

## ***Factor Analysis of Physiotherapists on the Implementation of Telephysiotherapy in Indonesia***

**Zidni Imanurrohman Lubis<sup>1\*</sup>, Syi'ar Aprilla Tanazza<sup>2</sup>, Ni Putu Desy Purnama Sari<sup>2</sup>, Anita Faradilla Rahim<sup>1</sup>, Ali Multazam<sup>2</sup>**

<sup>1</sup>Department of Undergraduate Physiotherapy, Faculty of Health Science, University of Muhammadiyah Malang, Malang, East Java, Indonesia

<sup>2</sup>Department of Profession Physiotherapist, Faculty of Health Science, University of Muhammadiyah Malang, Malang, East Java, Indonesia

(Correspondence author's email, zidnilubis@umm.ac.id)

### **ABSTRACT**

*Telephysiotherapy is a long-distance physiotherapy service using technology, including voice or video calls. In Indonesia, telephysiotherapy is not popular compared to abroad, so researchers want to analyze the factors of physiotherapists on implementation of telephysiotherapy in Indonesia. This research was a correlational analytic descriptive study with a cross-sectional approach. The independent variables are the attitude, readiness, knowledge, and motivation of physiotherapists in Indonesia in addition, the dependent variable is the implementation of telephysiotherapy with 117 physiotherapists in Indonesia as subjects. Questionnaire used and tested for validity and reliability. By Chi-Square test, the result found that attitude variable obtained a p-value of 0.034 ( $p < 0.05$ ) and OR value of 2.561, which means that a positive attitude increases the implementation of telephysiotherapy by 2 times, while on the readiness variable the p-value 0.008 ( $p < 0.05$ ) with OR 3.237 which means high readiness increases 3 times the implementation of telephysiotherapy and on the variables of knowledge and motivation shows a p-value of 0.042 ( $p < 0.05$ ) with an OR value of 2.415 which means high knowledge and motivation increase the implementation of telephysiotherapy 2 times greater than low knowledge and motivation. This study found that the majority of physiotherapists in Indonesia have a positive attitude and readiness, knowledge, and high motivation towards the implementation of telephysiotherapy in Indonesia, but more physiotherapists in Indonesia have not implemented telephysiotherapy. On the other hand, there is a relationship between the attitude, readiness, knowledge, and motivation of physiotherapists towards the implementation of telephysiotherapy in Indonesia.*

**Keywords:** Attitude, Knowledge, Motivation, Telehealth, Telemedicine

<https://doi.org/10.33860/jik.v17i4.2247>



© 2024 by the authors. Submitted for possible open access publication under the terms and conditions of the Creative Commons Attribution (CC BY SA) license (<https://creativecommons.org/licenses/by-sa/4.0/>).

### **INTRODUCTION**

The World Health Organization (WHO) officially reported a case of pneumonia without a clear cause, in Hubei Province, China in December 2019. This disease is caused by a

type of corona virus, SARS-CoV-2, which was later named COVID-19. This virus has spread throughout the world and was declared a pandemic<sup>1</sup>. To suppress the spread of the virus, several countries have implemented physical distancing lockdowns to minimize physical

interaction, but this policy has an impact on people's access to health facilities<sup>2,3</sup>. In response to this, the government has begun to direct health workers and the public to utilize telemedicine as a long-distance health service<sup>4</sup>.

Telemedicine is the use of electronic communications and applications to provide health services to patients without direct face-to-face contact<sup>5,6</sup>. Telemedicine is used abroad to treat pulmonary, musculoskeletal, and neurological cases with the same satisfactory results as direct or face-to-face services<sup>7-10</sup>. In the field of physiotherapy, telemedicine has developed under the name telephysiotherapy. Telephysiotherapy is a long-distance physiotherapy service using telecommunications technology, either via voice calls or video calls. Clinically, telephysiotherapy includes rehabilitation and habilitation services which include examination, monitoring, prevention, intervention, education, and evaluation<sup>11</sup>.

Telephysiotherapy is a global trend that can be implemented by physiotherapists during the pandemic to improve secondary health-care. In Indonesia, telephysiotherapy is still not that massive compared to abroad. It is assumed that physiotherapists in Indonesia still have obstacles in implementing it, both technological knowledge, understanding in its application, attitude and readiness in implementing this service method<sup>12</sup>.

Attitude is a reaction or response that is still closed from a person to a stimulus or object. Attitude is how people think or evaluate something. Newcomb, a social psychologist, stated that attitude is readiness or willingness to act and is not the implementation of certain motives. In other words, the function of attitude is not yet an open reaction (action) or activity, but rather a behavioral predisposition or closed reaction<sup>13</sup>.

Readiness is a very important factor in a life process. By having good preparation, the resulting results will be better than the results achieved without good preparation. Readiness is a person's overall condition that makes him ready to respond or answer in a certain way to a situation. Adjustments to conditions at some point will have an effect or tendency to respond. According to Thorndike, readiness is a prerequisite for subsequent learning<sup>14</sup>.

Readiness can come from knowledge. Knowledge is information or information that is used as a basis for making decisions, acting,

understanding, and pursuing certain goals or strategies<sup>15</sup>. Physiotherapists working in North Gujarat were found to have sufficient knowledge about telephysiotherapy. Namely, 57.14% while 38.78% did not know telephysiotherapy at all, but only 9% of physiotherapists regularly use telephysiotherapy<sup>16</sup>. Meanwhile, at the motivation level, physiotherapists agree that they want patients to consult via telerehabilitation, namely 8-14%<sup>17</sup>.

Motivation is a force that can encourage someone to move in the desired direction in achieving a goal<sup>15</sup>. Motivation plays a role in supporting an activity<sup>18</sup>. Previous research has revealed that telephysiotherapy is one of the most adaptive solutions for providing physiotherapy services during the pandemic, which can also motivate physiotherapists<sup>12</sup>. In contrast to this, based on the results of a preliminary study conducted on physiotherapists in Indonesia using a questionnaire, the researchers found that 12 out of 15 physiotherapists had not implemented telephysiotherapy, so this research aimed to analyze internal factors, including attitude, readiness, motivation, and knowledge of physiotherapy. regarding the implementation of telephysiotherapy in Indonesia.

## METHOD

The type of research carried out in this research is descriptive analytical correlation with a cross sectional study approach with the independent variables attitude, readiness, knowledge and motivation of physiotherapists in Indonesia and the dependent variable is the implementation of telephysiotherapy. The sample in this study was 117 physiotherapists in Indonesia who were willing to fill out informed consent and research questionnaires. This research also complies with ethics No.E.5a/097/KEPK-UMM/VI/2022.

The sampling method used by researchers is non-probability with total sampling. This research was conducted in Indonesia online from January 2022 to February 2022.

The measuring tool used is a questionnaire created by researchers based on domains related to the variables studied, namely attitude, readiness, motivation and knowledge of physiotherapists. The steps for developing a

questionnaire are as follows: (a) Examining the theory of each variable studied; (b) Formulate the instrument grid; (c) Arranging question items; (d) Testing on respondents with the same characteristics as the research sample; (e) Analyzing test results; (f) Revise and (g) Finalize the formulation of questionnaire items and instruments. The questionnaire was created using a standard validity test (Pearson Product Moment Correlation) with a value of  $<0.3$  and reliability (Cronbach's Alpha) with a value of  $p>0.60$ .

To answer the research questions, data analysis was carried out consisting of univariate and bivariate tests. Univariate tests for sample characteristics were presented in percentage proportions (%) and bivariate test analysis carried out normality and correlation tests. Normality test uses Kolmogorov-Smirnov ( $n>50$ ) and correlation test uses Chi-Square.

## RESULTS

Based on sample characteristics, the research found the following data.

**Table 1. Characteristics of Respondents**

Characteristics	N	%
<b>Age</b>		
Late Teens	31	26
Early Adulthood	66	56
Late Adulthood	9	8
Early Elderly	9	8
Elderly	1	1
Late Elderly	1	1
<b>Gender</b>		
Male	51	44
Female	66	56
<b>Education</b>		
Associate Degree III	26	22
Associate Degree IV	12	10
Bachelor	65	56
Master	13	11

**Table 2. Analysis of Physiotherapist Factors on the Implementation of Telephysiotherapy in Indonesia**

Variable	Do Telephysiotherapy				Total	p-value	OR
	Yes		Not Yet				
	N	%	N	%	N	%	
Attitude							
Positive	22	18.8	42	35.9	64	54.7	0.034*
Negative	9	7.7	44	37.6	53	45.3	
Readiness							

Doctoral	1	1
<b>Work Period</b>		
$\leq 5$ years	68	58
$> 5$ years	49	42

Source: Primary Data, 2022

Characteristics of respondents based on age along with several age groups, the highest age was in early adulthood with an age range of 26-35 years totaling 66 individuals (56%), the second most common age was in late adolescence with 17-25 years old totaling 31 people (26%). Besides that, male respondents and bachelor's degree education dominate the characteristics of respondents. The majority of respondents' work experience was less than or equal to 5 years. Based on the practice location, the characteristics of the research respondents can be seen in the following picture.



**Figure 1. Characteristics of Respondents Based on Practice Location**

Figure 1 shows the characteristics of respondents based on practice locations spread across several provinces in Indonesia. The provinces where the physiotherapy practice was located filled out the questionnaire as many as 23 provinces and the provinces with the largest number of people who filled out the research questionnaire were East Java Province with 40 people (34%), South Sulawesi 17 people (15%), DKI Jakarta 6 people (4%). Meanwhile, the few provinces that filled out the research questionnaire were 1 person (1%) each from Aceh, Maluku and Papua.

Low	9	7.7	49	41.9	58	49.6	0.008*	3,237
High	22	18.8	37	31.6	59	50.4		
<b>Knowledge</b>								
Low	10	8.5	46	39.3	56	47.9	0.042*	2.415
High	21	17.9	40	34.2	61	52.1		
<b>Motivation</b>								
Low	0	0	3	2.6	56	47.9	0.042*	2.415
High	31	26.5	83	70.9	61	52.1		

Source: Primary Data, 2022

Based on Table 2, the results of the correlation test using chi-square show that the p-value for each variable is less than 0.05 ( $p < 0.05$ ), which means there is a relationship between all independent variables (attitude, readiness, knowledge, and motivation) and the dependent variable (implementation of telephysiotherapy). Besides that, the OR (Odd Ratio) value shows the strength of the relationship between each variable. Attitude can increase the implementation of telephysiotherapy by 2,561 times compared to negative attitudes, readiness increase 3,237 times, and knowledge and motivation increase 2,415 times the implementation of telephysiotherapy in Indonesia.

## DISCUSSION

### The Relationship between Physiotherapists' Attitudes towards the Implementation of Telephysiotherapy in Indonesia

From the results of the research carried out, it can be concluded that there is a relationship between attitudes towards the implementation of telephysiotherapy. Attitude is a person's reaction or response to an object or other particular thing<sup>19</sup>. A person's attitude is closely influenced by personal experience. Experience can be gained from a physiotherapist's educational journey as well as experience during his work. Apart from that, other influences that are considered important in forming a person's attitudes include age, length of work, mass media, and environmental factors of the subject. The higher a person's level of education and age, the easier it will be to receive information and respond to it. So everything that has been mentioned above greatly influences the birth of a person's attitude which can be either positive or negative. Attitudes are certain rules in terms of feelings,

thoughts and predispositions for a person's actions and behavior towards something in the surrounding environment. A person who likes an object means they have a positive and favorable attitude, whereas if the person doesn't like it, then that person has a negative and unfavorable attitude<sup>20</sup>.

To be able to apply technology in all fields, especially health, is certainly not easy. The implementation of information technology-based health services also has obstacles in its implementation<sup>21</sup>. Telehealth is still not widely implemented in Indonesia. The many obstacles and obstacles that are generally faced influence this. Lack of awareness or knowledge of health workers, including physiotherapists, namely telephysiotherapy, influences physiotherapists in responding to it<sup>22</sup>.

Attitude has a strong relationship to the implementation of telephysiotherapy. This is because attitude describes a person's response or assessment of something<sup>23</sup>. The formation of a person's attitudes can be caused by several factors. Starting from personal experience, existing social norms, culture, mass media, and self-confidence<sup>20</sup>. This relationship shows that the more positive a person's attitude towards something, the more optimal its implementation will be<sup>24</sup>.

### The Relationship between Physiotherapist Readiness and the Implementation of Telephysiotherapy in Indonesia

Research shows that there is a relationship between readiness and implementation of telephysiotherapy. Readiness plays a role in a person to show that someone's condition has met the eligibility requirements. There are many factors that influence a person's readiness which are important in every individual. Starting from internal factors in the form of physical and psychological. From the research results, it

shows that the productive age dominates the respondents because their physical condition is still quite good at this productive age, namely early adulthood (26-35 years). Likewise with psychology which can be described from desires and intelligence which are directly proportional to the level of education that dominates the research respondents. Internal factors, formed from self-motivation, work experience, physical, psychological and expectations. Physicality is closely related to health which will influence the results of a person's actions and social adjustments. If a person experiences physical problems, it can affect a person's readiness, and vice versa. Psychic is related to intelligence, memory, needs that are met, there is a desire or motivation to learn, there is attention and being able to concentrate. Physical and psychological well-being will influence the results of actions that influence a person's readiness<sup>25</sup>.

The low quantity of telephysiotherapy users in Indonesia is influenced by various things that have become challenges and obstacles so far<sup>22</sup>. There are at least 6 main obstacles from research conducted by Khalifa (2013)<sup>26</sup>, namely related to individual barriers (covering behavior, attitudes, readiness, self-confidence, etc.), professional barriers (covering the nature of work of health workers), technical barriers (covering implementation infrastructure), organizational barriers (covering management of health service facilities), financial barriers (covering money and funding), and legal barriers (including regulations and rules). Limited infrastructure in some areas, especially regarding information technology, is a major obstacle in implementing telephysiotherapy due to individual and technical barriers. So it can influence a physiotherapist's readiness to implement telephysiotherapy.

From the results of this research, it was found that the relationship between the readiness of physiotherapists and the implementation of telephysiotherapy is relatively strong. From research conducted by Syarip et al., (2018)<sup>25</sup>, some several aspects and factors influence a person's readiness, which are generally divided into internal and external factors as well as a person's physical and spiritual aspects.

### **The Relationship between Physiotherapist Knowledge and the Implementation of Telephysiotherapy in Indonesia**

The results of research on data analysis carried out concluded that there was a relationship between knowledge and the implementation of telephysiotherapy. High knowledge increases the implementation of telephysiotherapy compared to low knowledge. This research is in line with research by Maylin, Antono & Rani (2019)<sup>27</sup> that respondents who use telemedicine a lot are found in the group with good knowledge, while those who use telemedicine in the rare category are more often found in the group with poor knowledge and there is a relationship between knowledge and use of telemedicine services during the COVID-19 pandemic. So, the better the knowledge about the use of telephysiotherapy, the more optimal it will be for individuals to use telephysiotherapy during the COVID pandemic. The higher the physiotherapist's knowledge about implementing telephysiotherapy, the easier it will be to implement telephysiotherapy<sup>28</sup>.

Knowledge is the most basic knowledge to shape a person's actions to carry out a goal. Knowledge is knowing or understanding when someone has seen (witnessed, experienced or re-studied) the object being observed or seen<sup>29</sup>. Good knowledge can be influenced by a number of factors, namely knowing about the existence of telephysiotherapy, understanding the use of telephysiotherapy, being able to apply and analyze the use of telephysiotherapy. Abilities that can be obtained from knowledge include being able to explain or know the definition of telephysiotherapy, knowing the origins of telephysiotherapy, explaining, stating the implementation of telephysiotherapy. In terms of understanding, someone who understands the implementation of telephysiotherapy is able to explain, conclude and interpret the implementation of telephysiotherapy or something that has previously been understood about telephysiotherapy and understands the use of communication technology as well as the knowledge gained by someone who is able to apply telephysiotherapy easily. able to analyze the effectiveness of telephysiotherapy in physiotherapist services during the Covid-19 pandemic<sup>30</sup>.

Apart from these factors, there are other factors such as the media used to obtain information and the physiotherapist's experience in using telephysiotherapy. Information communication media in several forms of media such as television, radio, books, magazines, newspapers, the internet, and so on have a big influence on the level of knowledge of physiotherapists. Physiotherapists get information regarding telephysiotherapy from information media<sup>31</sup>.

The source of knowledge arises from internal experience that is gained and the knowledge gained is reviewed. The experience gained becomes knowledge for individuals subjectively so that the more experience one gets, the better the knowledge will be. The experience that is gained and attached becomes knowledge to the individual independently so that the more experience gained, the better the knowledge will be<sup>28</sup>. Several other studies regarding a person's level of knowledge suggest that knowledge is the factor that most influences a person's behavior<sup>29</sup>.

### **The Relationship between Physiotherapist Motivation and the Implementation of Telephysiotherapy in Indonesia**

From the results of the data analysis research carried out, it can be concluded that there is a relationship between motivation and the implementation of telephysiotherapy. High motivation increases the implementation of telephysiotherapy compared to low motivation. The stronger the motivation a physiotherapist has, the more likely it is that the physiotherapist will show strong behavior to achieve a goal. Motivation has a role in doing one's work. Carrying out a goal does not exist without motivation, no motivation means there is no purpose for someone to do it<sup>18</sup>. Motivation is important because with motivation it is hoped that every person will want and be enthusiastic about implementing telephysiotherapy<sup>28</sup>. Physiotherapist motivation arises when there is a driving force, self-will, willingness to implement it, being able to form a skill in carrying out telephysiotherapy, having responsibility and having a goal for carrying out telephysiotherapy<sup>32</sup>.

The factors that influence physiotherapist motivation are internal (inside) or external (outside) factors. Motivation within a person to try to achieve satisfaction that exists within a person<sup>33</sup>. The formation of the

physiotherapist's own motivation occurs because there is a desire that arises naturally from within which arouses high enthusiasm or moves the physiotherapist to do something to achieve satisfaction or the goal of carrying out telephysiotherapy. Motivation within physiotherapists such as internal encouragement to carry out telephysiotherapy, physiotherapists' desire to use social media in physiotherapist services, physiotherapists want to continue serving patients even during the Covid-19 pandemic<sup>34</sup>.

Extrinsic (outside) motivation comes from outside a person, there is support from verbal communication and non-verbal communication provided by closeness between close friends. Motivation from outside the physiotherapist is all that is obtained from opinions or encouragement from other colleagues<sup>35</sup>. The use of telephysiotherapy has received good support from fellow medical personnel who provide health services and support from patients who receive health services during the Covid-19 pandemic in Indonesia. This has proven that health services using telephysiotherapy are very good for patients who live far from health service centers who can use various information technology tools to support telephysiotherapy in order to provide good equipment to patients to improve their health status, such as telephone calls to health services, text messaging, and internet-based applications. The existence of support from the government in implementing telephysiotherapy increases the confidence of the public and medical personnel, especially physiotherapists, in implementing telephysiotherapy to improve health services. The government supports the implementation of telephysiotherapy in Indonesia by issuing a circular issued by the Minister of Health No.HK.02.01/MENKES/303/2020 regarding the implementation of health services utilizing information and communication technology to avoid the spread of COVID-19 in Indonesia<sup>36</sup>.

Government assistance can form regulations that can regulate the implementation of telephysiotherapy so that the use of telephysiotherapy in health services becomes an official service in Indonesia<sup>35</sup>. External motivation can increase one's own motivation, so that external motivation can be used to strengthen the achievement of planned goals. External motivation has great power to change an individual's will from not wanting to

to being willing to carry out an activity such as carrying out telephysiotherapy<sup>34</sup>. Apart from that, factors that can support the implementation of telephysiotherapy are the Covid-19 pandemic because of policies related to travel restrictions to prevent the spread of transmission of the Covid-19 virus<sup>37</sup>. WHO calls on every country to plan long-term goals to develop health information technology services, namely E-Health, in various health fields. The ease of using technology can give rise to self-confidence in wanting to apply it in individuals, that is, the system is useful and creates a feeling of comfort when using it. The more good influence it has on users using information technology, the greater the interest that arises in people in using information technology<sup>29</sup>.

The limitation of this research is the limited sample of researchers who are willing to fill out the research questionnaire. Researchers were only able to reach physiotherapist respondents from 23 provinces, which may not represent all physiotherapists in Indonesia, even though they had used an online questionnaire. For this reason, it is hoped that future research can combine online and offline questionnaires and collaborate with professional organizations, both central and branch, to increase the participation of Indonesian physiotherapists as research respondents.

## CONCLUSIONS

This research found that the majority of physiotherapists in Indonesia have a positive attitude and high readiness, knowledge and motivation towards implementing telephysiotherapy in Indonesia, but uniquely, there are more physiotherapists in Indonesia who have not implemented telephysiotherapy in their services. On the other hand, a relationship was found between the attitude, readiness, knowledge and motivation of physiotherapists towards the implementation of telephysiotherapy in Indonesia.

Further research regarding other factors that may be stronger in influencing the implementation of telephysiotherapy, using both qualitative and quantitative studies, is still needed with sample coverage in each province in Indonesia. Researchers also feel that support from professional organizations and higher physiotherapy education is necessary for the

implementation of telephysiotherapy to be more massive and reach a wider area.

## ACKNOWLEDGEMENTS

The author would like to thank the Directorate of Research and Community Service of Muhammadiyah University of Malang for material and non-material assistance in this research and the Indonesian Physiotherapy Association Malang City Center and Branch for assisting in the research process.

## CONFLICT OF INTEREST

The authors declare no conflict of interest

## REFERENCES

1. Silva LRB, Seguro CS, de Oliveira CGA, Santos POS, de Oliveira JCM, de Souza Filho LFM, et al. Physical Inactivity Is Associated With Increased Levels of Anxiety, Depression, and Stress in Brazilians During the COVID-19 Pandemic: A Cross-Sectional Study. *Front Psychiatry*. 2020 Nov 17;11.
2. Hagger MS, Keech JJ, Hamilton K. Managing Stress during the Coronavirus Disease 2019 Pandemic and Beyond: Reappraisal and Mindset Approaches. *Stress and Health*. 2020 Aug 14;36(3):396–401.
3. Rosyanti L, Hadi I. Dampak Psikologis dalam Memberikan Perawatan dan Layanan Kesehatan Pasien COVID-19 pada Tenaga Profesional Kesehatan. *Health Information : Jurnal Penelitian*. 2020 Jun 30;12(1):107–30.
4. Machmud M, Masmuh A, Nasirin C, Salahudin, Baharuddin T, Musa AEZ. Artificial Intelligence In The Public Health Sector: The Use Of Telemedicine In Indonesia During Covid-19 | *PalArch's Journal of Archaeology of Egypt / Egyptology*. *PalArch's Journal of Archaeology of Egypt* [Internet]. 2020 Nov 2 [cited 2021 Jan 9];17(7):10106–18. Available from: <https://archives.palarch.nl/index.php/jae/article/view/4047>
5. Chang MC, Boudier-Revéret M. Usefulness of telerehabilitation for stroke patients during the COVID-19 pandemic. *Am J Phys Med Rehabil*. 2020;Publish Ah:1–5.

6. Song X, Liu X, Wang C. The role of telemedicine during the COVID-19 epidemic in China - Experience from Shandong province. *Crit Care*. 2020;24(1):1–4.
7. Castrodad IMD, Recai TM, Abraham MM, Etcheson JI, Mohamed NS, Edalatpour A, et al. Rehabilitation Protocols Following Total Knee Arthroplasty: a Review of Study Designs and Outcome Measures. *Ann Transl Med [Internet]*. 2019 Oct [cited 2020 Jul 6];7(S7):S255–S255. Available from: [/pmc/articles/PMC6829007/?report=abstract](https://pubmed.ncbi.nlm.nih.gov/32454919/)
8. Cottrell MA, Russell TG. Telehealth for musculoskeletal physiotherapy. *Musculoskelet Sci Pract*. 2020;(January).
9. Jiang S, Xiang J, Gao X, Guo K, Liu B. The Comparison of Telerehabilitation and Face-to-Face Rehabilitation after Total Knee Arthroplasty: A Systematic Review and Meta-Analysis. *J Telemed Telecare [Internet]*. 2018 May 1 [cited 2020 Jul 6];24(4):257–62. Available from: <https://pubmed.ncbi.nlm.nih.gov/28027679/>
10. Turolla A, Rossetini G, Viceconti A, Palese A, Tommaso G. Musculoskeletal Physical Therapy During the COVID-19 Pandemic: Is Telerehabilitation the Answer. Oxford University Press; 2020. 1–56 p.
11. Adhikari SP, Shrestha P, Dev R. Feasibility and Effectiveness of Telephone-Based Telephysiotherapy for Treatment of Pain in Low-Resource Setting: A Retrospective Pre-Post Design. *Pain Res Manag [Internet]*. 2020 [cited 2022 Apr 7];2020. Available from: <https://pubmed.ncbi.nlm.nih.gov/32454919/>
12. Kurniawati N, Aulia DA, Sativani Z, Pandini EA, Qoriah YA, Fadhilah ND, et al. Tele-fisioterapi sebagai Pendekatan Inovatif dan Adaptif terhadap Kualitas Hidup Pasien Stroke selama Pandemi COVID-19. *Fisioterapi. Jurnal Ilmiah Fisioterapi*. 2021;21(1):37–50.
13. Rahmadi A, Lestari Y, Yenita Y. Hubungan Pengetahuan dan Sikap Terhadap Rokok Dengan Kebiasaan Merokok Siswa SMP di Kota Padang. *Jurnal Kesehatan Andalas*. 2013 Jan 1;2(1):25.
14. Husaini FA, Asriyadi F. Studi Korelasi Sikap dan Kesiapan Penerapan Evidence-Based Practice pada Mahasiswa Profesi Ners UMKT Tahun 2019. *Borneo Student Research*. 2020;2(1):7884.
15. Wahyuningsih A, Purnamasari V. Kinerja Perawat Dilihat Dari Pengetahuan Dan Motivasi Perawat. *JURNAL PENELITIAN KEPERAWATAN*. 2016;2(2).
16. Soni KM, Khatri SM. Use of Tele-physiotherapy as a treatment tool by physiotherapists in North Gujarat: A Survey. *IOSR Journal of Dental and Medical Sciences (IOSR-JDMS) e-ISSN [Internet]*. 2020 [cited 2022 Apr 7];19:21–5. Available from: [www.iosrjournals.org](http://www.iosrjournals.org)
17. Lawford BJ, Bennell KL, Kasza J, Hinman RS. Physical Therapists' Perceptions of Telephone-and Internet Video-Mediated Service Models for Exercise Management of People With Osteoarthritis. 2017; Available from: <http://www.abs.gov.au/websitedbs/d3310114.nsf/home/remoteness+structure>
18. Suharn, Purwanti. Upaya Meningkatkan Motivasi Belajar Siswa. *G-Couns: Jurnal Bimbingan dan Konseling*. 2019;3(1):73–82.
19. Nursalam. *Metodologi Penelitian Ilmu Keperawatan*. 5th ed. Salemba Medika; 2020.
20. Siswadi GA. Integrasi Pendidikan Agama Hindu dalam Pembelajaran Bahasa Sansekerta. Nilacakra; 2019.
21. Kausar LIE. Pemanfaatan Teknologi Informasi Berbasis Internet terhadap Perkembangan Home Care di Indonesia. *Dinamika Kesehatan Jurnal Kebidanan dan Keperawatan*. 2020 Jan 2;10(1):212–23.
22. Ardiansyah A, Rusfian EZ. Eksplorasi Aspek – aspek Penghambat Penerimaan User Telemedicine pada Daerah Tertinggal di Indonesia. *Journal of Education, Humaniora and Social Sciences (JEHSS)*. 2020 Dec 2;3(2):671–81.



23. Kusumawardani AS, Muljono P. Hubungan Sikap dan Motivasi Kerja dengan Kinerja Kader Posyandu. *Jurnal Sains Komunikasi Dan Pengembangan Masyarakat [JSKPM]*. 2018;2(2):223–38.
24. Siboro MD, Surjoputro A, Budiyantri RT. Faktor-faktor yang Mempengaruhi Penggunaan Layanan Telemedicine Pada Masa Pandemi Covid-19 di Pulau Jawa. *Jurnal Kesehatan Masyarakat*. 2021 Sep 30;9(5):613–20.
25. Syarif SM, Suherman A, Yayat Y. Identifikasi Faktor-faktor yang Mempengaruhi Kesiapan Kerja Siswa Teknik Perbaikan Bodi Otomotif. *Journal of Mechanical Engineering Education*. 2019 Jan 30;5(2):261.
26. Khalifa M. Barriers to Health Information Systems and Electronic Medical Records Implementation. A Field Study of Saudi Arabian Hospitals. *Procedia Comput Sci*. 2013;21:335–42.
27. Maylin S, Antono S, Rani B. Faktor-Faktor Yang Mempengaruhi Penggunaan Layanan Telemedicine Pada Masa Pandemi Covid-19 Di Pulau Jawa. *Jurnal Kesehatan Masyarakat*. 2019;3(2):58–66.
28. Widianingrum T. Annual Membership Census. *Public Opinion Quarterly*. 2017.
29. Sa'idah N. Analisis Penggunaan Sistem Pendaftaran Online (E-Health) berdasarkan Unified Theory of Acceptance and Use of Technology (UTAUT). *Jurnal Administrasi Kesehatan Indonesia*. 2017 Dec 20;5(1):72.
30. Masturoh I, Anggita N. Metodologi Penelitian Kesehatan. In: Pusat Pendidikan Sumber Daya Manusia Kesehatan Kementerian Kesehatan Republik Indonesia. 2018.
31. Notoatmodjo S. *Metodelogi Penelitian Kesehatan*. Jakarta: Rineka Cipta; 2018.
32. Tanuwibowo MH, Setiawan R. Pengaruh Budaya Organisasi Dan Motivasi Kerja Terhadap Kinerja Karyawan Pada PT Lestari Purnama Perkasa. *Jurnal Agora*. 2015;3(2):60–9.
33. Huda W Al. *Teori-Teori Motivasi*. Jurusan Ilmu Perpustakaan dan Komunikasi Universitas Islam Negeri Ar-raniry. 2015;
34. Septianti D, Frastuti M. Pengaruh Penggunaan Media Berbasis Internet, Motivasi Intrinsik dan Motivasi Ekstrinsik Terhadap Minat Berwirausaha Online Mahasiswa Universitas Tridinanti Palembang. *Jurnal Ilmiah Ekonomi Global Masa Kini*. 2019 Dec 23;10(2):130.
35. Manurung EI. Kajian Literature : Penggunaan Telehealth Program Dalam Pelayanan. *Jurnal Ilmu Kesehatan Insan Sehat*. 2021;9(2):148–55.
36. Istifada R, Sukihananto S, Laagu MA. Pemanfaatan Teknologi Telehealth pada Perawat di Layanan Homecare. *Nursing Current*. 2017;5(1):51–61.
37. Riyanto A. Faktor-Faktor yang Mempengaruhi Pelaksanaan Telemedicine (Systematic Review). *Jurnal Manajemen Informasi Kesehatan Indonesia (JMIKI)*. 2021;9(2):165–74.