

COMMUNITY PARTICIPATION IN THE IMPLEMENTATION OF POLICY TO PREVENT AND REDUCE THE POSITIVE RATE OF COVID 19 IN THE PERIOD NEW ADAPTATION (NEW NORMAL) IN THE CITY OF PADANG IN 2021

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ABSTRACT

The low level of community participation in preventing and decreasing the positive rate for COVID-19 since this disease only appeared in the city of Padang in early March 2020 until the new adaptation period (new normal) people's ignorant attitude, unwilling to maintain social distancing, physical distancing, lazy To do hand washing with soap or not wanting to wear a mask is an unsolved problem at this time in the city of Padang. This study uses a descriptive method which was conducted in March – November 2021 in the city of Padang. The sampling technique used purposive sampling technique so that the number of samples in this study was 60 respondents. The results showed that 55.8% of respondents avoided shaking hands, respondents' opinions about the effectiveness of running procedures to avoid crowds were 56.3% and respondents' opinions about the reasons people did not comply in carrying out health care programs were mostly the price of masks, face shields, hand sanitizers or PPE. Others tend to be expensive, which is 66.7%. While the responses of respondents to the community infected with Covid 19 were mostly close people, neighbors and their environment providing support, namely 86.7%. It is hoped that the government, both at the city and regional levels, can increase public participation in health protocols through education in community action movements to break the COVID-19 chain.

Kata Kunci: Community participation, Covid-19, Health Protocol.

INTRODUCTION

Disease is a pathological condition in the form of functional and/or morphological abnormalities of an organ and/or tissue of the body. (Achmadi). The environment is everything that is around it (living, inanimate, real, abstract) and the atmosphere that is formed due to the interaction between the elements in nature. (Sumirat'). Environmental-Based Disease is a pathological condition in the form of functional or morphological abnormalities of an organ caused by human interaction with everything around it that has the potential for disease. Disease is a pathological condition in the form of functional and/or morphological abnormalities of an organ and/or body jar (Achmadi). everything that is around it (living, inanimate, real, abstract) and the atmosphere that is formed because of the interaction between the elements in nature. (Sumirat'). Environmental-Based Disease is a pathological condition in the form of abnormal function or morphology of an organ of the body caused by human interaction with everything around it that has the potential for disease.

Corona virus Diseases 19 (Covid-19) is an environment-based disease caused by Novel Coronavirus (2019-nCoV) which is a new type of virus, with symptoms of acute respiratory disorders such as fever, cough and shortness of breath to severe cases causing pneumonia, respiratory syndrome acute, renal failure and even death.

The spread and addition of Covid-19 cases globally was quite fast, the initial handling of cases began with the announcement by the President of the Republic of Indonesia, Mr. Joko Widodo, in early March 2020, cases number 1 and number 2 in our country. Furthermore, the Padang City Government responded to this condition through massive socialization about COVID-19 to all levels of society through print and electronic media. Over time, Covid-19 colored life in Padang City, after the Mayor of Padang, Mr. Mahyeldi Ansyarullah, announced an extraordinary event (The outbreak of covid-19 cases which was the first case, which was followed by the addition of fluctuating covid-19 cases until August 2020 in a span of 6 (six) months with a total of 920 confirmed cases in Padang City.

Based on this problem, the authors are interested in taking the title of the study: "Public Participation in Reducing the Positive Rate of Covid 19 in the City of Padang".

The purpose of this research is to realize research activities in the health sector that are capable of being competitive and innovative at the National and Regional levels. This research was carried out based on the research strategic plan of the Poltekkes Kemenkes Padang in 2020-2024, where the results of this research will be in line with the research policies of the Poltekkes Kemenkes Padang which are focused on community-based environmental Health Technology, with topics covering environmental-based diseases and Health Promotion and Community Empowerment.

METHODS

This study uses a descriptive method, which is finding facts with interpretation by accurately describing the nature of several group or individual phenomena derived from the findings. The sampling technique in this study was purposive with sample criteria, namely the Padang City Community representing the three Andalas, Kuranji, and Surau Gadang sub-districts, active Covid 19 practitioners at the village level and active Covid 19 practitioners at the Padang City level. This research was conducted in March – November 2021 in the city of Padang so that a total sample of 60 respondents was obtained. Data analysis is presented in the form of univariate analysis and the data is processed computerized using SPSS 24.

RESULT

Based on Community Behavior in Carrying Out Health Care Programs, Padang City Community Opinions about the effectiveness of Health Care Programs, Respondents' Opinions about the Reasons for Disobedient People in Carrying Out Health Care Programs and Respondents' Responses to Communities Infected with Covid 19, the following results were obtained:

Table 1

Variable	Score	%
Community Behavior in Implementing Health Protocols		
Wearing Masks	256	85,3
Using Hand Sanitizers	212	70,7
Washing hands for 20 seconds with soap	200	66,7
Avoid shaking hands	134	55,8
Avoiding crowds	176	58,7
Maintain a minimum distance of 1 m from other people when outside the house	211	70,3
Public opinion of Padang City about the effectiveness of health protocols		
Wearing Masks	256	85,3
Using Hand Sanitizers	232	77,3
Washing hands for 20 seconds with soap	197	65,7
Avoid shaking hands	185	61,7
Avoiding crowds	169	56,3
Maintain a minimum distance of 1 m from other people when outside the house	196	65,3
Respondents' opinions about the reasons people do not comply with health protocols		

Prices of masks, face shields, hand sanitisers or other PPE tend to be expensive	40	66,7
The work is becoming It is difficult if you have to implement Health Protocols properly	28	46,7
The apparatus or leadership does not set a good example	12	20
Follow others	4	6,7
There are no sanctions if you do not follow good health protocols	24	40
Maintain a minimum distance of 1 m from other people when outside the household	4	6,7
Respondents' responses to Communities Infected with Covid 19		
Close people, neighbors and their environment provide support	52	86,7
No response, (does nothing)	4	6,7
Isolate, (gives negative stigma)	4	6,7
Health Protocols are carried out strictly in the environment	20	33,3

Based on the table above, 55.8% Respondents Avoid Shaking Hands, Respondents' Opinions About The Effectiveness Of Running Health Protocols Avoiding Crowds As Much As 56.3% And Respondents' Opinions About The Reasons For People Who Disobeyed In Running Health Protocols Most Are The Prices Of Masks, Face Shields, Hand Sanitizers Or Other PPE Tends To Be Expensive, That's 66, 7%. While the responses of respondents to the community infected with Covid 19 were mostly close people, neighbors and their environment providing support, namely 86.7%.

DISCUSSION

The results of this study show that 55.8% of respondents avoid shaking hands, respondents' opinions about the effectiveness of running health care programs to avoid crowds are 56.3% and respondents' opinions about the reasons why people don't comply in carrying out health care programs are the prices of masks, face shields, hand sanitizers Or other apds tend to be expensive, which is 66.7%. While the responses of respondents to the community infected with Covid 19 were mostly close people, neighbors and their environment providing support, namely 86.7%. This result is in line with the study conducted by Lim et al (2020) on community compliance in the application of precautionary standards which found that 53.5% of the total 332 respondents were obedient in the use of PPE. In addition, research conducted by Almutairi et al (2020) found that during the COVID-19 pandemic, 53.3% did not comply with physical distancing behavior.

According to WHO in Nasronudin (2007), universal precautions are guidelines established by the Centers for Disease Control and Prevention CDC Atlanta and the Occupational Safety and Health Administration (OSHA), to prevent the transmission of various diseases that are transmitted. Vaismoradi et al (2020) in their research also said that public compliance with the use of safety precautions is relevant to breaking the COVID-19 chain. Compliance with the use of personal protective equipment during the COVID-19 pandemic remains the main concern, the use of personal protective equipment in accordance with standards is one of the efforts to prevent virus transmission (Song et al, 2020). Compliance with health protocols is one part of individual safety (Panayi et al, 2020).

Community compliance in implementing universal precautions plays a role in reducing the incidence of COVID-19 infection (Song et al, 2019). Non-compliance in implementing health protocols, PPE must be identified and analyzed to provide targeted training to the community on the correct and indicated use of PPE (Panayi et al, 2020). Communities can protect themselves from contact with COVID-19 patients if they have knowledge of the process and proper barrier protection (Potter, 2010). If people have low compliance with the use of personal protective equipment, it can have a negative impact on themselves and others (Porto et al, 2016).

The importance of strict infection control measures for the community, not only to reduce transmission but also to limit public anxiety, which will result in better compliance, but also reduce the risk of transmitting COVID-19 to their own families (Temsah et al, 2020). People who do not comply with the use of personal protective equipment have a 30% chance of developing an infection, which means at least one out of every three people who do not comply with PPE will be infected with COVID-19 (Asaad et al, 2019).

Community participation is the active involvement of the community in the process of making and implementing decisions (WHO, 2002). Viewed from the health context, participation is the participation and partnership of the community and facilitators (government, NGOs, development partners) in decision making, planning, implementation, monitoring and assessment of health activities and programs, as well as obtaining benefits from their participation in the context of building community independence (Permenkes No. 65/2013).

According to Pretz J. (1995 in Agus, 2010), there are seven characteristics of the typology of participation, which are successively closer to the ideal form, namely: 1) Passive or manipulative participation, that is, people receive notifications of what is and has happened; 2) Informative participation, ie the community only answers questions for the project but is not given the opportunity to be involved; 3) Consultative participation, that is, the community participates in consultation while others are only listeners; 4) Participation incentives, namely the community provides sacrifices and services to obtain rewards; 5) Functional participation, ie the community forms groups as part of the project; 6) Interactive participation, where the community plays a role in the analysis process for planning activities and establishing institutions; 7) Independent (self mobilization), namely the community takes their own initiative freely to change the system that is upheld. And there are other forms of community participation, namely: 1) Co-option; 2) Co-operation; 3) Consultation; 4) Collaboration; 5) Co-learning; 6) Collective actions.

The continuous increase in confirmed cases has made people aware of how to prevent COVID-19. This public awareness will make the transmission of this disease decrease and it is hoped that there will be no more new cases. Prevention of COVID-19 can be done independently by the community in their respective homes and is expected to be done with their own awareness. The development of social media and education in the community can be a positive medium for the community to prevent COVID-19 (Lenny and Erika, 2020).

In maintaining a person's health, there are two main factors that affect health, namely behavioral factors and non-behavioral factors. According to B Bloom, there are three domains of behavior, namely knowledge, attitude, and practice (Notoatmodjo, 2014 in Jesica and Rizma, 2020). Meanwhile, according to L. Green, health behavior is influenced and determined by three factors, namely predisposing factors, enabling factors, and reinforcing factors (Notoatmodjo, 2014 in Jesica and Rizka, 2014). 2020). When viewed from predisposing factors, the community has sociodemographic factors such as differences in age, gender, education, occupation, educational/occupational background and area of origin. The description of these sociodemographic characteristics can affect people's behavior and the outcomes of public health (Widayati, 2012 in Jesica and Rizma, 2020).

Knowledge is the ability to receive, retain, and use information, which is influenced by experience and skills. Most of the knowledge a person has comes from education, both formal and informal, personal experience and other people, the environment, and the mass media (Siltrakool, 2012 in Jesica and Rizma, 2020).

Bloom's taxonomy theory which has been revised especially in the cognitive domain by Anderson and Krathwohl divides knowledge into six levels, namely remembering, understanding, applying, analyzing, evaluating, and creating. (create). This taxonomic concept describes a higher pattern of thinking at a higher level of knowledge. At the third level in the form of applying, cognitive processes use a procedure to solve problems. According to

Notoatmodjo (2014 in Jesica and Rizma, 2020), knowledge is influenced by one's experience and the environment which can then be expressed and believed to give rise to motivation.

In theory, a person's level of education will affect his level of knowledge. If the level of education and knowledge is good, the behavior will also be good (Lenny and Erika, 2020). However, it is also possible to find people with high education but the behavior of the level of prevention of COVID-19 is still lacking and conversely, education is low but the level of education is good. In addition to education, there are other factors that can influence a person in preventing disease, such as gender. Based on research (Central Bureau of Statistics, 2020 in Lenny and Erika, 2020) it is explained that women tend to be better at implementing COVID-19 prevention than men. In addition, work also affects, for example housewives with low levels of education but high prevention because they aim to protect their families.

Efforts to prevent COVID-19 can be seen from a person's attitude towards the infection. The first attitude assessment is to ask directly about the attitude that papa should have in responding to news about covid-19. The next assessment of the attitude component is to ask whether with the Covid-19 case, the respondent has increased his efforts in maintaining personal health (Jesica and Rizma, 2020).

According to Noatmodjo, knowledge is a cognitive domain that is very influential in shaping one's actions. Acceptance of new behavior will be more lasting if it is based on knowledge, while the behavior will not last long without being based on knowledge (Silalahi, 2013 in Jesica and Rizma, 2020). A new behavior is formed, especially in adults, starting in the cognitive domain in the sense that the subject knows in advance about the stimulus in the form of material or external objects, giving rise to new knowledge and will be formed in attitudes and actions. Patients' knowledge about preventing COVID-19 by complying with the use of masks has an important role in anticipating repeated incidents. Patients must recognize, study, and understand all aspects of the COVID-19 disease including signs and symptoms, causes, triggers, and management. Knowledge has a close relationship with the decisions that will be taken, because with knowledge a person has a basis for making choices (Prihantana, et al, 2016 in Devi and Nabila, 2020).

According to the Head of the Tambun Health Center in Bekasi Regency, Arie M. Noer, the participation of the Grand Wisata residents can be a role model for the community in breaking the chain of the spread of the COVID-19 virus. In Grand Wisata, a Covid-19 Task Force was formed to handle positive cases of COVID-19 in the Grand Wisata environment. This group took the initiative to find and record residents who had contact with patients and ensured that ODPs did not leave their homes at all. During monitoring the task force team ensures food supplies for people under monitoring (ODP) so that OPD feel protected and comfortable because their food supply is always available and makes other residents feel safe. Not only ensuring that residents suspected of being exposed to COVID-19 self-isolate, residents also took the initiative to make masks. In addition, they also carry out environmental disinfection independently twice a day (Sri, 2020).

The Mayor of Padang, Hendri Septa, said that to overcome and end the spread of COVID-19, cooperation and support from various parties were needed, including the involvement of ustadz, ulama, and religious leaders. Currently the City of Padang is at Level 2 status, it requires the achievement of COVID-19 vaccination above 70 percent. If it is out of PPKM Level 2, it will provide flexibility in activities (Rahma, 2021).

The Mayor of Padang also said that monitoring was carried out on the adequacy of the Bed Occupancy Rate (BOR), a significant decrease in active cases, and the achievement of vaccinations above 50 percent of the total population targeted for vaccination. The role of the Covid-19 Task Force for Urban Villages throughout the city of Padang which consists of the Lurah along with RW/RT, Bhabinkamtibmas, Babinsa, LPM and all community components so that during PPKM Level 4 they can carry out isolation and checks for people who enter or

come to their respective neighborhoods with mandatory show some requirements. The Wako also continued, during the checks in several urban villages, he had asked the Kelurahan Covid-19 Task Force to carry out their duties according to the fixed procedures (protap) determined according to the Mayor's SE. Likewise at the border post, BPBD personnel are still asked to supervise people entering and leaving the city of Padang (Noli, 2021).

CONCLUSION AND SUGGESTION

Based on the results of the study, it can be concluded that there is still a lack of community participation in the implementation or implementation of the COVID-19 health protocol in the new normal period of the city of Padang. It is hoped that the government, both at the city and regional levels, can increase public participation in health protocols through education in community action movements to break the COVID-19 chain.

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