

# Review on the Current Covid-19 Coping Mechanism in Indonesia

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## ABSTRACT

As we know, the coronavirus spreads from person to person and attacks mainly a person's respiratory tract and causes other diseases to worsen. Various preventive measures were also taken such as large-scale social restrictions, new ethics in society and certain restrictions. With this paper, we re-discuss the handling of covid-19 in Indonesia which has resulted in various existing solutions such as improving government performance or changes that the community must make in order to adapt in this difficult time.

**Keywords:** *Coronavirus, Social restrictions, vaccine.*

## 1. INTRODUCTION

Coronavirus disease 2019 (COVID-19) is defined as an illness caused by a novel coronavirus called severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2; formerly called 2019-nCoV). The first case was identified in Wuhan City, Hubei Province, China[1]. The virus is spread through direct contact with the respiratory of droplets of infected persons (produced by coughing and sneezing) and contact with the things that are contaminated with the virus and also can be spread through person to person. The virus may live on the surface for several hours but the easy disinfectant can kill the virus[2]. People that are infected by the virus will show symptoms around two to fourteen days. A person that is infected by the virus is contagious to the other person and also they have a chance to infect the other person that is close to the infected person and their remains to be contagious for around ten to twenty days based on their immune system and their severe illnesses[3]. According to Rothan and Byreddy [4] In cases of symptomatic infection, clinical manifestations usually appear immediately less than a week after the onset of infection. The most common clinical symptoms of infection are: fever, dry cough, runny nose, fatigue, and respiratory problems. Other symptoms that have been reported: increased sputum, headache, haemoptysis, diarrhea, and lymphopenia. From the infection cases, 75% people started feeling the short breath and pneumonia of COVID 19. According to Velavan and Meyer[4] The typical signs of COVID-19 pneumonia include decreased oxygen saturation, blood gas deviation, and lung tissue damage. Radiology of the lungs via X-rays and imaging techniques (Chest CT scan) looks typical: ground glass, uneven tissue consolidation, and alveolar exudate. Other diagnostic indicators are the signs of inflammation, which are seen through lymphopenia and an increase in C-

reactive protein and proinflammatory cytokines.

As we know, COVID-19 is a disease that is caused by 'novel coronavirus' that is very contagious and can be spread through person to person. Social distancing and screening policies with follow-up treatment, isolation, contact tracing and quarantine are two strategic policies in controlling epidemic disease[4].

Social distancing policies limit crowds and close contact of residents; closing down offices, workplaces, and schools; and enforcing strict health protocols in day-to-day activities. Social distancing policies, often referred to as Large-Scale Social Restrictions (PSBB), have long-lasting negative socio-economic and health service impacts. However, the PSBB policy is considered cost-effective if it is carried out at the right time and lasts for a limited time that matches the economic capacity of the government and society [4].

As a response to prevent the pandemic of COVID-19, Indonesia Government on March 13, 2020 formed a BNPB( COVID-19 Response Acceleration Task Force) in order to respond COVID-19 Pandemic. BNPB is taking two strategic policies in order to prevent this pandemic. The first one is PSBB(Large-Scale Social Restrictions) with the aim of limiting the spread of the virus. This policy includes the restriction on population activities such as crowd gathering, economic activities, population mobility, closure of workplaces and schools, crowd gathering restriction and public health protocol such as physical distancing, wearing a mask and washing hands frequently using a soap or using a hand sanitizer frequently. And the second is Periodic screening through testing with the aim of early detection of cases, followup treatment and case isolation, search for contacts and quarantine for those with a history of contact[4].

The COVID-19 and PSBB bring impact in social economics, the government of Indonesia realizing it and

preparing social assistance programs for affected populations in Indonesia. Social assistance in the form of money or basic necessities like rice, canned food, instant noodles, cooking oil, etc is provided to families that got impact from the pandemic of covid 19 and also underprivileged families through RT and RW[4].

We have observed that in one sub-district in Salatiga, one underprivileged family receives 600,000 rupiah per month for three months, starting in April 2020. Meanwhile, other underprivileged families do not receive money but they receive staple food [4].

In May 2020 the government gradually began to loosen up the PSBB in order to build the economic social after the effect of the epidemic of COVID-19 and also loosen the social distancing while still enforcing the health protocol to stop the pandemic of COVID-19. The easing of the social distancing policy is implied by the government policy to enter the stage of the 'New Normal' period, also known as 'Adapting to New Habits. However, there are still some people who misunderstand that the new normal is back to normal before the epidemic[4].

The adaptation of cautious behavior towards viral transmission is carried out by implementing health protocols : 1. always keep hands in clean condition by washing a hand frequently with soap or using hand sanitizer after touching things, 2. never touching a face if your hands are not clean, 3. applying etiquette when you are coughing or sneezing in order to not expose the virus to the other people, 4. wearing a mask when you are going outside to do activity, 5. physical distancing at least 2 meters, 6. when you have symptoms of COVID-19 try to isolate yourself independently, 7. try to maintain your immune system[4].

**2. METHOD**

This study uses descriptive research, a sample of 1,200 respondents was selected at random from a random sample collection of face-to-face surveys conducted by the Indonesian Survey Institute in the range of March 2018 to June 2021[5]. Those who were successfully interviewed in the duration of the survey were 1,200 respondents[5].

Assuming a simple random sampling method, a sample size of 1,200 respondents has an error tolerance (margin of error or MoE) of about ±2.88% at a 95% confidence level [5]. The sample comes from all provinces which are proportionally distributed.

The form of the results of this survey is measured by the respondents answers which are 5 choices from each of the questions given.

KATEGORI	SAMPEL	POPULASI	KATEGORI	SAMPEL	POPULASI
<b>GENDER</b>			<b>AGAMA</b>		
Laki-laki	50.2	50.3	Islam	88.3	87.2
Perempuan	49.8	49.7	Lainnya	11.7	12.8
<b>DESA-KOTA</b>			<b>ETNIS</b>		
Pedesaan	50.2	50.2	Jawa	40.5	40.2
Perkotaan	49.8	49.8	Sunda	16.1	15.5
<b>USIA</b>			Batak	3.6	3.6
≤21 tahun	12.2	12.7	Madura	3.2	3.0
22 - 25 tahun	9.8	10.1	Betawi	3.1	2.9
26 - 40 tahun	36.8	37.0	Mnang	2.7	2.7
41 - 55 tahun	25.5	25.0	Bugis	2.8	2.7
> 55 tahun	15.6	15.2	Melayu	2.3	2.3
			Lainnya	23.7	27.1

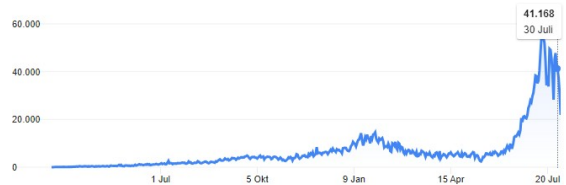
**Figure 1. Validation: Sample vs Population**

It can be seen from Figure 1, the samples were taken from various origins ranging from differences in Gender, Rural to City, Age, Religion and Ethnicity. Then it can also be seen from Figure 2 below, the category of the province of origin of the respondents is taken from different provinces so that this survey can be evenly distributed in each region. Due to the wide social restrictions imposed, this survey is very difficult to carry out, so most of these surveys use indirect contact, namely telephone.

KATEGORI	SAMPEL	POPULASI	KATEGORI	SAMPEL	POPULASI
<b>PROVINSI</b>			<b>PROVINSI</b>		
ACEH	1.9	1.9	NUSA TENGGARA BARAT	1.9	1.9
SUMATERA UTARA	5.5	5.5	NUSA TENGGARA TIMUR	2.0	2.0
SUMATERA BARAT	2.0	2.0	KALIMANTAN BARAT	1.8	1.8
RIAU	2.3	2.3	KALIMANTAN TENGAH	0.9	0.9
JAMBI	1.3	1.3	KALIMANTAN SELATAN	1.5	1.5
SUMATERA SELATAN	3.1	3.1	KALIMANTAN TIMUR	1.3	1.3
BENGKULU	0.7	0.7	KALIMANTAN UTARA	0.2	0.2
LAMPUNG	3.2	3.2	SULAWESI UTARA	1.0	1.0
KEPULAUAN BANGKA	0.5	0.5	SULAWESI TENGAH	1.1	1.1
KEPULAUAN RIAU	0.7	0.7	SULAWESI SELATAN	3.4	3.4
DKI JAKARTA	4.0	4.0	SULAWESI TENGGARA	0.9	0.9
JAWA BARAT	18.1	18.1	GORONTALO	0.4	0.4
JAWA TENGAH	13.6	13.6	SULAWESI BARAT	0.5	0.5
D I YOGYAKARTA	1.5	1.5	MALUKU	0.6	0.6
JAWA TIMUR	15.8	15.8	MALUKU UTARA	0.4	0.4
BANTEN	4.5	4.5	PAPUA BARAT	0.3	0.3
BALI	1.6	1.6	PAPUA	1.2	1.2

**Figure 2. Validation: Sample vs Population (2)**

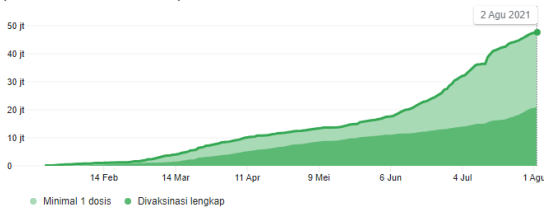
**3. RESULT AND DISCUSSION**



**Figure 3. Covid data from July 2020 – July 2021**

As we can see from Figure 3, the number of covid increased from 2020 to 2021. COVID-19 is an infectious disease caused by the corona virus. The cause of this virus quickly damages the body's organs, especially the lungs. At the beginning of the pandemic, pneumonia was considered a hallmark of COVID-19, but later many cases of asymptomatic infection were recognized, especially in children, and several cases with symptoms outside the airways were reported (Velavan & Meyer, 2020). Estimates report about 80% of cases of infection with mild or asymptomatic symptoms, 14% with severe symptoms, and 6% with symptoms of critical illness (Anderson et al., 2020). People with COVID-19 feels symptoms such as fever, dry cough, runny nose, fatigue, and respiratory problems. Other symptoms that have reported is increased sputum, headache, haemoptysis, diarrhea, and lymphopenia

(Rothan & Byrareddy, 2020). The number of COVID-19 continues to increase for several reasons. The trend of increasing COVID-19 cases in Indonesia is not only caused by the new variant, but also by the fact that people are starting to ignore health protocols. The current spike in Corona cases is because the community is holding a gathering after the tightening of Eid al-Fitr. Another factor that influenced the surge in Corona cases was that there was a very significant transmission in several areas. In addition, the entry of the corona variant from India to Indonesia which spread more quickly. People who are starting to ignore health protocols also have an impact on the spike in Corona cases. When the health protocol starts to loosen, that's where the new variant spreads more quickly (Kemenkes, 2021).



**Figure 4.** Vaccine Data

Figure 4 Shows that the government has started the COVID-19 vaccination program as an effort to deal with the pandemic since January 13, marked by the injection of the first vaccine for President Joko Widodo. This vaccination program is given to support efforts to achieve collective immunity (herd immunity), targeted vaccination reach more than 181 million Indonesians in the shortest possible time, which is the government's target for 2021. However, with the government's target in carrying out the vaccination program, this vaccination program has become a very complex program and is not easy to implement. Requires good government capacity and readiness from any side. This also becomes difficult because there must also be adequate availability of vaccines that have not been sneeze, and seek treatment when they have complaints that match the symptoms of COVID-19 or called early detection and able to provide domestically produced vaccines.

In addition, when the vaccination program has started, it turns out that there are still many people who are reluctant to be vaccinated. The reason for those who are still reluctant to be vaccinated is because most of them are afraid of the side effects of the vaccine itself (Djayadi). In addition, the second most common reason is that they consider vaccines to be ineffective in preventing the transmission of Covid-19. There are also people who feel they are healthy so they don't need vaccines. Many people conclude that kind of thing and finally decide not to get vaccinated.

As for solutions to related problems, adequate socio-political support from all elements of the state is also needed for the success of this vaccine program. In addition, with the complaints of the public who decided not to vaccinate for various reasons, perhaps the government

could provide a more appropriate appeal to the community so that people believe in the purpose of this vaccine and want to vaccinate. More precise checks are also needed in the distribution of vaccines by checking that the distribution of vaccines is not fake or corrupted. In order to accelerate the goal of the vaccine program to reach the target of reaching more than 181 million Indonesians in the shortest possible time, this solution can be implemented. To reduce COVID-19 cases, the distribution of vaccines can also be done appropriately to people who need it first. The public must also have self-awareness to carry out basic protection which consists of washing hands regularly with alcohol or soap and water, keeping a distance from someone who has symptoms of coughing or sneezing, practicing cough etiquette or isolation. All individuals who are symptomatic and have been in contact with patients who are positive for COVID-19 must immediately go to the hospital and check their condition (World Health Organization, 2021).

#### 4. CONCLUSION

In response to the current handling of Covid-19, it turns out that the handling is still not optimal. The target of Indonesians being vaccinated is 181 million people, while in 2021 it is still one quarter of the target, which is 24.49%, therefore more government performance is needed. The distribution of effective and targeted vaccines, appeals from the government and vaccines that have been tested for authenticity affect the handling of COVID-19. To deal with COVID-19, not only the government's performance, but also we need people who follow the rules given by the government in this large-scale social restriction such as taking care of themselves by using masks in activities outside the home, washing hands with soap, using hand sanitizers or spraying alcohol and disinfectant.

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