Research Article

Community Compliance in Implementing 5M COVID-19 Prevention in Kampung Tengari, Praya City

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ABSTRACT

Background: COVID-19 is a disease caused by the SARS-CoV-2 virus, which has spread worldwide. Many people need to be made aware of the risks of COVID-19 transmission and the advantages of implementing the 5M health protocol. People's disobedience is a daily occurrence that is accepted in the environment. This noncompliance has accelerated the spread of the virus, increasing the number of positive citizens and the death toll. This research aims to calculate the main health issues that should be prioritized.

Method: This community diagnosis used the Hanlon method, which employed a descriptive study design with a quantitative approach. The total sampling technique was used to determine the sample size of 78 people.

Results: The issue in RT 07 Kampung Tengari, Praya City, is that many people still need to be more compliant in implementing the 5M COVID-19 prevention strategy.

Conclusion: Implementing the 5M strategy within society is currently at a moderate level and requires further education or counseling to enhance compliance.

Keywords: Health protocol; COVID-19; Compliance; Community diagnosis

INTRODUCTION

COVID-19 is an infectious disease caused by the SARS-CoV-2 virus. The first outbreak of COVID-19 occurred in Wuhan, China, in December 2019 and was declared a pandemic. COVID-19 can be transmitted to others through droplets from an infected person.[1] WHO reported COVID-19 as a pandemic when there were 125,600 cases in 118 countries and regions worldwide. On July 15, 2020, there was a drastic increase in cases to 13,150,645, with a confirmed number of 185,836 and a death toll of 574,464.[2] After the declaration of COVID-19 as a pandemic, a global health emergency was imposed and called for action to break the chain of transmission internationally. The spread of this disease is rapid and is

characterized by an increasing number of cases and deaths. The number of COVID-19 cases increased dramatically, widespread in all provinces in Indonesia. On the other hand, Indonesia is behind in handling this COVID-19 case, but the government is making various efforts to handle this case.[3]

The World Health Organization (WHO) states that the age group of 20-40 years is the group that most spread the COVID-19 virus. Age groups at higher risk of transmitting this virus are people aged 60 years and older, people with comorbidities, those with weakened immune systems, and those who are overweight and obese. The Ministry of Health of Indonesia applies health protocols that the public must obey. The protocol for public health protection is realized by considering preventive elements such as health promotion activities, protection activities, case-finding elements, and elements of fast and effective handling. However, community compliance with health protocols still needs to be improved.

Public disobedience to prevent COVID-19 is caused by several factors, such as economic motives, indifferent attitude, feeling that they have a low potential for virus transmission, and distrust of the government regarding inconsistent policies and statements. In this new average era, people believe it is an opportunity to return to activities like before the pandemic. This is a misunderstanding that continues to be carried out in the community, so noncompliance is what makes the virus transmission spread rapidly. This disobedience is a daily sight that is considered normal in the community. Citizens' disobedience is a key to failure in handling the COVID-19 pandemic.[4]

One of the government's efforts in handling cases of the spread of COVID-19 is to apply 5M guidelines (Wearing masks, Washing hands with soap and running water, maintaining a distance, Staying away from crowds, and Restricting mobility and interaction). The 5M health protocol is intended to allow people to continue their activities safely but not endanger the health and safety of themselves and others. In implementing the 5M health protocol, the community responds in various ways; many people consciously comply, but some do not care.[4]

The increase in COVID-19 cases occurred quickly and required immediate treatment. Coronavirus spreads quickly and infects everyone regardless of age. Breaking the chain of the spread of COVID-19 requires good understanding and knowledge from all elements, including the community. Public knowledge about matters relevant to COVID-19 is essential to prevent increased cases of this disease. Knowledge results from curiosity, primarily through the process of the eye and ear senses toward a particular object. Knowledge also shapes behavior.[5]

One of the activities carried out to explore health problems in the community is the community diagnosis activity, which is one method that is often used in the preparation and implementation of public health plans. Community diagnosis is an activity to explore the main problems faced by the community based on existing facts and take strategies and follow-up plans to resolve these problems. Community diagnosis activities lead to health promotion activities and improving health problems in a community.[6] While Hanlon's approach is a technique used to determine priority issues and help determine a score or priority level for dealing with problems that arise in society.[7] This approach can capture the societal health issue that should be prioritized in the program.

All problems in the community begin with analyzing the situation, identifying problems and causes of issues, and prioritizing problems to alternative solutions to problems. We can determine the existing problems in stages using a community diagnosis approach. This study aimed to identify the fundamental issues and tried to develop problem-solving.[8]

METHOD

This descriptive quantitative research was conducted in RT 7, Kampung Tengari, Kelurahan Praya, and Praya City from March to April 2021. This research employed community diagnosis to capture the health problem in that location. The sample in this study was 78 residents. The step of this research is presented in Figure 1. Community diagnosis data was taken from in-depth interviews and questionnaires. Data is then processed for prioritizing the problem by using the Hanlon method. Problem-solving alternatives were then carried out with the key person in society. The intervention was carried out on 23-25 April 2021 by distributing posters and outreach to increase public knowledge and awareness in implementing the 5M prevention of COVID-19, with the target groups being children, mothers, and teenagers.
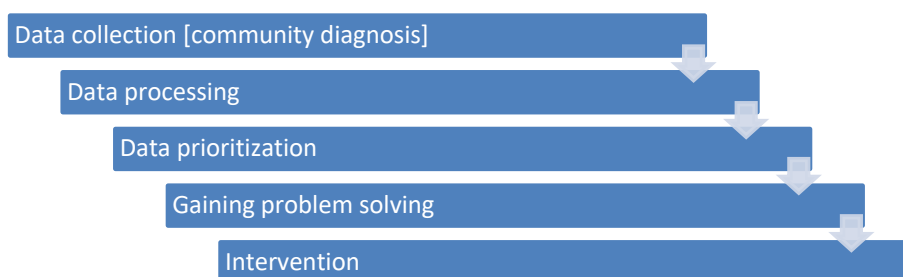

Figure 1. The Hanlon approaches

In Hanlon, a problem or issue is measured using four categories: 1) the magnitude of the problem (A), 2) the level of seriousness of the problem (B), 3) the ease of handling the problem (C), 4) the factor that determines whether or not the program can be implemented/ PEARL (D). Scoring was done on each criterion as follows: for the Magnitude of the problem (A) with a score of 0-10 (Small-Big), level of severity of the problem (B) with a score of 1-10 (Not Serious-Serious), Effectiveness of the problem (C) with a score of 1-10 (Difficult-Easy). Then, the PEARL factor (D) value was scored 0 for No and 1 for Yes.

We used the formula for calculating Total Priority Value (TPV): $TPV = (A + B) * C * D$

Information:

- A: Magnitude of the problem
- B: The level of urgency of the problem (Emergency/Seriousness)
- C: Ease of problem-solving (Disability)
- D: Factors that determine whether the program can be implemented or not (PEARL)

P is suitability (appropriateness), E is economical (economic feasibility), A is acceptable (acceptability), R is availability sources (resources availability), and L is guaranteed legality (legality). OPR: Overall Priority Rating

RESULTS

Respondent Characteristic

In total, 78 respondents participated in this study. Among them, 35.9% graduated from senior high school, and 34.7% has bachelor's degree (Table 1).

Table 1. Characteristics of Respondents Based on Education Level

Level of Education	n	%
Primary School	2	2.6
Junior High School	4	5.1
Senior High School	28	35.9
Diploma I	2	2.6
Diploma II	1	1.2
Diploma III	6	7.7
Bachelor	27	34.7
Post Graduate	8	10.2

Calculation of priority issues using the Hanlon approach

Based on our field survey, we identified seven potential problems occurred in the research area: 1) diarrhea, 2) dengue fever, 3) hypertension, 4) lack of safety for gas cylinders, 5) not using gloves when cutting food, 6) organic waste containers, 7) compliance of the community in implementing the 5M Prevention of COVID-19. Table 2 shows the scoring for each Hanlon component and the priority issue. Our result shows that the community's compliance in implementing the 5M Prevention of COVID-19 is a health issue that needs to be prioritized.

Community compliance in implementing 5M COVID-19 Prevention

Table 3 shows the descriptive analysis of community compliance on the following 5M. The 78 respondents mainly reported medium compliance with wearing a mask, maintaining distance, washing hands, avoiding crowds, and restricting mobility and interaction.

DISCUSSION

Our result shows that the main problem in the research area was the level of community compliance in implementing 5M COVID-19 prevention. The data shows that society's compliance was reported at a medium level of compliance. According to Lawrence W. Green (1984), knowledge, attitudes, and beliefs are the main factors underlying a person's actions.[9] The knowledge possessed by a person can influence behaviors related to lifestyle; if someone possesses reasonable knowledge about health and disease, they are likely to exhibit good health behaviors as well. They can even support successful efforts to control the disease.[10][11]

Table 2. Scoring and Determining the Priority of Health Problems Using the Hanlon Method

Health Issues	Score				OPR	PRIORITY RANK
	A (Considerable)	B (Danger)	C (Simplicity)	D (PEARL)		
Diarrhea	8	7	6	1.1.1.1.1	90	II
Dengue Fever	7	6	6	1.1.1.1.1	78	III
Hypertensions	6	5	6	1.1.1.1.1	66	IV
Lack of safety for gas cylinders	3	3	3	1.1.1.1.1	18	VII
Not using gloves during cutting food	4	5	4	1.1.1.1.1	36	VI
Organic waste containers	5	5	5	1.1.1.1.1	50	V
Community compliance in implementing 5M COVID-19 Prevention	6	8	6	1.1.1.1.1	96	I

Table 3. Community Compliance Level in Implementing 5M COVID-19 Prevention in RT 07 Kampung Tengari, Praya City

The Application of 5M COVID-19 Prevention	Community Compliance		
	Low	Medium	Hight
	n (%)	n (%)	n (%)
Compliance with Wearing Masks	4 (5.1)	57 (73.1)	17 (21.8)
Compliance with Maintaining Distance	8 (10.2)	59 (75.7)	11 (14.1)
Compliance with Washing Hands	4 (5.1)	57 (73.1)	17 (21.8)
Compliance with Staying Away from Crowds	7 (9.0)	59 (75.7)	12 (15.3)
Compliance with Restricting Mobility and Interaction	7 (9.0)	56 (71.8)	15 (19.2)

Factors that affect knowledge are education, age, occupation, and other external factors.[12] A person's education about health will affect health behavior because the education obtained will help them gain knowledge and create efforts to prevent disease.[13] The higher a person's level of education will make it easier for him to absorb knowledge. Thus, his insight will be more comprehensive.[14] Our result shows that most of our respondents have completed senior high school and bachelor's, meaning they have a sufficient understanding of COVID-19. Public knowledge about COVID-19 is an essential aspect of the current pandemic. The general needs to know what is relevant to COVID-19, such as the causes, characteristics of the virus,

signs and symptoms, terms related to COVID-19, the necessary examinations, the transmission process, and efforts to prevent the disease. Someone with good knowledge of healthy behavior tends to behave well, too.[14]

Considering the process and result of community diagnosis, we propose an alternative problem solving that can be done to increase public knowledge by conducting counseling. Many studies have been undertaken on disease prevention, such as promoting a healthy diet and cardiovascular risk factors,[15] counseling for reducing stigma on leprosy[16], and tuberculosis diagnostic.[17] This method can be used on various targets with low and high levels of education, depending on the situation and location. When counseling is conducted, the target can actively participate and provide feedback on the extension materials provided.

CONCLUSION

The incompliance with the 5M health protocol to prevent COVID-19 is a central problem in RT 07 Kampung Tengari, Praya Village, Praya Subdistrict, Praya City. This result shows that society needs intervention to increase the essentials of the 5M health protocol and how to implement it in their daily lives.

Declarations

Authors' contribution

WA and SS designed the study and wrote the article. WA collected the data and performed the analysis. TLS reviewed the article.

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Conflict of interest

There is no conflict of interest in this research.

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