

Adaptation Strategy for Village Community Health Protocols in the Era of the COVID-19 Pandemic Study in Karama Village, Bulukumba Regency

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ABSTRACT

Learning to strengthen adaptation behavior to Covid-19 must be based on various cluster cultures. The Bulukumba District Government together with the Karama Village Head compiled guidelines to enrich experiences, raise awareness, change behavior, it is not enough to just make recommendations, appeals and directives, to decide on reducing the virus in these various clusters. This study aims to determine the Health Protocol Adaptation Strategy (*Indonesia: Protokol Kesehatan*) carried out by village heads in the COVID-19 Pandemic Era in research in Janggurara Village, Bulukumba Regency, Karama Village. This study used qualitative research methods. The reason for using a qualitative approach as a research approach is because the researcher sees that the nature of the problem under study can develop naturally according to the conditions and situations in the field. The results showed that the adaptation strategy of the village community Health protocol in Karama, Bulukumba Regency began with socializing with the community and needed a significant culture, meaning that adaptation of new habits through the Health protocol must continue to be carried out to create habits that start from oneself, and the government. The village has also pursued a strategy for adapting the Health protocol by providing several guidelines when outdoors, both as entrepreneurs, consumers and as customers.

Keywords: Health Protocol; Change Behavior; COVID-19; Raise Awareness

1. INTRODUCTION

For one year since the announcement of the first case of Coronavirus disease 2019 (Covid-19) in March 2020 [1], [2], the government has continued to take mitigative steps and optimal handling so that this virus does not further spread and cause fatalities [3], [4]. Various policy options were taken to block the rate of spread, ranging from the application of physical distancing [5], to Large-Scale Social Restrictions (PSBB) in various areas that were mapped as the epicenter of the spread [6].

Despite the various policy options taken, the Indonesian government, like governments in other countries, has not been able to accurately predict when this pandemic will end soon [7]. One of the biggest hopes that this pandemic can be contained soon is the discovery of a vaccine that is being pursued by various scientists around the world [8], [9]. However, as stated by the World Health Organization (WHO), vaccine findings are estimated to be carried out as early as 2021. This means that, at least until the end of this year, all people in the world, including Indonesia, must get used to living side by side and make peace with COVID-19. If a vaccine has not been found, the public

is encouraged to obey and follow the health protocols set by the government.

The COVID-19 pandemic that hit Indonesia over the past year has undeniably brought a significant impact on the economic sector. The implementation of PSBB to the Implementation of Restrictions on Community Activities (PPKM) directly or indirectly, has had an impact on the industrial sector which has to reduce production costs by closing factories, laying off employees, and carrying out layoffs, as a rational effort in responding to the decline in demand and income. This has a domino effect, such as an increase in the number of unemployed and a decrease in the quality of life of the community. The government must also spend a large amount of money from the state budget to provide stimulus to support the various affected sectors.

This condition has finally brought the Indonesian government to an understanding of implementing a new normal policy or a new normal order of life as a realistic response to the existence of COVID-19 and strengthened by the estimation of the discovery of a vaccine as the only weapon to deal with COVID-19 which cannot be found in a short time. because it is still in the development stage and requires time for testing. It can be concluded that the policy of the new

normal order of life emerged as a rational calculation of the forecast of national economic conditions, a compromise on the long enough time span until a vaccine is found, as well as a realistic understanding that it is very likely that COVID-19 will never disappear from the face of the earth, so people must explore the possibility of peaceful coexistence.

As stated by the Expert Team Leader of the Task Force for the Acceleration of Handling COVID-19 Wiku Adisasmita, the new normal itself is interpreted as a change in people's behavior to continue carrying out normal activities. New normal is also interpreted as a scenario to accelerate the handling of COVID-19 in health and socio-economic aspects. In the context of Indonesia [10], [11], the government announced plans for the implementation of the new normal policy by considering the analysis on epidemiological studies and the readiness of each region. The main principle of the new normal plan that will be implemented is the adaptation of new habits with a lifestyle that will lead to the creation of new people's lives and behaviors until a COVID-19 vaccine is found [12]. Furthermore, the implementation of the new normal policy will be accompanied by strict implementation of health protocols [13]. Guidelines for Adapting New Habits to Create a New Normal / New Normal Life Order The government has prepared several guidelines towards a new normal / new normal life order [14], [15], especially the Bulukumba Regency Government, where most of the population in Bulukumba Regency, Karama Village, the population works as a farmer and in the trade sector. By complying with the Health Protocols, everyone can play an active role in monitoring whether our workplace or the markets we visit have implemented it for the common good. For this reason, researchers are interested in conducting research on the Health Protocol adaptation strategy in Karama Village, Bulukumba Regency.

2. METHOD

The type of research used in this research is descriptive qualitative [16]–[18]. The focus of the research is the strategy of adapting the health protocol of the village community in Karama Village, Bulukumba Regency. The reason for using a qualitative approach as a research approach is because researchers see the nature of the problem being studied can develop naturally according to conditions and situations in the field. The qualitative research method is called the post-positivistic method because it is based on the philosophy of post-positivism. This method is also referred to as the artistic method, because the research process is more artistic (less patterned), and is referred to as the interpretive method because the research data is more comfortable with the interpretation of the data found in the field.

3. RESULT AND DISCUSSION

Karama is one of the villages/kelurahan in Bulukumba Regency, Bulukumba Regency, South Sulawesi province where most of the residents work as farmers, traders, private employees, and State Civil Apparatus (ASN). The Karama Village Government, Bulukumba Regency admits that the phenomenon of the Covid-19 pandemic is our common problem. This virus certainly changes our thinking as humans, changes the way we behave to carry out health protocols and this is not easy. Cultural strategies to change behavior are needed. So far, there have been appeals, instructions, recommendations, but has there been internalization of new cultural norms to change behavior?

Regarding the internalization of cultural norms [19], the government has made many calls and campaigns for behavior change to implement health protocols but that is not enough because culture has two characteristics, not easy to change and can be changed/constructed. With the Covid-19 pandemic, we must internalize new cultural values, but is it enough with appeals and instructions? Social media has broadcast health protocols and has been aggressive enough but internalized it so that changing behavior, there are cultural institutions, new regulations, teachings, and sanctions by the community themselves are needed.

Learning to strengthen adaptation behavior to COVID-19 must be based on a variety of cluster cultures [19]–[21]. So, the Bulukumba Regency Government together with the Village Head compiled a guide aimed at enriching experience, increasing awareness, changing behavior, it is not enough just to make recommendations, appeals and instructions, so to decide on reducing the virus in these various clusters.

In addition, an effective way to suppress the rate of transmission is to try to change behavior accompanied by cultural institutions and by coaching or mentoring with assistance [22], which in the current government program does not yet exist but what needs to be understood is that the nature of the change process is slow while the government wants it to be fast.

The COVID-19 virus is invisible/invisible, learn to accompany farmers, students, if it is invisible then it is not easy to enter the head, it is not easy to believe that the COVID-19 virus is near the community because it is invisible. So that the change in mindset can be effective through visualizing what is not seen with the adult learning method through video. So now how do we study the video together, we see what our behavior has been wrong so far and what is right, let us together justify our behavior or the norms that we now recognize, which we do together.

That changing behavior, enriching knowledge, instilling new beliefs, motivation cannot be like turning the palm of the hand, therefore educational methods must really be considered.

Preparation for adapting new habits that must be prepared, especially mentally to accept all habit changes that will occur. Everyone is asked to live a healthy life and pay attention to the Covid-19 prevention health protocols that have been echoed all this time. Prevention protocols that start from oneself include:

1. Always use a mask when traveling outside the house.
2. Understand cough etiquette.
3. Do not leave the house if you do not have an urgent need.
4. Diligently wash your hands with clean running water and soap or use a hand sanitizer with a minimum alcohol content of 60%.
5. Not exchanging things with other people at work, for example bringing your own plates, glasses, and spoons.
6. Keep your distance and avoid crowds

The following is a general Health protocol adaptation strategy that can be applied in realizing the adaptation of new habits at this time.

3.1. Adaptation Strategy to New Habits Create a New Normal / New Normal Life Order

The government, especially in Karama Village, has prepared several strategies for adapting the Health Protocol to the new normal / new normal life order and all can play an active role in monitoring whether the places of work / or markets visited have implemented the Health Protocols for the common good. Previously, the people of Karama Village only knew about Adaptation of New Habits through electronic media such as television or the internet. However, it is only limited to basic information regarding recommendations and prohibitions that must be carried out during the adaptation period of new habits without understanding the causes or deeper risks.

Therefore, the Village Government carried out a socialization strategy during the community. After the socialization regarding the Adaptation of New Habits, the community better understands the meaning, causes, risks, and solutions that must be faced during the adaptation period of the new habits. So that in the future they will be more concerned about themselves and others around them in complying with health protocols during the adaptation period of new habits. Analysis of the Results Obtained The results of the socialization on Adaptation to New Habits showed that the participants were quite enthusiastic in participating in the series of socialization activities carried out. This is indicated by the attitude of the community who pays attention to the delivery of material and dares to ask several questions, one of which is related to how to adapt to new habits during the COVID-19 pandemic which is still ongoing today with all the limitations experienced.

The following are some of the guidelines that have been issued by the local government, including:

Guide to adapting new habits in office and industrial workplaces. guidelines in the workplace refers to the Minister of Health Regulation no: hk.01.07/MENKES/328/2020 regarding guidelines for the prevention and control of corona virus disease 2019 (covid-19) in office and industrial workplaces in supporting business continuity in a pandemic situation. here are some adaptations of new habits in the established workplace:

1. At the entrance to the workplace, take temperature measurements using a thermo-gun. Before entering work, a COVID-19 risk self-assessment is applied to ensure that workers who will enter work are not infected with COVID-19.
2. Arrangement of working time is not too long or overtime, which will result in workers lack of time to rest which can cause a decrease in the immune system or body immunity.
3. For the shift work system, it is requested to eliminate shift 3, namely the working time starting at night until the morning, if possible.
4. If shift 3 is still applied, those who work are mainly workers aged less than 50 years.
5. Require workers to use masks since traveling to or from home, and while at work.
6. Regulate the nutritional intake of food provided by the workplace, choose fruits that contain lots of vitamin C such as oranges, guava, and so on to help maintain body resistance. If possible, workers can be given vitamin C supplements.

Facilitate a safe and healthy workplace, by ensuring the cleanliness of the workplace, providing more hand washing facilities with soap, and running water, providing instructions for the location of hand washing facilities, placing educational posters on how to wash hands properly and providing hand sanitizer with a minimum alcohol concentration of 70% in places where it is needed, such as entrances, meeting rooms, elevator doors, and so on.

Implement physical distancing in all work activities. Setting the distance between workers at least 1 meter in each work activity, by arranging work desks or workstations, setting chairs when in the canteen, and others.

Guide to Customs Adaptation in the Services and Trade Sector. The rules for Adaptation of New Habits for service and trade sector providers are regulated in the Circular Letter of the Minister of Health Number HK.02.01/MENKES/335/2020 concerning Protocols for Prevention of COVID-19 Transmission in the Workplace of the Service and Trade Sector (Public Area) in Supporting Business Continuity. The public also needs to know this protocol. For you it is also important to know this protocol because the public can also see whether service providers have implemented

COVID-19 transmission prevention rules based on new normal rules. The following are some adaptations of new habits in the service and trade sector stipulated in the Minister of Health:

For service and trade sector operators/business actors; (a) Regularly cleaning and disinfecting work areas and public areas, (b) providing adequate and easily accessible hand washing facilities for workers and consumers/business actors, (c) ensuring workers understand self-protection from COVID-19 transmission by clean and healthy living behavior (PHBS), (d) checking body temperature for all workers before starting work and consumers or business actors at the entrance. Workers with a temperature >37.30 degrees Celsius after two checks with five minutes, are not allowed to enter and are asked to carry out health checks, (e) require workers and visitors to wear masks to limit physical distance of at least 1 meter. And keep out the crowd.

For workers/consumers, what can be done is; (a) Make sure you are in good health before leaving for work. Workers who experience symptoms such as fever / cough / runny nose / sore throat are advised not to come to work and check themselves to health service facilities if needed, (b) Maintain hand hygiene by frequently washing hands with soap and running water, or using hand sanitizer, (c) Avoid hands touching the face area such as the eyes, nose or mouth, (d) Paying attention to maintaining a minimum distance of 1 meter when dealing with business actors or colleagues while on duty, (e) Using special work clothes and changing clothes when finished working, (f)) Use a mask when leaving and returning from work and while at work, (g) Immediately take a shower and change clothes before contact with family members at home. Clean cellphones, glasses, bags, and other items with disinfectant liquid.

For Consumers/Customers; (a) Always use a mask while in public areas, (b) Maintain hand hygiene by frequently washing hands with soap and running water or using a hand sanitizer. (c) Avoid touching facial areas such as eyes, nose, and mouth (d) Keep paying attention to maintaining a minimum distance of 1 meter from other people.

By implementing the Health protocol in various places, it can help reduce the number of Covid-19. If the new habit is not carried out in a disciplined manner or only carried out by a group of people, then this can become a threat of a second wave of epidemics. Old habits that are often carried out, such as shaking hands, kissing, kissing hands, crowding/clumping, lazy to wash hands must be abandoned because they support the transmission of Covid-19. People need to build a new normal life to be able to coexist with Covid-19 by having to be able to adapt to build a healthy living culture. People must maintain their behavior so that the transmission of the corona virus can decrease.

Because the corona virus is transmitted through humans.

4. CONCLUSION

Based on the results of the research in the field, the researcher can conclude that the strategy for adapting the Health protocol of the village community in Karama Village, Bulukumba Regency begins with conducting outreach with the community and also requires a significant culture, meaning that adaptation of new habits through the Health protocol must be continuously carried out in order to create a habit that begins from myself, and the village government has also sought a strategy for adapting the Health protocol by providing some guidelines when outside the room, both as a businessman, a consumer and as a customer.

REFERENCES

- [1] K. McIntosh, M. S. Hirsch, and A. Bloom, "Coronavirus disease 2019 (COVID-19)," *UpToDate Hirsch MS Bloom*, vol. 5, no. 1, 2020.
- [2] W. H. Organization, "Coronavirus disease 2019 (COVID-19): situation report, 73," 2020.
- [3] E. Beaunoyer, S. Dupéré, and M. J. Guitton, "COVID-19 and digital inequalities: Reciprocal impacts and mitigation strategies," *Comput. Human Behav.*, vol. 111, p. 106424, 2020.
- [4] Y. B. de Bruin *et al.*, "Initial impacts of global risk mitigation measures taken during the combatting of the COVID-19 pandemic," *Saf. Sci.*, vol. 128, p. 104773, 2020.
- [5] N. Islam *et al.*, "Physical distancing interventions and incidence of coronavirus disease 2019: natural experiment in 149 countries," *bmj*, vol. 370, 2020.
- [6] I. Suraya, M. I. Nurmansyah, E. Rachmawati, B. Al Aufa, and I. I. Koire, "The impact of large-scale social restrictions on the incidence of covid-19: A case study of four provinces in Indonesia," *Kesmas J. Kesehat. Masy. Nas. (National Public Heal. Journal)*, 2020.
- [7] E. Yong, "Our pandemic summer," *Atl.*, vol. 15, 2020.
- [8] A. J. Marian, "Current state of vaccine development and targeted therapies for COVID-19: impact of basic science discoveries," *Cardiovasc. Pathol.*, vol. 50, p. 107278, 2021.
- [9] C. D. Funk, C. Laferrière, and A. Ardakani, "A snapshot of the global race for vaccines targeting SARS-CoV-2 and the COVID-19 pandemic," *Front. Pharmacol.*, vol. 11, p. 937,

- 2020.
- [10] W. A. Zoghbi *et al.*, “Multimodality cardiovascular imaging in the midst of the COVID-19 pandemic: ramping up safely to a new normal,” *Cardiovasc. Imaging*, vol. 13, no. 7, pp. 1615–1626, 2020.
- [11] K. Keramidas *et al.*, “Global Energy and Climate Outlook 2020: A New Normal Beyond Covid-19,” *Luxemb. Publ. Off. Eur. Union*, 2021.
- [12] S. Mulianingsih, “Public Service Management in the New Habit Adaptation Era in Indonesia,” *DEGRES*, vol. 19, no. 2, pp. 105–115, 2020.
- [13] C. Houghton *et al.*, “Barriers and facilitators to healthcare workers’ adherence with infection prevention and control (IPC) guidelines for respiratory infectious diseases: a rapid qualitative evidence synthesis,” *Cochrane Database Syst. Rev.*, no. 4, 2020.
- [14] K. H. D. Tang, “Controversies of the post-lockdown new normal-it may not be entirely normal,” *Curr. Res. J. Soc. Sci. Human.*, vol. 4, p. 7, 2021.
- [15] M. Faisal, M. Suparno, and A. Budianto, “The Effectiveness Of Implementation Of Regulation Of The Mayor Of Surabaya Number 33 Of 2020 Article 16 Concerning New Normal Order Guidelines For Business Activities In Stores, Swalayan Stores, And Shopping Centers On The Condition Of The 2019 Corona Virus Disease Pandemic (COVID-19),” in *Proceeding International Conference of Innovation Science, Technology, Education, Children and Health*, 2021, vol. 1, no. 1, pp. 40–46.
- [16] V. A. Lambert and C. E. Lambert, “Qualitative descriptive research: An acceptable design,” *Pacific Rim Int. J. Nurs. Res.*, vol. 16, no. 4, pp. 255–256, 2012.
- [17] U. Kemparaj and S. Chavan, “Qualitative research: a brief description.,” *Indian J. Med. Sci.*, vol. 67, 2013.
- [18] M. Sandelowski, “What’s in a name? Qualitative description revisited,” *Res. Nurs. Health*, vol. 33, no. 1, pp. 77–84, 2010.
- [19] S. Gavrillets and P. J. Richerson, “Collective action and the evolution of social norm internalization,” *Proc. Natl. Acad. Sci.*, vol. 114, no. 23, pp. 6068–6073, 2017.
- [20] U. Ahmad Qadri, M. binti abd Ghani, T. Parveen, F. A. K. Lodhi, M. W. J. Khan, and S. F. Gillani, “How to improve organizational performance during Coronavirus: A serial mediation analysis of organizational learning culture with knowledge creation,” *Knowl. Process Manag.*, vol. 28, no. 2, pp. 141–152, 2021.
- [21] J. Zhang, C. Xie, J. Wang, A. M. Morrison, and J. A. Coca-Stefaniak, “Responding to a major global crisis: the effects of hotel safety leadership on employee safety behavior during COVID-19,” *Int. J. Contemp. Hosp. Manag.*, 2020.
- [22] A. Sood *et al.*, “Exiting Medicine Faculty Want the Organizational Culture and Climate to Change,” *Chron. Mentor. Coach.*, vol. 4, no. SI13, p. 359, 2020.