DECONSTRUCTION OF HEALTH PROTOCOL IMPLEMENTATION AS AN ATTEMPT OF PREVENTING COVID-19 IN SURAKARTA

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Abstract
Health protocol implementation is the front guard in preventing Coronavirus Disease (Covid-19). Community behavior habituation to wear mask, wash hand using soap under flowing water and social distancing is expected to be the culture in community and society life, so that Covid-19 pandemic can be controlled. This research aims to deconstruct a variety of measures in health protocol implementation as an attempt of preventing Covid-19 in Surakarta Indonesia. This research with explorative approach employed purposive sampling technique. Informants of research were Surakarta people, Head of Surakarta City’s Health Office (DKK), Head of Disease Control and Environmental Health Division of DKK of Surakarta, Chief Executive of Covid-19 Response Acceleration Task Force of Surakarta City, and pulmonologists and nurses in UNS Hospital of Surakarta. Primary and secondary data were collected through observation, in-depth interview, and documentation. Method and data source triangulations were used to validate data. Interactive model of analysis was used with Derrida’s Deconstruction theory. The result shows that people can be either disciplined or undisciplined in implementing health protocol. People have disciplined behavior because they are aware of positive effect of health protocol discipline on health. Thus, people attempt to be disciplined in wearing mask, washing hand, social distancing, avoiding crowd, and reducing mobility. However, people can be undisciplined as well, because they do not think of the health effect of health protocol discipline. People receive this pandemic condition and submit their fate to God. Meanwhile, the objective of Covid-19 prevention will not be achieved if people are undisciplined in implementing health protocol.

Keywords: Social Deconstruction, Health Protocol, Covid-19 Prevention

Abstrak
Penerapan protokol kesehatan menjadi garda terdepan dalam pencegahan Coronavirus Disease (Covid-19). Habituasi perilaku masyarakat untuk memakai masker, mencuci tangan dengan sabun di air mengalir dan menjaga jarak diharapkan membudaya dalam kehidupan komunitas dan masyarakat, sehingga pandemi Covid-19 dapat dikendalikan. Penelitian ini bertujuan mendekonstruksi berbagai langkah dalam penerapan protokol kesehatan sebagai upaya pencegahan Covid-19 di Surakarta Indonesia. Penelitian dengan pendekatan eksploratif ini menggunakan teknik purposive sampling. Informan dalam penelitian ini adalah masyarakat Surakarta,

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Kepala Dinas Kesehatan Kota (DKK) Surakarta, Kepala Bidang Pengendalian Penyakit dan Penyehatan Lingkungan DKK Surakarta, Ketua Pelaksana Gugus Tugas Percepatan Penanganan Covid-19 Kota Surakarta, serta Dokter Spesialis Paru dan perawat di RS UNS Surakarta. Data primer dan sekunder dikumpulkan dengan observasi, wawancara mendalam dan dokumentasi. Triangulasi metode dan sumber data untuk menguji validitas data. Interactive Model of Analysis menggunakan teori Dekonstruksi dari Derrida. Hasil penelitian menunjukkan bahwa, masyarakat bisa disiplin dan tidak disiplin dalam menerapkan protokol kesehatan. Masyarakat berperilaku disiplin karena mereka menyadari bahwa terdapat dampak positif bagi kesehatan dari kedisiplinan melaksanakan protokol kesehatan. Sehingga masyarakat berusaha untuk disiplin dalam melakukan kegiatan memakai masker, mencuci tangan, menjaga jarak, menghindari kerumunan dan mengurangi mobilitas. Namun, masyarakat juga bisa menjadi tidak disiplin, dikarenakan mereka tidak memikirkan dampak kesehatan yang ditimbulkan dari kedisiplinan melakukan protokol kesehatan. Masyarakat berfikir untuk pasrah dan menerima keadaan pandemi ini dan menyerahkan takdirnya kepada Tuhan. Padahal apabila masyarakat tidak disiplin menerapkan protokol kesehatan maka tujuan pencegahan Covid-19 tidak tercapai.

**Kata Kunci:** dekonstruksi sosial, protokol kesehatan, pencegahan Covid-19

**INTRODUCTION**

Covid-19 pandemic is the problem faced by world society, including Indonesians, in 2019-today. WHO’s data informs that there are 192,284,27 positive Covid-19 cases in the world per July 23, 2021. National data of Covid-19 reports 3,127,826 positive cases per July 24, 2021, while there are 21,681 positive Covid-19 cases in Surakarta City per July 2021. The higher number of cases of course requires government and people to take attempt to prevent Covid-19 incidence. Since March 26, 2020, WHO has suggested six strategies the government has to take to deal with Covid-19 pandemic. They are expanding and distributing skilled health workers, applying system to find cases as detailed as possible, improving production and testing the aspects that can prevent case incidence, searching for specific facilities to be used by patients infected with Covid-19, enacting quarantine and optimizing government’s attempt of coping with Covid-19 case (WHO, 2020). Responding to WHO’s appeal, Indonesian government socializes the implementation of health protocol, called 5 M, involving mencuci tangan, memakai masker, menjaga jarak, menjauhi kerumunan dan
mengurangi mobilitas (washing hand, wearing mask, social distancing, avoid crowd, and reducing mobility). Health protocol implementation is one of attempts to implement WHO’s appeal to optimize the governments’ attempt of coping with Covid-19 case in their own countries.

Health protocol implementation evidently prevents effectively the Covid-19 cases. For instance, mask functions to prevent the spread of droplet, thereby reducing the potential virus transmission (Atmojo et al, 2020). Health protocol implementation as the attempt of preventing Covid-19 incidence, in fact, also results in new problem. This problem arises because not all people implement health protocol in disciplined manner (Hasma et al, 2021). Indiscipline is surely a factor inhibiting the achievement of health protocol implementation objective to prevent Covid-19 incidence. Therefore, the implementation of health protocol should be optimized to prevent the Covid-19 incidence effectively.

Deconstruction theory suggested by Jacques Derrida in 20th century aims to deconstruct the truth. Truth is considered as a process. It means that truth cannot be considered as absolute and permanent, but it will keep moving dynamically following the truth itself. Deconstruction appears to criticize logocentrism tradition in European philosophy. Logocentrism tradition emphasizes more on a certain existence of symbol and language used in thinking. Logocentrism perspective conceives world through symbols and words representing something real in the world, that can be formulated and known certainly through symbol and concept we use (Peters & Biesta, 2009; Sawant, 2020).

Derrida argues that logocentrism is a misinterpretation. Symbol and language we use do not automatically explain the condition existing in real world. The symbol and language is different from a truth and it is only a system constructed by human to create communication process. Therefore, Derrida then tried to surpass logocentrism by seeing other side of reality manifested into deconstruction thought (McCance, 2009).

Deconstruction is a method used by Derrida to challenge logocentrism considered as incapable of explaining a truth. It is because
symbol and language are ambiguous and cannot be explained with collective perspective on truth. However, actually deconstruction has existed in a symbol and a language. Uncertainty existing in these symbol and language then results in other possible interpretation. It is this possibility that is called deconstruction. Language and symbol are a tool used by human mind to conceive reality. Because language and symbol always change and are uncertain, our perception on reality will always change and be uncertain as well. This uncertainty has been inculcated into language and symbol we create (Francis, 2021).

Deconstruction also moves creating two types of pattern: differentiation and postponement. Differentiating amounts to opposing the truth of a language and a symbol. When an opposition occurs against these two aspects, it means that truth will appear when opposition occurs. This truth then becomes the one resulting from deconstruction process. Meanwhile, postponement can be said as a process of approving the meaning of language and symbol. Consequently, no change occurs in the previous meaning of truth resulting from the symbol and language.

However, as suggested by Derrida truth is not absolute; therefore this truth resulting from deconstruction is also something relative (not absolute). Deconstruction method sees the truth merely as a trace. Human cannot understand the absolute truth inside him. What he can achieve is only the traces of truth. He can merely approach truth, but have never reached it entirely and completely. It means that the trace of truth is always uncertain and opened, thereby can change with the time. Question and denial will result from a truth that will lead to a new deconstruction process that will occur continuously. It is this that is embodied in the health protocol implementation by community.

Surakarta City is located in a region vulnerable to Covid-19 case and becomes red zone. Therefore, high discipline is required in implementing health protocol in order to prevent Covid-19 case. This research discusses this optimization of health protocol practice to the people in Surakarta by analyzing the relationship between people’s discipline and the result of Covid-19 preventing attempt through optimizing health protocol. In
addition, it also addresses the factors affecting people’s discipline in implementing health protocol and its effect on the objective of Covid-19 prevention.

METHOD

The method used in this research was qualitative one with an explorative research strategy. This research was conducted by searching for data related to the optimization of health protocol as the attempt of preventing Covid-19 in Surakarta. The data used was the one indicating Surakarta people’s behavior or activity in optimizing health protocol. The informants of research were Surakarta people, Head of Surakarta City’s Health Office (DKK of Surakarta), Head of Disease Control and Environmental Health Division of DKK of Surakarta, Chief Executive of Covid-19 Response Acceleration Task Force of Surakarta City, and pulmonologists and nurses in UNS Hospital of Surakarta. Primary data was obtained from the result of interview with them and observation on the behavior of community members, related to health protocol application. Meanwhile, secondary data were obtained from various document and social media. To validate data, source and research method triangulations were used. The author analyzed data using Jacques Derrida’s deconstruction theory.

RESULT AND DISCUSSION

Result

Covid-19 pandemic condition in Surakarta is relatively the same as that in other Indonesian regions. The number of positive Covid-19 cases increases continuously everyday. There have been 21,681 positive cases in Surakarta per July 24, 2021. This data indicates high number in line with Covid-19 condition in Indonesia with 3,127,826 cases. Surakarta City Government has responded to and attempted some strategies to solve this problem. One of them is to issue Mayor of Surakarta’s Circular No. No.067/3205 about Discipline Implementation and Law Enforcement for Health Protocol as the attempt of preventing and controlling Corona Virus
Disease 2019 (Covid-19) in Surakarta City. The circular includes health protocol that should be obeyed by members of society during Covid-19 pandemic time. Surakarta people are obliged to wear self protecting apparatus (SPA) including mask covering the nose, mouth, and chin when going out of home or interacting with others, whose health status is unknown, except when having meal or drinking. Hand should be washed regularly with soap under flowing water. Physical distancing should be performed by keeping far away from other people, at least 1.5 meter, not talking with each other without wearing mask during having meal and drinking, and avoiding crowd. Improving body resistance can be done by applying Clean and Health Life Behavior (PHBS).

Health protocol mentioned in circular should be obeyed by people during Covid-19 pandemic. Health protocol mentioned in the circular requires the people to restrain them self from activities involving many people (crowd). People are expected to take care of themselves in the crowd. Clean and Health Life Behavior (PHBS) should be the government’s emphasis on this health protocol implementation. People are required to maintain self habit by maintaining their own sanitation and health.

Generally, Surakarta people state that Covid-19 pandemic makes people restless and restrict their activity everyday. Covid-19 still occurs until today, but not 100% of people have implemented health protocol, such as washing hand, wearing mask, and social distancing. It indicates that socialization has not been optimal about the importance of health protocol, because most people ignore health protocol. Society leaders appeal to the people to obey health protocol in order to break the Covid-19 transmission chain and to improve healthy life.

People assume that the very rapid transmission of Covid-19 occurs through droplet and air surrounding. Therefore, we should wear mask when communicating with each other in order not to be infected with Covid-19 and, should not go outside home if there is no urgent purpose. The chairperson of PKK (Family Welfare Program) of Kelurahan Semanggi argues that as members of society we should be alerted and apply health protocol well, including wearing mask, washing hand, and social distancing to prevent Covid-19 transmission.
Most but not 100% of people have implemented health protocol corresponding to government’s recommendation, in the term of wearing mask, washing hand, and physical (social) distancing, because some people pay less attention to the health protocol. They assume that these activities are boring. This assumption begins to arise, making people undisciplined in implementing health protocol. It can be seen from behavior of people who formerly provide hand washing facilities in front of house, now no one providing it and people’s preparedness for implementing 3 M is fading.

People take different actions in implementing health protocol, in the term of wearing mask, washing hand, and physical distancing. They implement health protocol from the self, family, and environment. Additionally, government anticipates the crowd from occurring within society, including when a member of society holds an event. For instance wedding party, arisan (gathering), worship, and etc should get permission from village government or police, in order to prevent unexpected incidence and of course government always appeals to the people not to get into crown and to keep obeying health protocol and when crowd occurs, the government will reprimand the people. In this case, the government will impose sanction to those not obeying health protocol.

The health protocol implementation in worship places has been corresponding to the government’s recommendation, meaning that it has been very effective. Masjid communities have been disciplined in implementing health protocol, so that they do not need to worry to do worship. It is indicated with Christian communities doing service (worship) in the Church. They have worn masker and washed hand, but when providing tribute, they should keep physical distancing and thereafter use hand sanitizer available.

In addition, when going to traditional market or supermarket, people should apply right and good hand washing behavior with soap under flowing water and keep bringing hand sanitizer with us anywhere, particularly when do transaction or shopping using money to anticipate the absence of hand-washing facilities in public places.

People are appealed to pray in order that Covid-19 does not transmit to their residence and to implement health protocol as well as possible.
People should wear standardized mask made of materials that can fight against virus, wear mask correctly and well, with nose and mouth covered, when going outside home. In addition, every house should provide mask, so that people can implement health protocol well.

In addition to the Surakarta City Government’s appeal to the people in general, health protocol is implemented in big events in Surakarta City, for example, in the performing art events routinely held such as Wayang Orang Sriwedari. This event keeps held offline by prioritizing health protocol. The attempt taken by the event organizer is to limit the quota of spectators by putting seats in wide space with only 20% of spectator capacity. This optimization of health protocol implemented in one of events in Surakarta City has been conducted frequently in Surakarta City.

The optimization of health protocol is also implemented through socializing health protocol to general society. The government’s attempt is indicated, among other by former Mayor of Surakarta, FX Hadi Rudyatmo, socializing the implementation of health protocol with slogan Do Manuto (be obedient please!) in his personal instagram page. The community in globalization era will pay more attention to this non-formal socialization. Thus, socialization of health protocol and health protocol can run more optimally. In addition to government’s attempt, people also contribute to socializing health protocol in Surakarta City, one of which is done by Indonesian Red Cross (PMI) of Solo City. PMI of Solo City socializes health protocol through social media (Oktariano, 2020). This socialization is one of people’s contributions to the attempt of preventing Covid-19 transmission, through optimizing health protocol.

This additional contribution made by non government parties will maximize the socialization. This socialization reaches more people, so that it will optimize the implementation of health protocol more successfully.

**Discussion**

Surakarta people’s behavior has been fairly good in the term of health protocol implementation. It can be seen from the members of community who have known how to wash hand well, how to wear mask appropriately, and how to keep physical distancing. Surakarta City
Government always appeals to the people to obey the health protocol existing and people always implements health protocol corresponding to the people’s recommendation. People implement health protocol by keeping social (physical) distancing, not having contact with surrounding people when they are outside home and they are recommended to keep at least 1-m space from others. But physical distancing is often ignored by surrounding people. Physical distancing behavior should also be performed at home. It is intended to reach collective comfort not only for health workers but also for all members of society.

Kelurahan government also gives education to the people about the danger of Covid-19 and the importance of implementing health protocol, because not 100% of people have implemented health protocol such as washing hand, wearing mask, and keeping social distancing, and people are expected to implement health protocol as well as possible. Additionally, through implementing health protocol when they go outside region, they are cooperative with the government. Besides implementing 3 M, people are invited to always perform clean and healthy life behavior in order to prevent from being infected with disease or Covid-19.

This community behavior is in two possibilities. It is relevant to Derrida’s deconstruction theory. The possibilities are differentiation and postponement. When receiving the government’s regulation to implement health protocol, people have two options: being disciplined and undisciplined (Cutrara, 2021). People, then, will do deconstruction process to choose one of them. People performing differentiation will find that being disciplined in implementing health protocol will make people healthy, so that this discipline should be done. They will also feel comfortable when obeying the government’s rule. On the other hand, people perhaps do not perform deconstruction process. They implement health protocol merely as the result of government’s rule. People do not think of the health effect likely generated by their obedience to health protocol (Gilder, 2020). They will feel compelled and discomfort, so that eventually they will likely be undisciplined in implementing health protocol and prefer submitting their fate and anything occurring to God. It occurs in some religious leaders (Gaon, 2020).
CONCLUSION

The implementation of health protocol is one of attempts having big impact on the prevention of Covid-19 case, as it makes people tending to avoid crowd, thereby breaking the Covid-19 transmission chain. In Surakarta City specific regulation has developed related to the implementation of health protocol, the Mayor of Surakarta’s Circular No.067/3205 about Discipline Implementation and Law Enforcement for Health Protocol as an Attempt of Preventing and Corona Virus Disease 2019 (Covid-19) in Surakarta City. This Circular is a guideline of activity implementation in Surakarta City. Such activities as art performance remain to be held by prioritizing health protocol as included in the circular. In addition, the optimization is also conducted through socializing health protocol. Socialization of health protocol is conducted by government and community through various media, one of which is social media. Through this optimizing attempt, people are expected to be more disciplined in implementing health protocol, so that the objective of optimization can be achieved.

On the other hand, people can be disciplined and undisciplined in performing health protocol. People are disciplined because they are aware of the positive effect of discipline in this health protocol implementation on health. Thus, people will attempt to be disciplined in washing hand, keeping physical distancing, wearing mask, avoiding crowd, and reducing mobility. However, they can be undisciplined as well. It is because they do not think of the health effect generated by the discipline of health protocol implementation. They think of being submitted and receiving this pandemic and submitting their fate to God. Meanwhile, the objective of Covid-19 prevention will not be achieved if people are undisciplined in implementing health protocol.

REFERENCES
Atmojo, J.T., Sri I., Rejo, dkk. (2020). Penggunaan Masker dalam Pencegahan dan Penanamanan Covid-19: Rasionalitas, Efektivitas, dan Isu Terkini. Journal of Health Research, 3 (2), 84-95.
Cutrara, S. (2021). Beyond Pandemic Pedagogy: Thoughts on deconstruction, structure, and justice post-pandemic. The Councilor: A Journal of the Social Studies, 82(1), 1.

Francis, R. (2021). The Deconstruction and Reformation of Community and Its Place Attachment Among Warren Wilson College Students in the Wake of COVID19 (Doctoral dissertation).

Gaon, S. (2020). Lies in the Time of COVID. Derrida Today, 13(2), 149-158.

Gilder, E. (2020). Towards a Post-Pandemic Postmodern Society-Is the Pandemic a Deconstruction of the Postmodern Society?. Postmodern Openings, 11(2), 1-11.

Hasma, H., Musfirah M., Rusmalawati M. 2021. Penerapan Kebijakan Protokol Kesehatan dalam Pencegahan Covid-19. Jurnal Ilmiah Kesehatan Sandi Husada, 10 (2).

Kementerian Kesehatan Republik Indonesia (2021). Data Nasional Covid-19 per 24 Juli 2021. https://data.covid19.go.id/public/index.html (retrieved on July 25, 2021).

Kementerian Kesehatan Republik Indonesia. (2020). Pedoman Pencegahan dan Pengendalian Coronavirus Disease. Jakarta : Kementerian Kesehatan Republik Indonesia.

McCance, D. (2009). Derrida on Religion: Thinker of Difference. 1st ed. England UK: Routledge.

Pemerintah Kota Surakarta. (2021). Situasi Covid-19 Kota Surakarta per 24 Juli 2021. https://surakarta.go.id/?page_id=10806 (Retrieved on July 25, 2021)

Peters, M. A., Biesta, G. (2009). Derrida, Deconstruction, and the Politics of Pedagogy (Counterpoints Studies in the Postmodern Theory of Education). New York: Peter Lang Publishing Inc. p. 134.

Sawant, S. (2020). The Deconstruction of The Present Power Paradigm. Eidos, 10(1).

WHO. (2020). Critical Preparedness, Readiness and Response Actions for Covid-19. Geneva: World Health Organization.

WHO. (2021). WHO Coronavirus (Covid-19) Dashboard. https://covid19.who.int/