E., Silitonga, E. M., & Zulfendri. (2021). Faktor yang Mempengaruhi Demand (Permintaan) Vaksinasi Covid-19 Bagi Lansia di Kelurahan Bandar Selamat Tahun 2021. *Journal of Healthcare Technology and Medicine*, 7(2), 1342–1350. <http://www.jurnal.uui.ac.id/index.php/JHTM/article/view/1738>
 34. Dalimunthe, Y. P., & Susilawati, S. (2022). Implementasi kebijakan vaksinasi covid-19 di Kota Medan menggunakan teori edward III. *FLORONA: Jurnal Ilmiah Kesehatan*, 1(2), 59–64.
 35. Arumsari, W., Desty, R. T., & Kusumo, W. E. G. (2021). Gambaran Penerimaan Vaksin COVID-19 di Kota Semarang. *Indonesian Journal of Health Community*, 2(1), 35. <https://doi.org/10.31331/ijheco.v2i1.1682>
 36. Prasetyaning Widayanti, L., & Kusumawati, E. (2021). Hubungan Persepsi Tentang Efektifitas Vaksin Dengan Sikap Kesiapan Mengikuti Vaksinasi Covid-19. *Hearty*, 9(2), 78. <https://doi.org/10.32832/hearty.v9i2.5400>
 37. Hasan, T., Beardsley, J., Marais, B. J., Nguyen, T. A., & Fox, G. J. (2021). The implementation of mass-vaccination against SARS-CoV-2: A systematic review of existing strategies and guidelines. *Vaccines*, 9(4), 1–15. <https://doi.org/10.3390/vaccines9040326>
 38. Mustain, M., & Afriyani, L. D. (2022). Edukasi Manfaat Vaksinasi Covid-19 Dalam Upaya Peningkatan Keikutsertaan Masyarakat. *SELAPARANG Jurnal Pengabdian ...*, 6, 160–164. <http://journal.ummat.ac.id/index.php/jpmb/article/view/7522>
 39. Aban, A., Andri, S., & Yuliani, F. (2022). Komunikasi Sumber Daya Aparatur Pemerintah dalam Penanggulangan Covid-19 Kepada Masyarakat di Kabupaten Kuantan Singingi. *Jurnal Pendidikan Tambusai*, 6, 1576–1581. <https://www.jptam.org/index.php/jptam/article/view/3155%0Ahttps://www.jptam.org/index.php/jptam/article/download/3155/2647>
 40. Rengas, P. S., Kuranji, P., & Waktu, B. (n.d.). *Analisis Implementasi Kebijakan Vaksinasi Covid-19 Pada Ibu Hamil Dan Lansia Di Kabupaten Batanghari Analysis of the Implementation of the Covid-19 Vaccination Policy for Pregnant Women and the Elderly in Batanghari Regency Magister Ilmu Kesehatan Masyara*. 318–331.
 41. Raya, K. P. (n.d.). *VAKSIN TERHADAP PENGURANGAN LAJU PERTUMBUHAN KASUS COVID-19*. 1–12.
 42. Umasugi, M. T. (2021). Sosialisasi dan Edukasi Pemberian Vaksin Sebagai Upaya Trust Pada Masyarakat Kota Ambon. *Journal Of Human And Education (JAHE)*, 1(2), 5–7. <https://doi.org/10.31004/jh.v1i2.12>
 43. Gee, J., Shimabukuro, P. M., Su, J., Tom, G. M. C., Sotir, R., Mark, g L., Jazwa, T. M., Amelia, N. N., Licata, S. M., Clark, T., Markowitz, L., Lindsey, N., & Zhang, B. C. (2021). First Month of COVID-19 Vaccine Safety Monitoring — United States . *MMWR. Morbidity and Mortality Weekly Report*, 70(8), 283–288.
 44. Kab, D. I., & Komering, O. (n.d.). *Implementasi Kebijakan Vaksinasi Covid-19*. 59–68.