

Prevention Efforts of Covid-19 Qualitative Study Transmission in East Java Province

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ABSTRACT

East Java has seen a steady increase in COVID-19 cases, with 1,221 people affected and 3547 lives lost. The study used in-depth interviews with stakeholders supported by NGOs and the Integrated Command Post to understand the phenomenon. The sample included nine cities in East Java Province, including Surabaya, Malang, Kediri, Batu, Blitar, Madiun, Mojokerto, Pasempuan, and Probolingga. The results of these interviews were disseminated to health workers in East Java using the Question-and-Answer lecture method. The health department and stakeholders at the Integrated Command Post collaborated to socialize technical guidelines for preventing COVID-19 transmission. The material presented in the program policies aims to prevent COVID-19 transmission in East Java. Stakeholders' policies towards the Integrated Command Post capacity building program are crucial for preventing COVID-19 transmission. Regulations or laws are necessary to regulate efforts in East Java. Monitoring and evaluation are carried out by stakeholders at the integrated post in East Java, with the health department monitoring its evaluation through monthly reports sent through puskesmas and hospitals based on the COVID-19 examination laboratory network. The study aims to provide information on self-isolation and increase support and cooperation across sectors and local governments in handling COVID-19.

Keywords: COVID-19, Integrated Command Post, Stakeholders

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PRELIMINARY

As of December 31, 2019, 27 cases of pneumonia from unknown causes were identified in Wuhan City, Hubei Province in China (Coma et al., 2021) Wuhan is the most populous city in central China with a population exceeding 11 million. These patients mainly experience clinical symptoms of dry cough, dyspnea, fever, and bilateral pulmonary filtrate on imaging. All cases are related to the Wuhan Huanan Seafood Wholesale Market, which trades fish and various species of live animals including poultry, bats, guinea pigs and snakes (Cheng et al., 2020). The causative agent was identified from a throat swab sample conducted by the China Center for Disease Control and Prevention (CCDC) on January 7, 2020, and was later named the Coronavirus 2 Severe Acute Respiratory Syndrome (SARS-CoV-2). The disease is named COVID-19 by the World Health Organization (WHO) To date (Huang et al., 2020), the majority of patients infected with SARS-CoV-2 have experienced mild symptoms such as dry cough, sore throat, and fever. Most cases have been resolved spontaneously. However, several have developed various fatal complications including organ failure, septic shock,

pulmonary edema, severe pneumonia, and acute respiratory distress syndrome (ARDS) [354.3% of those infected with SARS-CoV-2 are men with an average age of 56 years. Specifically, patients are needed.

On 30 January 2020, WHO declared the COVID-19 outbreak in China as a Public Health Emergency for International Concern that poses a high risk to countries with vulnerable health systems. The emergency committee has stated that the spread of COVID-19 can be disrupted by early detection, isolation, prompt maintenance, and the adoption of a robust system for tracking contacts (Chen et al., 2020) WHO data on March 3, 2020 shows on the map picture 1 below:

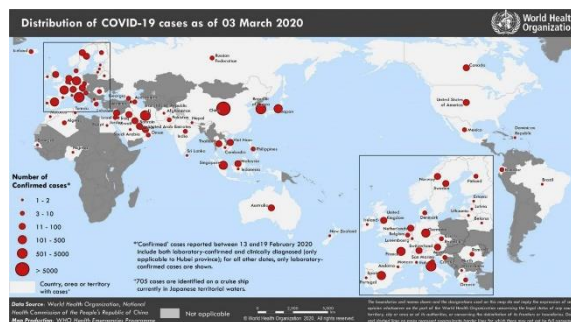


Figure 1: Illustration of COVID-19 confirmed geographic distribution. Accurate data for March 2020.

As of March 3, 2020, 90,870 COVID-19 cases were confirmed, 80,304 of which were confined to China. Of the Chinese cases, 67,217 were confirmed in Hubei Province with the remainder being reported in 34 provinces, regions and cities in China (She et al., 2020)

The remaining 10,566 cases were identified in 72 countries including Japan, the US and Australia. 166 of these cases were fatal (Philippines, Japan, Korea, Italy, France, Iran, Australia, Thailand and the US). It is important to note that these figures are likely to be underestimated, because the data presented only reflect diagnoses confirmed by the laboratory.

in May 2020 the COVID-19 data in Indonesia showed that covid-19 had died 895 people, treated in hospitals 9,226 people who had recovered 2,317 people Data in Indonesia showed the number of COVID-19 exposed on the map figure 2 below:



Figure 2: Illustration of COVID-19 confirmed geographic distribution. Accurate data for May 2020

The government announced the data of patients under surveillance increased to 26,932 people and people under monitoring increased to 240,726 people at this time

the co-19 cases reached 12,438 people, 2,317 people recovered lives and 895 people died. The highest data is in East Java an increase continues there are 1,221 people, this data shows cases of transmission are still quite high, so that a total of 123 people died. 3547 inhabitants, patients in monitoring from the number 20,116 today to increase 20.401 inhabitants. The data above shows an increase in transmission of COVID-19 in East Java. The distribution of COVID-19 in East Java according to map 3 below:

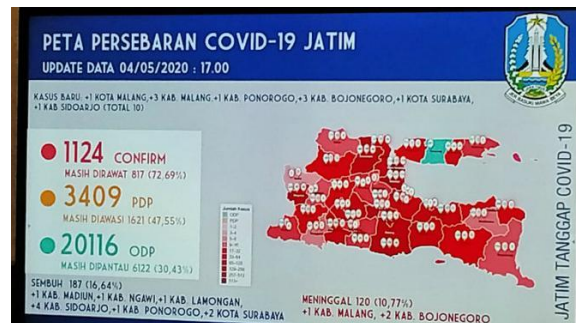


Figure 3: Illustration of COVID-19 confirmed geographic distribution. Accurate data for May 2020.

Several studies that define the pathophysiological characteristics of COVID-19 have great uncertainty about the mechanism of its spread. Current knowledge is largely derived from similar coronaviruses, which are transmitted from human to human via a respiratory apparatus (Brosnahan et al., 2020). Usually, the respiratory virus is most contagious when the patient is symptomatic. However, there is increasing evidence to suggest that inter-human transmission can occur during the asymptomatic incubation period of COVID-19, which is estimated to be between 2 and 10 days.

Various bodies including the WHO and the US Centers for Disease Control and Prevention (CDC) have issued recommendations to prevent further spread of COVID-19 [6-10] They recommend avoiding traveling to high risk areas, contact with symptomatic people, and meat consumption from areas with known COVID-19 outbreaks. Basic hand hygiene steps are also recommended, including frequent hand washing and the use of PPE such as face masks. The Japan-based company Bespoke Inc. has also launched a chatbot supported by artificial intelligence (Bebot) which provides up-to-date information on efforts to reduce the coronavirus outbreak, preventative measures that can be taken, and symptom checkers (Belkacem et al., 2021).

Non-pharmaceutical interventions remain important for COVID-19 management because there is no licensed vaccine or coronavirus antivirus. If the situation changes towards broader community transmission with a lot of international focus, WHO detention strategies for elimination may need to be adjusted to include mitigation strategies combined with the following activities currently recommended by STAG-IH on the WHO website, strategy 1) Close monitoring is needed for changes in epidemiology and the effectiveness of public health strategies and social acceptance. 2) ongoing evolution is needed to improve communication strategies that provide the general population and vulnerable populations most at risk with actionable information for self-protection, including identification of symptoms, and clear guidelines for seeking treatment 3) continuous intensive source control is needed at the epicenter in China namely, isolation of patients and people who test positive for COVID-19, contact tracking

and health monitoring, strict prevention and control of infection of health facilities, and the use of other active public health controls. interventions with ongoing active surveillance and detention activities in all other locations where outbreaks occur in China. 4) ongoing containment activities are needed around locations outside China where there are infected people and transmission between contacts, with intensive studies to provide information about transmission, mode of transmission, and natural infection history, with regular reporting to WHO and sharing data. 5) intensive active surveillance is needed for the possibility of infection in all countries using the WHO recommended surveillance case definition. 6) preparation for health system resilience in all countries is needed, as is done during seasonal influenza, anticipating severe infections and the course of the disease in the elderly and other populations identified at risk of severe disease(Kryukova et al., 2021)

Based on scientific evidence, COVID-19 can transmit from human to human through coughing or sneezing. The people who are most at risk of contracting this disease are people who are in close contact with COVID-19 patients, including those who treat COVID-19 patients. Standard recommendations for preventing the spread of infection through regular hand washing using soap and clean water, applying the ethics of coughing and sneezing. In addition, implementing Infection Prevention and Control while in health facilities strategy 1) implementing standard preventative measures for all patients, 2) ensuring initial identification and source control, 3) implementing administrative controls, 4) using environmental and engineering controls, 5) implementing additional empirical steps for patient cases in COVID-19 surveillance and confirmation (Kryukova et al., 2021)

In the effort to overcome COVID-19, it is necessary to provide guidance for the community in making efforts to prevent the spread of COVID-19, especially in providing information to the community related to self-isolation in accordance with a circular to increase support and cooperation across sectors and local governments in handling COVID-19 (Bourriane et al., 2022)

Responding to the development of an increasingly widespread epidemic of COVID-19 globally, it is necessary for collaboration from various parties to help disseminate health information in order to protect against the risk of transmission of COVID-19 disease, some things must be done to avoid COVID-19, namely: Nutritious food, adequate rest, drink enough water, use a mask when there are people, wash your hands frequently, do not consume uncooked food, exercise regularly, avoid visiting the animal market or near other animals, if you have a fever, cough and shortness of breath immediately see a doctor Determination of large-scale social restrictions in the DKI Jakarta province in the context of accelerating the handling of COVID-19 (Fadly & Sari, 2020)

RESEARCH CONCEPT FRAMEWORK

Is a form of frame of mind that can be used as an approach in solving problems using a scientific approach (Tobi & Kampen, 2018)

Independent Variable

1. Enabling factors:
2. Stakeholders Policy
3. Monitoring and evaluation
4. Large-scale Social Restrictions (PSBB)
5. Health facilitation

Dependent variable

Efforts to prevent transmission of COVID-19

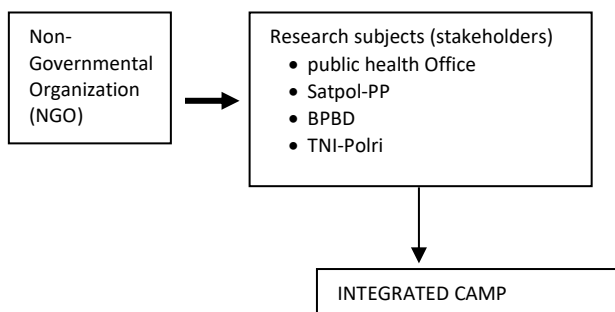
Figure 4. Research Conceptual Framework

Independent variables: Policy, monitoring and evaluation, supervision, health facilities

Bound Variable: Efforts to prevent transmission of COVID-19 in the East Java Region

RESEARCH METHODOLOGY

This research is qualitative by using the in-depth interview method, to dig deeper into a detailed explanation of the phenomenon. The selection of informants in this study used a purposive technique (Cavers et al., 2010)



As the main informants in this study are stakeholders supported by Non-Governmental Organizations and also from integrated posts consisting of: Health Office as a cross check as shown in the picture above, which was conducted research with interviews with 9 TNI-Polri, 9 BPBD, Satpol -PP 9 people, Health Service 18 people.

Sample Characteristics

Based on the list of cities in each district the sample location then marks the serial number of the population then chooses the sample randomly using the proportional random sampling technique (Cash et al., 2022). By looking at the characteristics of respondents based on age, gender, education, occupation, income, knowledge, community attitudes, the role of community leaders, the role of health workers, community behavior face sufferers of COVID-19 in East Java. The people in East Java Province consist of 9 cities including Surabaya city 49 Family Cards, Malang City 35 Family Cards, Kediri City 35 Family Cards, Batu 23 Family Cards, Blitar City 16 Family

Cards, Madiun City 33 Family Cards, Mojokerto 35 Family Cards, Pasempuan city 20 Family Cards, Probalingga City 20 Family Cards with a total of 262 Family Cards in the province of East Java.

Research Instruments

An interview guide that contains open-ended questions relating to respondents, list of questions about efforts to prevent transmission of COVID-19 in the province East Java (Buenano-Fernandez et al., 2020).

Survey time

The research survey was conducted on January 2, 2019 until May 25, 2020.

Research sites

The place of this research was carried out at 9 the province East Java, namely in the city of Surabaya, Malang City, Kediri City, Batu City, Blitar City, Madiun City, Mojokerto City, Pasuruhan City, Probalingga City.

Data analysis

Using qualitative analysis that is open-ended and uses an inductive thinking process whose testing starts with the data collected and then concludes. The method of processing content analysis consists of data collection, data reduction, data presentation, verification or conclusion. The course of the research is the preparation phase of preparing a proposal, selecting materials, stakeholder information, permission to location, preparing data collection equipment. The implementation phase during interviews with informants from the COVID-19 countermeasures commission, eradication of infectious diseases, in charge of the integrated post program consisting of the Office of Health, Satpol-PP, BPBD, TNI-Polri in the city of East Java. The interview began by asking about the COVID-19 prevention program which included stakeholder policies, monitoring and evaluation, large periodic social restrictions and health facilities, policies in the integrated Command Post capacity building program in the city of East Java in efforts to prevent transmission of COVID-19. The data analysis stage is through collecting data from in-depth interviews and focus group discussions, reducing data by making coding and categories created by researchers, presenting data in the form of narrative texts, concluding and verifying (Elliott, 2018).

RESEARCH RESULTS AND DISCUSSION

Policy in COVID-19 countermeasures is the availability of technical policies that are standardized in the guidebooks and distributed to all parties and measures to increase the capacity of the Integrated Command Post in East Java Province in efforts to prevent transmission of COVID-19 (Putera et al., 2022)

a. Technical Guidelines

From the results of in-depth interviews with stakeholders from the Department of Health, about the technical guidelines used by the Integrated Command Post in efforts to prevent transmission of COVID-19 in East Java province using national guidelines developed by the Ministry of Health, the national guidelines for preventing transmission of COVID-19 can be utilized by all parties namely program managers in the field, government apparatuses, health workers, and professional groups in the health

sector who are interested in developing a COVID-19 transmission prevention program. The opinion of the head of the Health Service in the province of East Java said that the city of East Java was responsive to COVID-19 through the East Java self-assessment to detect itself from corona virus disease in an effort to prevent transmission of COVID-19,

b. Who makes the policy

From the results of the policy interview of the Integrated Command Post capacity building program in East Java province in an effort to prevent transmission of COVID-19, the answers given by stakeholders were guidelines for preventing COVID-19 transmission which made the health department for regional regulations already applied and need to be improved.

c. Socialization

The results of interviews with health officials about the dissemination of information on technical guidelines to prevent transmission of COVID-19 have been disseminated to health workers, especially in the province of East Java by the Department of Health in collaboration with stakeholders at integrated posts using the question and answer lecture method. The material presented in the program policies is in the effort to prevent transmission of COVID-19 in the province of East Java (Patma et al., 2021)

CONCLUSION

Stakeholders' policies regarding the Integrated Command Post capacity building program in the effort to prevent transmission of COVID-19 and it is very necessary that there are regulations or laws that regulate efforts to prevent transmission of COVID-19 in the City of East Java (Ahmad Zainuddin & Julita Hasanah, 2020). Monitoring and evaluation is carried out by stakeholders at the integrated post in East Java, the health department conducts its monitoring and evaluation through monthly reports sent through puskesmas and hospitals based on coronavirus disease laboratory network in accordance with the decision of the minister of health Number: 02.01 / MENKES / 182/2020 and efforts to prevent the spread of COVID-19 to all Indonesian pilgrims according to the circular head of the hajj center number: 01.01 / 2/946 // 2020.

SUGGESTION

As a basis for research on efforts to prevent transmission of COVID-19 and increase policy programs in preventing transmission of Corona Virus 2019 (COVID-19) and as a basis for increasing knowledge in the community in efforts to prevent transmission of COVID-19.

Thank-you note

Praise us for the presence of Allah SWT, who has bestowed His gift, is inseparable from the help and support of all parties, therefore on this occasion with all humility the author expresses his gratitude as much as possible.

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