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Data Article

Data on attitudes, religious perspectives, and practices towards COVID-19 among Indonesian residents: a quick online cross-sectional survey



Zulvikar Syambani Ulhaq^{1,*}, Risma Aprinda Kristanti¹, Achmad Arief Hidayatullah¹, Lailia Nur Rachma¹, Nurlaili Susanti¹, Aulanni'am Aulanni'am^{2,*}

¹ Faculty of Medicine and Health Sciences, Maulana Malik Ibrahim State Islamic University of Malang, Batu, Indonesia

² Faculty of Science, Brawijaya University, Malang, Indonesia

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ABSTRACT

Although previously large-scale social restrictions were implemented by the Indonesian government, the total number of coronavirus cases is overcome China in the global ranking per July 18th, 2020, implying a higher infection rate among Indonesian residents. The surge of new coronavirus cases started since the loosening of large-scale social restrictions, thereby implicating that public gathering (including religious gathering) evidently increases transmission [1]. It has been reported that Indonesia's coronavirus disease-19 (COVID-19) mortality rate is the second-highest among Southeast Asian Nations, which may be associated with several health determinants, including biochemical factors and health comorbidity [2-7]. Because people's adherence to control measures is affected by their attitudes, religious perspectives, and practices (ARP) towards COVID-19. Hence, the information regarding Indonesian's ARP towards COVID-19 post-large-scale social restrictions is required. The data were collected via an online questionnaire, including demographic information (7 items), attitude and practice (5 items), and religious perspec-

* Corresponding authors.

E-mail addresses: zulhaq@kedokteran.uin-malang.ac.id (Z.S. Ulhaq), aulani@ub.ac.id (A. Aulanni'am).

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tive and practice (5 items), from July 11 – 18, 2020, collecting a total of 1,345 respondents. Although our data collection did not provide other precautionary measures (e.g., adequate ventilation). It is notable that most of the religious venues are having a close ventilation system. Hence, this may contribute to the propagation of SARS-CoV-2 transmission [8]. Altogether, these data will help in determining non-healthrelated factors to prevent the spread of COVID-19.

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Specifications Table

Subject	Public health
Specific subject area	Health psychology, Social psychology
Type of data	Primary data, tables
How data were acquired	Data were collated utilizing an online survey platform (Google forms)
Data format	Raw and analyzed
Parameters for data collection	The survey data was obtained from 1,354 respondents of Indonesian residents with internet access.
Description of data	The data was conducted through an online questionnaire. Relying on
collection	the authors' network, one-page recruitment information was
	posted/reposted via Whatsapp.
Data source location	Region: Asia; Country: Indonesia
Data accessibility	Data is accessible at Mendeley Repository
	https://data.mendeley.com/datasets/nswtwm7j8k/1

Value of Data

- This data describes the attitude, religious perspective, and practice among Indonesian residents toward COVID-19.
- This data is useful for researchers who want to compare similar studies regarding attitude, religious perspective, and practice toward COVID-19 in the different populations.
- This data may help the leaders and policymakers to evaluate and prevent non-health-related factors associated with the spread of COVID-19.

1. Data Description

A total of 1,354 participants completed the questionnaire on attitude, religious perspective, and practice among Indonesian residents toward COVID-19 (Table 1), which then was divided according to demographic characteristics (Table 2). The detailed responses on attitude, religious perspective, and practice toward COVID-19 by participants are presented in Table 3–4. Factors associated with attitude, religious perspective, and practice toward COVID-19 are depicted in Table 5.

2. Experimental Design, Materials and Methods

2.1. Participants

This cross-sectional survey was conducted from July 11 – 18, 2020. Data collection relied on the authors' network; one-page recruitment information was posted/reposted via Whatsapp.

Table 1

Questionnaire of attitude, religious perspective, and practice towards COVID-19

Questions	Options
Attitude and practice	
A1. Do you think physical distancing effectively cut the spread of	Yes, not sure, no
SARS-CoV-2 infection?	
A2. Do you feel anxious about getting infected with SARS-CoV-2?	Yes, not sure, no
A3. Do you think it is necessary to perform more radical control such	Yes, not sure, no
as "comprehensive large-scale social restriction or lockdown" one more	
time as the new cases growing rapidly in the last few days?	
AP1. Have you applied health protocol regarding COVID-19 prevention	Always, occasionally, never
(worn mask, washed hands) when you were outside home and in a	
crowded place?	
AP2. Have you applied health protocol regarding COVID-19 prevention (worp mask, washed hands) when you were home after	Always, occasionally, never
(world mask, washed hands) when you were nome after traveling/working outside?	
Religious perspective and practice	
R1 Do you think it is possible to pray and gather in the place of	Yes not sure no
worship during the pandemic?	res, not bare, no
R2. Are the place of worship conducted COVID-19 prevention control	Yes, not sure, no
correctly?	
R3. Does social distancing in the place of worship make you feel safe	Yes, not sure, no
from SARS-CoV-2 infection?	
RP1. In the recent days, have you prayed in the place of worship other	Yes, no
than in your home?	
RP2. How often did you pray and gather in the place of worship during	Always, occasionally, never
"new normal or post large-scale social restrictions" was implemented?	

Table 2

Demographic characteristics of participants (n = 1,354)

Characteristics		Number of participants (%)
Gender	Male	368 (27.18)
	Female	986 (72.82)
Age group (years)	< 30	939 (69.35)
	≥ 30	415 (30.65)
Last education	High school	437 (32.27)
	Associate degree	222 (16.40)
	Bachelor degree	499 (36.85)
	Master degree	149 (11.00)
	Doctoral degree	47 (3.48)
Majors of current education or	Medicine related science	1,044 (77.10)
major of education		
	Science and technology	195 (14.40)
	Social science and humanities	115 (8.50)
Occupation	Students	664 (49.03)
	Teachers	168 (12.41)
	Health practitioners	382 (28.21)
	Government and administration	33 (2.89)
	related job	
	Others	107 (7.90)
Religion	Islam	1,167 (86.19)
	Protestantism	89 (6.57)
	Roman Catholicism	55 (4.06)
	Hinduism	33 (2.44)
	Buddhism	9 (0.66)
	Confucianism	1 (0.08)
Place of current residence	City	943 (69.65)
	Rural	411 (30.35)

Table 3

Attitude and practice towards COVID-19 by demographic variables*

Characteristic								Attitud	es and pra	ctice, n (%)					
		A1: physical distancing cut the spread of SARS-CoV-2			A2: feeling anxious being infected with SARS-CoV-2			A3: large-scale social restriction need to be re-implemented			AP1: CO a	VID-19 pr crowded j	evention in place	AP2: COVID-19 prevention after traveling or working outside		
		Y	NS	Ν	Y	NS	Ν	Y	NS	Ν	A	0	NV	A	0	NV
Gender	Male	338 (91.85)	27 (7.34)	3 (0.81)	262 (71.20)	57 (15.49)	49 (13.31)	268 (72.83)	66 (17.93)	34 (9.24)	320 (86.96)	35 (9.51)	13 (3.53)	323 (87.77)	36 (9.78)	9 (2.45)
	Female	931 (94.42)	51 (5.17)	4 (0.41)	773 (78.40)	135 (13.69)	78 (7.91)	775 (78.60)	165 (16.73)	46 (4.67)	926 (93.91)	46 (4.67)	14 (1.42)	935 (94.83)	42 (4.26)	9 (0.91)
Age group (years)	< 30	878	59	2	712	146	81	708	178	53	860	57	22	875	53	11
	≥ 30	(93.50) 391 (94.22)	(6.28) 19 (4.58)	(0.22) 5 (1.20)	(75.83) 323 (77.84)	(15.55) 46 (11.08)	(8.62) 46 (11.08)	(75.40) 335 (80.72)	(18.96) 53 (12.77)	(5.64) 27 (6.51)	(91.59) 386 (93.02)	(6.07) 24 (5.78)	(2.34) 5 (1.20)	(93.18) 383 (92.29)	(5.65) 25 (6.02)	(1.17) 7 (1.69)
Last education	High school	401	33	3	325	76	36	325	85	27	403	24	10	410	24	3
		(91.76)	(7.55)	(0.69)	(74.37)	(17.39)	(8.24)	(74.37)	(19.45)	(6.18)	(92.22)	(5.49)	(2.29)	(93.82)	(5.49)	(0.69)
	Associate degree	218 (98.20)	4 (1.80)	0 (0.00)	176 (79.28)	22 (9.91)	24 (10.81)	196 (88.29)	17 (7.66)	9 (4.05)	197 (88.74)	16 (7.21)	9 (4.05)	202 (90.99)	12 (5.41)	8 (3.60)
	Bachelor degree	469 (93.99)	29 (5.81)	1 (0.20)	391 (78.36)	61 (12.22)	47 (9.42)	372 (74.55)	100 (20.04)	27 (5.41)	462 (92.59)	31 (6.21)	6 (1.20)	465 (93.19)	29 (5.81)	5 (1.00)
	Master degree	136 (91.28)	11 (7.38)	2 (1.34)	110 (73.83)	24 (16.11)	15 (10.07)	119 (79.87)	19 (12.75)	11 (7.38)	141 (94.63)	7 (4.70)	1 (0.67)	139 (93.29)	8 (5.37)	2 (1.34)
	Doctoral degree	45 (95.74)	1 (2.13)	1 (2.13)	33 (70.21)	9 (19.15)	5 (10.64)	31 (65.96)	10 (21.28)	6 (12.77)	43 (91.49)	3 (6.38)	1 (2.13)	42 (89.36)	5 (10.64)	0 (0.00)
Major of education	Medicine related science	987	52	5	795	148	101	824	166	54	963	58	23	981	48	15
		(94.54)	(4.98)	(0.48)	(76.15)	(14.18)	(9.67)	(78.93)	(15.90)	(5.17)	(92.24)	(5.56)	(2.20)	(93.97)	(4.60)	(1.44)
	Science and technology	178	17	0	153	33	9	137	41	17	176	16	3	171	21	3
	Social science and humanities	(91.28) 104	(8.72) 9	(0.00) 2	(78.46) 87	(16.92) 11	(4.62) 17	(70.26) 82	(21.03) 24	(8.72) 9	(90.26) 107	(8.21) 7	(1.54) 1	(87.69) 106	(10.77) 9	(1.54) 0
	numanues	(90.43)	(7.83)	(1.74)	(75.65)	(9.57)	(14.78)	(71.30)	(20.87)	(7.83)	(93.04)	(6.09)	(0.87)	(92.17)	(7.83)	(0.00)
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Table 3 (continued)

Characteristic		Attitudes and practice, n (%)														
		A1: physical distancing cut the spread of SARS-CoV-2			A2: feeling anxious being infected with SARS-CoV-2			A3: large-scale social restriction need to be re-implemented			AP1: COVID-19 prevention in a crowded place			AP2: COVID-19 prevention after traveling or working outside		
		Y	NS	Ν	Y	NS	Ν	Y	NS	Ν	A	0	NV	A	0	NV
Occupation	Students	617 (92.92)	45 (6.78)	2 (0.30)	498 (75.00)	117 (17.62)	49 (7.38)	480 (72.29)	146 (21.99)	38 (5.72)	607 (91.41)	42 (6.33)	15 (2.26)	617 (92.92)	40 (6.02)	7 (1.06)
	Teachers	158 (94.05)	7 (4.17)	3 (1.79)	128 (76.19)	23 (13.69)	17 (10.12)	125 (74.40)	30 (17.86)	13 (7.74)	157 (93.45)	9 (5.36)	2 (1.19)	152 (90.48)	13 (7.74)	3 (1.79)
	Health practitioners	370	10	2	298	38	46	328	35	19	354	22	6	358	18	6
		(96.86)	(2.62)	(0.52)	(78.01)	(9.95)	(12.04)	(85.87)	(9.16)	(4.97)	(92.67)	(5.76)	(1.57)	(93.72)	(4.71)	(1.57)
	Government and administration related job	33	0	0	28	2	3	30	2	1	29	2	2	31	2	0
		(100)	(0.00)	(0.00)	(84.85)	(6.06)	(9.09)	(90.91)	(6.06)	(3.03)	(87.88)	(6.06)	(6.06)	(93.94)	(6.06)	(0.00)
	Others	91 (85.05)	16 (14.95)	0 (0.00)	83 (77.58)	12 (11.21)	12 (11.21)	80 (74.77)	18 (16.82)	9 (8.41)	99 (92.52)	6 (5.61)	2 (1.87)	100 (93.46)	5 (4.67)	2 (1.87)
Place of current	City	881	55	7	746	116	81	721	153	60	877	48	18	885	48	10
residence	Rural	(93.43) 388 (94.40)	(5.83) 23 (5.60)	(0.74) 0 (0.00)	(79.11) 289 (70.32)	(12.30) 76 (18.49)	(8.59) 46 (11.19)	(77.19) 313 (76.16)	(16.38) 78 (18.98)	(6.42) 20 (4.87)	(93.00) 369 (89.78)	(5.09) 33 (8.03)	(1.91) 9 (2.19)	(93.85) 373 (90.75)	(5.09) 30 (7.30)	(1.06) 8 (1.95)

* Religion was not included; A, always; N, no; NS, not sure; NV, never; O, occasionally; Y, yes.

Table 4	
Religious perspective and practice towards COVID-19 by demographic variables*	

Characteristic							Religiou	is perspect	ive and pra	ctice, n (%)	l				
		R1: po gather	ossiblity to during the	pray and pandemic	R2: the place of worship conducted COVID-19 prevention control correctly			R3: social distancing in the place of worship make you feel safe from SARS-CoV-2 infection			RP1: p place o other t	ray in the f worship han home	RP2: how often did you pray and gather in the place of worship during "new normal"		
		Y	NS	N	Y	NS	N	Y	NS	N	Y	N	A	0	NV
Gender	Male	178 (48.37)	122 (33.15)	68 (18,48)	253 (68.75)	78 (21.20)	37 (10.05)	237 (64.40)	97 (26.36)	34 (9.24)	255 (69.29)	113 (30.71)	77 (20.92)	214 (58.16)	77 (20.92)
	Female	280	466 (47.26)	240 (24 34)	648 (65.72)	227	(1126)	629 (63 79)	289 (29.31)	68 (6.90)	278	708	46 4 67	360 36 51	580 58.82
Age group	< 30	302 (32.16)	452 (48.14)	185 (19.70)	(65.39)	(23.64)	103	(63.79) (63.79)	277 (29.50)	63 (6.71)	345 (36.74)	594 (63.26)	71 (7.56)	393 (41.85)	475 (50.59)
	≥ 30	156 (37.59)	136 (32.77)	123 (29.64)	287 (69.16)	83 (20.00)	45 (10.84)	267 (64.34)	109 (26.27)	39 (9.40)	188 (45.30)	227 (54.70)	52 (12.53)	181 (43.61)	182 (43.86)
Last education	High school	125 (28.60)	227 (51.95)	85 (19.45)	288 (65.90)	106 (24.26)	43 (9.84)	274 (62.70)	137 (31.35)	26 (5.95)	153 (35.01)	284 (64.99)	32 (7.32)	171 (39.13)	234 (53.55)
	Associate degree Bachelor degree	93 (41.89) 169 (33.87)	90 (40.54) 211 (42.28)	39 (17.57) 119 (23.85)	181 (81.53) 304 (60.92)	26 (11.71) 123 (24.65)	15 (6.76) 72 (14.43)	163 (73.42) 314 (62.93)	48 (21.62) 143 (28.66)	11 (4.95) 42 (8.42)	102 (45.95) 190 (38.08)	120 (54.05) 309 (61.92)	30 (13.51) 40 (8.02)	104 (46.85) 219 (43.89)	88 (39.64) 240 (48.10)
	Master degree Doctoral degree	53 (35.57) 18 (38.30)	50 (33.56) 10 (21.28)	46 (30.87) 19 (40.43)	99 (66.44) 29 (61.70)	35 (23.49) 15 (31.91)	15 (10.07) 3 (6.38)	87 (58.39) 28 (59.57)	46 (30.87) 12 (25.53)	16 (10.74) 7 (14.89)	65 (43.62) 23 (48.94)	84 (56.38) 24 (51.06)	17 (11.41) 4 (8.51)	58 (38.93) 22 (46.81)	(49.66) 21 (44.68)
Major of education	Medicine related science Science and technology Social science and	338 (32.38) 77 (39.49) 43	475 (45.50) 77 (39.49) 36	231 (22.13) 41 (21.03) 36	702 (67.24) 126 (64.62) 73	233 (22.32) 45 (23.08) 27	109 (10.44) 24 (12.31) 15	684 (65.52) 117 (60.00)	290 (27.78) 62 (31.79) 34	70 (6.70) 16 (8.21) 16	400 (38.31) 83 (42.56) 50	644 (61.69) 112 (57.44) 65	88 (8.43) 25 (12.82)	438 (41.95) 81 (41.54)	518 (49.62) 89 (45.64) 50
	humanities	43 (37.39)	(31.30)	(31.30)	(63.48)	(23.48)	(13.04)	(56.52)	(29.57)	(13.91)	(43.48)	(56.52)	(8.70)	(47.83)	(43.48)

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Table 4 (continued)

Characteristic							Religiou	s perspectiv	ve and prac	ctice, n (%)					
		R1: possiblity to pray and gather during the pandemic			R2: the place of worship conducted COVID-19 prevention control correctly			R3: social distancing in the place of worship make you feel safe from SARS-CoV-2 infection			RP1: p place o other tl	ay in the f worship han home	RP2: how often did you pray and gather in the place of worship during "new normal"		
		Y	NS	Ν	Y	NS	Ν	Y	NS	Ν	Y	Ν	A	0	NV
Occupation	Students	200 (30.12)	340 (51.20)	124 (18.68)	429 (64.61)	170 (25.60)	65 (9.79)	424 (63.86)	204 (30.72)	36 (5.42)	239 (35.99)	425 (64.01)	46 (6.93)	262 (39.46)	356 (53.61)
	Teacher	52 (30.95)	58 (34.52)	58 (34.52)	102 (60.71)	44 (26.19)	22 (13.10)	101 (60.12)	49 (29.17)	18 (10.71)	79 (47.02)	89 (52.98)	22 (13.10)	64 (38.10)	82 (48.81)
	Health practitioners	151 (39.53)	142 (37.17)	89 (23.30)	289 (75.65)	60 (15.71)	33 (8.64)	259 (67.80)	94 (24.61)	29 (7.59)	161 (42.15)	221 (57.85)	45 (11.78)	185 (48.43)	152 (39.79)
	Government and administration related job	14	9	10	23	7	3	23	7	3	8	25	5	8	20
	Others	(42.42) 41 (38.32)	(27.27) 39 (36.45)	(30.30) 27 (25.23)	(69.70) 58 (54.21)	(21.21) 24 (22.43)	(9.09) 25 (23.36)	(69.70) 59 (55.14)	(21.21) 32 (29.91)	(9.09) 16 (14.95)	(24.24) 46 (42.99)	(75.76) 61 (57.01)	(15.15) 5 (4.67)	(24.24) 55 (51.40)	(60.61) 47 (43.93)
Place of current	City	293 (31.07)	412 (43.69)	238 (25.24)	647 (68.61)	207 (21.95)	89 (9.44)	602 (63.84)	267 (28.31)	74 (7.85)	346 (36.69)	597 (63.31)	87 (9.23)	354 (37.54)	502 (53.23)
residence	Rural	165 (40.15)	176 (42.82)	70 (17.03)	254 (61.80)	98 (23.84)	59 (14.36)	264 (64.23)	119 (28.95)	28 (6.81)	187 (45.50)	224 (54.50)	36 (8.76)	220 (53.53)	155 (37.71)

* Religion was not included; A, always; N, no; NS, not sure; NV, never; O, occasionally; Y, yes.

Table 5

Results of multiple binary logistic regression analysis on factors significantly associated with attitudes, religious perspectives, and practice toward COVID-19

Variable	OR (95% CI)	Р
Attitude and practice		
A1: not sure if physical distancing is able to cut the spread of SARS-CoV-2 (vs. yes)		
Gender (female vs. male)	0.60 (0.36 - 0.99)	0.047
Occupation (government and administration related job vs. teacher)	0.20(0.08 - 0.49)	0.000
Occupation (government and administration related job vs. student)	0.19(0.06 - 0.58)	0.003
$\Delta 2$: not feeling anxious if being infected with SARS-CoV-2 (vs. ves)	0.55 (0.15 - 0.61)	0.014
Cender (female vs. male)	0.54(0.36 - 0.81)	0.003
Major of education (medicine related science vs. social science and humanities)	0.34(0.30-0.01) 0.29(0.12-0.69)	0.005
A2: not sure to feel anxious if being infected with SARS-CoV-2 (vs. ves)	0.25 (0.12 0.05)	0.005
Last education (high school vs. associate degree)	0.29 (0.09 - 0.88)	0.029
Last education (high school vs. undergraduate degree)	0.26 (0.08 - 0.79)	0.018
Last education (high school vs. master degree)	0.28 (0.10 - 0.80)	0.017
Place of current residence (city vs. rural)	0.56 (0.41 - 0.78)	0.001
A3: large-scale social restriction need to be re-implemented (vs. no)		
Gender (female vs. male)	0.48 (0.30 - 0.78)	0.003
AP1: always performing COVID-19 prevention in a crowded place (vs. no)		
Gender (female vs. male)	0.30 (0.14 – 0.67)	0.003
AP1: always performing COVID-19 prevention in a crowded place (vs. occasionally)	0.45 (0.20 0.72)	0.001
Blace of current residence (city vs. rural)	0.45(0.28 - 0.72)	0.001
AD2: always performing COVID-19 prevention after traveling or working outside (vs	0.02 (0.33 - 0.33)	0.044
never)		
Gender (female vs. male)	0.32 (0.12 - 0.84)	0.020
AP2: always performing COVID-19 prevention after traveling or working outside (vs.		
occasionally)		
Gender (female vs. male)	0.43 (0.26 - 0.69)	0.001
Religious perspective and practice		
R1: it is not possible to pray and gather during the pandemic (vs. yes)		
Gender (female vs. male)	2.41 (1.70 - 3.42)	0.000
Place of current residence (city vs. rural)	1.84 (1.31 – 2.59)	0.000
R1: not sure whether it is possible to pray and gather during the pandemic (vs. yes)	2.15 (1.01 2.00)	0.000
Gender (remaie vs. male) Major of education (medicine related science vs. science and technology)	2.15(1.01 - 2.80) 1.65(1.00 - 2.72)	0.000
Disce of current residence (city vs. rural)	1.03(1.00 - 2.73) 1.38(1.05 - 1.82)	0.049
R^{2} the place of worship is not conducted COVID-19 prevention control correctly (vs	1.56 (1.05 - 1.62)	0.020
ves)		
Last education (high school vs. master degree)	4.49 (1.11 - 18.20)	0.035
Occupation (government and administration related job vs. teacher)	0.26 (0.13 - 0.49)	0.000
Occupation (government and administration related job vs. other)	0.28 (0.14 - 0.55)	0.000
Place of current residence (city vs. rural)	0.56 (0.39 - 0.82)	0.003
R2: not sure whether the place of worship conducted COVID-19 prevention control		
correctly (vs. yes)		
Last education (high school vs. undergraduate degree)	0.31 (0.12 - 0.79)	0.014
Occupation (government and administration related job vs. teacher)	0.53 (0.29 - 0.97)	0.039
k3: social distancing in the place of worship make you reel safe from SAKS-COV-2		
Occupation (vs. 110)	0.26(0.11 - 0.62)	0.002
RP1: not going to pray in the place of worship other than home (vs. ves)	0.20 (0.11 - 0.02)	0.002
Gender (female vs. male)	5 88 (4 48 - 772)	0.000
Occupation (government and administration related job vs. health practitioners)	2.78 (1.06 - 7.24)	0.037
Place of current residence (city vs. rural)	1.54 (1.19 - 1.99)	0.001
RP2: never going to pray and gather in the place of worship during "new normal" (vs.	. ,	
always)		
Gender (female vs. male)	13.75 (8.64 - 21.87)	0.000
Occupation (government and administration related job vs. teacher)	0.15 (0.03 - 0.65)	0.012
RP2: never going to pray and gather in the place of worship during "new normal" (vs.		
occasionally)	4 52 (2 22 6 4 4	0.000
Genuer (remaie VS, male) Occupation (generoment and administration related ich ver health practitioners)	4.52(3.33 - 0.14)	0.000
Disce of current residence (city vs. rural)	2.74(1.00 - 7.08) 211(162 275)	0.038
	2.11 (1.05 - 2.75)	0.000

This information contained a brief introduction about the survey, voluntary nature of participation, declarations of anonymity and confidentiality, and the link of the online questionnaire. Persons who were of Indonesian nationality, aged 16 years or more, and willing to participate were directed to complete the survey.

2.2. Measures

The questionnaire consisted of three parts: demographics, attitudes and practices, and religious perspectives and practices. Demographic variables included age, gender, last education, major of education or current education, occupation, place of current residence (city vs. rural), and religion. Attitudes and practices toward COVID-19 were evaluated by questions A1 – A3 and AP1 – 2 (Table 1), while religious perspectives and practices were measured by questions R1 – R3 and RP1 – 2 (Table 1).

2.3. Statistical analysis

Frequencies of attitudes, religious perspectives, and practices were tabulated. Attitudes, religious perspectives, and practices of different persons according to demographic characteristics (excluding religion) were compared with the Chi-square test. The binary logistic regression method was used to identify factors associated with attitudes, religious perspectives, and practices. Data analyses were conducted with SPSS version 25 for Mac. A p-value of less than 0.05 (two-sided) was considered significant.

2.4. Ethical statement

This survey was approved by the Ethics Committee of Brawijaya University, Malang-Indonesia, with reference No. 062-KEP-UB-2020.

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Declaration of Competing Interest

None to declare.

Supplementary materials

Supplementary material associated with this article can be found, in the online version, at doi:10.1016/j.dib.2020.106277.

References

SA Quadri, COVID-19 and religious congregations: implications for spread of novel pathogens, Int J Infect Dis 96 (2020) 219–221, doi:10.1016/j.ijid.2020.05.007.

- [2] ZS Ulhaq, GV Soraya, Interleukin-6 as a potential biomarker of COVID-19 progression, Med Mal Infect 50 (4) (2020) 382–383, doi:10.1016/j.medmal.2020.04.002.
- [3] ZS Ulhaq, GV. Soraya, The prevalence of ophthalmic manifestations in COVID-19 and the diagnostic value of ocular tissue/fluid, Graefes Arch Clin Exp Ophthalmol 258 (6) (2020) 1351–1352, doi:10.1007/s00417-020-04695-8.
- [4] GV Soraya, ZS. Ulhaq, Crucial laboratory parameters in COVID-19 diagnosis and prognosis: an updated meta-analysis, Med Clin (Engl Ed) 155 (4) (2020) 143–151, doi:10.1016/j.medcle.2020.05.004.
- [5] GV Soraya, ZS. Ulhaq, Interleukin-6 levels in children developing SARS-CoV-2 infection, Pediatr Neonatol 61 (3) (2020) 253-254, doi:10.1016/j.pedneo.2020.04.007.
- [6] ZS Ulhaq, GV. Soraya, Anti-IL-6 receptor antibody treatment for severe COVID-19 and the potential implication of IL-6 gene polymorphisms in novel coronavirus pneumonia [Tratamiento con anticuerpos anti-receptor de IL-6 para COVID-19 grave y la posible implicación de polimorfismos del gen IL-6 en la nueva neumonía por coronavirus], Med Clin (Barc) (2020), doi:10.1016/j.medcli.2020.07.002.
- [7] ZS Ulhaq, GV Soraya, FA Fauziah, Test ARN para SARS-CoV-2 positivos recurrentes en pacientes recuperados y dados de alta hospitalaria [recurrent positive SARS-CoV-2 RNA tests in recovered and discharged patients], Rev Clin Esp (2020), doi:10.1016/j.rce.2020.06.012.
- [8] G Correia, L Rodrigues, M Gameiro da Silva, T Gonçalves, Airborne route and bad use of ventilation systems as nonnegligible factors in SARS-CoV-2 transmission, Med Hypotheses 141 (2020) 109781, doi:10.1016/j.mehy.2020.109781.