Coaching, 3M behavior change strategy for the prevention of covid-19 transmission in Kupang City, NTT Province, Indonesia

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ABSTRACT

The spread of Covid-19 is not only limited to China; South Korea has confirmed its first case. On January 30, 2020, the World Health Organization announced that Covid19 had become a global pandemic. The Indonesian government has declared Covid19 a non-natural national disaster. To prevent the transmission of Covid19, this is done through the implementation of the 3M Covid19 prevention protocol. For 3M’s behaviour to become a community culture, a strategy is needed to disseminate this information, one of which is through coaching carried out in stages. The results of the coaching activity showed that the behaviour of using masks increased by 30.05%, the behaviour of CTPS increased by 30.2%, and the behaviour of guarding distance increased by 30.09%, and the ownership of CTPS facilities at home was 70.65% after coaching. It is suggested that the coaching method can be used more widely to promote 3M behaviour in the community to prevent Covid transmission.

KEYWORDS

Coaching, Covid-19, 3M Campaign

1. Introduction

Covid19 began to be identified in China Wuhan at Hubei, a provincial city in southern China with a population of 11 million people since December 2020 [1]-[4], since reporting confirmed cases of COVID-19 as many as 2 cases [5]. In NTT, it has been identified as positive for Covid 19 since April 14, 2020 [6]. The spread of Covid is not only limited to China, and South Korea has confirmed its first case [7]. On January 30, the World Health Organization, the COVID-19 pandemic occurred globally, with the most cases in America and Europe [8]. Public health emergencies are determined by their health consequences, causes, and events [9]. The Indonesian government has declared COVID 19 a non-natural national disaster [10]. The main routes of transmission are respiratory droplets and direct contact. Anyone who is in close contact with an infected person is at risk of exposure to potentially infective respiratory droplets. The droplet can also land on surfaces where the virus is able to remain alive; thus, the immediate environment of an infected individual may serve as a source of transmission [11]. Coronaviruses or endemic human coronaviruses (HCoV) can survive on non-living surfaces such as metal, glass or plastic for up to 9 days but can be efficiently inactivated by surface disinfection procedures with 62-71% ethanol, 0.5% hydrogen peroxide or 0.1% sodium hypochlorite in 1 minute [12]. In the air, Covid19 is estimated to last 1-2 hours in the air [13]-[15]. Therefore, prevention and proper infection control are essential. The description of handwashing behaviour with soap in Indonesia shows that 49.8% of the population is ten years old and is washed hands with soap [16]. In addition, 55% of food handlers have little knowledge about washing their hands with soap and do not wash their hands properly [17]. The results of another study showed that the behaviour of washing hands with soap by health workers in hospitals was still low, namely 34% doing CTPS after contact with patients and only 5% before contact with patients by health workers [18].
Handwashing behaviour at critical times shows that 56.6% of people wash their hands before eating and 52.1% after defeating [19]. Carrying out health protocols correctly can control infections, including Covid19 [20]. In practice, data shows that as many as 25% of people do not comply with CTPS for 20 seconds. In NTT Province, 79.6% do not perform CTPS at critical times. National monitoring of health protocols in the January 2021 period showed that 87.95% were not available for CTPS facilities, 90.056 were not provided with hand sanitiser facilities, and 92.45% were not socialized on health protocol rules, and 93.01% were not available for health protocol supervisors in the institutions [21]. The data in Kupang City shows that as many as 52.13% there are no rules or advice regarding CTPS, and 20.35% there are no handwashing facilities or hand sanitisers at home. As many as 56.62% did not use masks properly in terms of using masks. Especially in public places or public facilities, around 41.57% of officers and visitors in public places use masks. In addition, only 21.85% of officers and visitors in public places do not use masks. In terms of social distancing, as many as 54.58% of the community do not maintain their distance, around 46.71% at monitoring sites, and there are no special instructions that regulate people to keep their distance [22].

As seen as people's behaviour condition in carrying out 3M, which is still very low, it is very important to find innovations to disseminate efforts to change people's behaviour in implementing 3M in order to prevent the transmission of Covid19, especially in Kupang City. Coaching is one method for disseminating information by training the staff to support the community at work or in their respective environments. The coached participants were trained to work collaboratively with the community, supporting the community as an "effort to provide systemic education and supportive interventions to improve community skills and confidence to prevent the transmission of COVID-19 by conducting 3M regularly. 3M coaching involves seven important activities, including (1) providing information, (2) teaching specific skills for Covid19 disease, (3) negotiating healthy behaviour changes, (4) providing training on Covid19 solving skills, (5) helping to prevent the emotional impact of the chronic condition, (6) provide regular and continuous follow-up and (7) encourage active participation in handling covid19 [23], [24]. Prevention of Covid-19 transmission will be successful if all parties work together to carry out activities or efforts to prevent transmission properly. To encourage this participation, one of the steps taken from the UNICEF-HAKLI partnership and the Kupang City Government is to carry out campaign activities that are held in stages through the "Coaching" technique. The purpose of coaching is to shape changes in people's behaviour in making efforts to prevent the transmission of COVID-19. This change in behaviour is reflected in the behaviour of people who have simple CTPS tools in their homes, use them, carry out self-disinfection at home, and are able to carry out mask waste management activities.

2. Method

The coaching is done in several stages. The first stage, or level one, was carried out at two locations, at the Health Office of NTT Province level and the Kupang City Health Office level. At the first level, coaching is provided by technical officials and UNICEF Experts. Coaching participants at the Health Office of NTT Province level consisted of four people, consisting of representatives from the Health Office of NTT Province, HAKLI representatives, representatives from Poltekkes and representatives from Bapelitbanda NTT. At the same time, the participants who took part in coaching at the Kupang City Health Office consisted of four people, namely the Kupang City Health Office, Kupang City HAKLI Representatives, Kupang City Bappeda and Kupang District Representatives. The first stage of coaching was carried out simultaneously on September 20, 2020. The second stage of coaching was carried out for fourteen days, from September 28 to October 14, 2020. In the second stage of coaching, the team that had been trained at the Provincial Health Office level conducted the second stage on 37 OPD within the province of NTT, including vertical agencies in the City of Kupang. The second stage of coaching was carried out in 52 urban villages and 11 health centres in the Kupang city area. There are four participants who took part in Coaching from each agency. The participants consist of personnel or staff in the office who are reviewed by the head of the agency. Coaching participants at the village level consist of cross-sectoral teams, namely village officials, Babinkamtibmas, LPM and Kader; each of them is one person.
Some villages include more members, with financial support from the village. The coaching participants at the Puskesmas level consisted of four people each, a sanitation worker, a health promotion worker, a community nursing staff and one nutrition officer. Furthermore, the third stage of coaching was carried out by staff who had participated in the second stage of coaching—time for each participant to carry out coaching activities at work or in the community where they live. The evaluation was carried out to assess the impact of implementing coaching activities. The evaluation was carried out directly by visiting residents' homes.

2.1. Results and Discussion

All stages of coaching activities are carried out for approximately two months. The target of coaching activities is carried out on two target groups: all the NTT regional apparatus employees and the employees who work in vertical agencies. In addition, coaching was carried out for sub-district employees in 52 urban villages in Kupang City and 11 Public health centres in Kupang City. The number of beneficiaries for the implementation of coaching is as Table 1.

Table 1. Number of 3M Coaching beneficiaries for Covid19 prevention

| Coaching                | Number of beneficiaries       |
|-------------------------|-------------------------------|
| Coaching stage 1         |                               |
| Health Office Team of NTT Kupang Province | 4 persons |
| Health Office Team of NTT Kupang City | 4 persons |
| Regional apparatus and vertical agencies | 37 agencies x 4 persons = 148 persons |
| Coaching stage 2         |                               |
| Coaching in the village  | 52 groups x 4 persons = 208 persons |
| Coaching in public health office | 11 public health offices x 4 persons = 44 persons |
| PD agency & vertical agency | 112 persons x 50 persons = 5,600 persons |
| Coaching for community/group |                               |
| Team in the community   | 208 persons x 50 persons = 10,400 persons |
| Community health center team | 44 persons x 50 persons = 2,200 persons |

Table 1 describes the number of beneficiaries of the 3M Coaching implementation (washing hands with soap, using masks, maintaining distance and doing self-disinfection. From Table 1, it can be seen that the number of beneficiaries of coaching activities is approximately 18,400 people. This number is the minimum number achieved during coaching activities. Figure 1 is a coaching activity. As for Figure 1 (a) Development within NTT Provincial Apparatus Institutions, Figure 1 (b) Development in NTT Province vertical agencies, Figure 1 (c) Village level development involving the police and army, and Figure 1 (d) Coaching by officials in the community.

![Fig. 1. Coaching activity](image-url)
The impact of community service activities is illustrated by the results of a brief survey conducted by the implementing team, which includes ownership of CTPS facilities at home, knowledge of masks, behaviour to maintain distance / avoid crowds and disinfection activities at home. A survey of the impact of the implementation of coaching was conducted on 120 households as the respondents represented the target using a simple instrument. Households were randomly selected from 52 urban villages in Kupang City. The evaluation was carried out through home visits by the implementing team for ten days, from 1 to 11 December 2020. The results of the evaluation are as Table 2.

Table 2. Evaluation of 3M coaching activities results for the prevention of Covid19 in 2020

| Activities | Rating items | Total  |
|------------|--------------|--------|
| Washing hands with soap (CTPS) | There is a CTPS facility in front of the house | 110 | 91.67 |
| | CTPS facilities are equipped with soap | 96 | 80.00 |
| | CTPS facilities are used (there is evidence of use) | 92 | 76.67 |
| | Always wash the hands after touching objects/after travelling | 100 | 83.33 |
| | Time duration to wash the hands with soap is at least 20 seconds | 100 | 83.33 |
| Use of mask | Always wear a mask when outside the house | 110 | 91.67 |
| | Sometimes wearing a mask when outside the house | 10 | 8.33 |
| | Cloth masks are changed every 4 hours and reused after washing | 88 | 73.33 |
| | The masks that have been used are disposed of in a safe place in the trash | 76 | 63.33 |
| Keep the distance | Always keeping the distance can prevent the spread of covid19 | 104 | 85.67 |
| | Always keep the distance from other people when outside the house | 96 | 80.00 |
| | Often hang out with many people | 120 | 100.00 |
| | Carry out disinfection activities | | |
| | Always (every day) do a disinfect at home | 28 | 23.33 |
| | Sometimes do disinfection at home | 92 | 76.67 |
| | Disinfection with chemical ingredients according to the dose | 92 | 76.67 |

Table 2 shows that coaching can improve people’s behaviour by about 3M (washing hands with soap, using masks, keeping distance, and disinfection). Carrying out health protocols correctly can control infections, including Covid19 [20]. In practice, data shows that as many as 25% of people do not comply with CTPS for 20 seconds; in NTT Province, 79.6% do not perform CTPS at critical times [25]. National monitoring of health protocols in the January 2021 period showed that 87.95% of CTPS facilities were not available, 90.056 were not provided with hand sanitiser facilities, and 92.45% had no socialization of health protocol rules, and 93.01% were no health protocol supervisors available in institutions. CTPS behaviours before coaching activities were 52.13%, and ownership of CTPS was 20.35% in the general community [22]. After the Coaching activities were carried out, the CTPS activities were correct as much as 83.33%, an increase of 31.2% after the activities were carried out. This is supported by the availability of CTPS facilities at home as much as 91% and increases to 70.65% after coaching. In terms of social distancing behaviour, prior to the implementation of Coaching activities, 54.58% of the community did not practice social distancing, especially in public places [22]. After coaching activities were carried out, 85.67% of the community always kept their distance when meeting with other people, and it increased to 30.09 after coaching. 3M campaigns through Coaching can reach more targets than other conventional methods. A coaching method emphasizes several aspects, such as washing hands with soap, using masks, maintaining distance, and disinfection at home independently [26]. In addition, Coaching can increase target knowledge. This situation is slightly better than public knowledge in China at the beginning of the Covid19 pandemic [27].

4. Conclusion

The behaviour of using masks increased by 30.05%, CTPS behaviour increased by 30.2%, social distancing behaviour increased by 30.09%, and ownership of CTPS facilities at home was 70.65% after coaching. So it was concluded that Coaching is one of the strategies to campaign the changing of community behaviour regarding 3M. In addition, coaching can also encourage people to carry out disinfection activities independently at home to prevent the transmission of Covid19.
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