The Role of the Patient's Family in Implementing the Discipline of Health Protocols at the Otanaha Hospital, Gorontalo City

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Abstract. The role of the community in each phase is needed to avoid more transmission. Efforts that can be made in the prevention phase by each individual include: wearing a mask, using a hand sanitizer/disinfectant, washing hands with soap and running water, keeping a distance of at least 1-2 meters from other people when outside the house. The purpose of this community service is to provide counseling to the community in the poly room of the Otanaha Hospital, Gorontalo City about the role of the patient’s family in implementing health protocol discipline during the Covid-19 pandemic. Counseling was carried out through the pretest and posttest stages by distributing questionnaires to the public. There were 20 communities who were given counseling. The pre-test values of knowledge about health protocol disciplines before counseling were obtained were Good 20%, Enough 15% and Less 65%, while after the counseling the post-test scores were found to be Good 55%, Enough 45%. Based on the results obtained that public knowledge about the role of the patient’s family in implementing health protocol discipline has increased after being given counseling

Keywords: Health Protocol Discipline, Family Roles, Counseling

INTRODUCTION

Discipline of health protocols is an absolute thing that must be a concern for all elements of society as the frontline in efforts to break the chain of transmission of covid 19. The Ministry of Health noted that until now the Indonesian people have adhered to the 3M health protocol discipline, namely wearing 60% masks, keeping a distance of 55% and washing hands with running water using 30% soap (Kemenkes RI, 2020). The pandemic that has been going on since the end of 2019 has made people have to fight hard to maintain their survival. People now have to adjust to the pattern of life in the era of the Covid-19 pandemic. One of them is a new habit pattern regarding the discipline of the Covid-19 health protocol which aims to reduce the transmission of the Covid-19 virus outbreak (Sahrudin, 2020).

The implementation of health protocols for handling Covid-19 consists of a prevention phase, a detection phase and a response phase. The role of the community in...
each phase is needed to avoid more transmission. The government has issued preparedness guidelines in the face of the spread of Covid-19. Efforts that can be made in the prevention phase by each individual include: wearing a mask, wearing gloves, using a hand sanitizer/disinfectant, washing hands with soap and running water, avoiding touching the face, avoiding shaking hands, avoiding crowds, avoiding touching objects/surfaces. objects in public areas, avoid taking public transportation, maintain a distance of at least 1-2 meters from other people when outside the house, and if you show symptoms of illness immediately notify the people around.

Based on data received by WHO from local national authorities on June 9, 2020, there have been more than 7 million cases of Covid-19 and more than 400,000 deaths (WHO, 2020). Meanwhile, data on the global distribution of the Covid 19 pandemic, which spreads to 216 countries with details of 8,184,867 confirmed cases and 443,461 deaths ("Task Force for the Acceleration of Handling Covid 19," n.d.). Thus, since it first appeared in Wuhan City, the number of people infected and infected with Covid-19 worldwide has cumulatively increased significantly every day.

In Indonesia, a disease caused by a viral infection, known as Covid-19, has claimed many victims. In October, there were 328,952 positive cases of Covid-19 recorded, of which 251,481 people recovered, and 11,765 died. Data from the Covid-19 Task Force also shows that as many as 54 regencies/cities in Indonesia are in the red zone. This means that the virus is spreading out of control in that area. A total of 304 regencies/cities are in the orange zone or zone of high risk of spreading (CNN Indonesia, 2020). Now, approaching the end of 2020, the transmission rate is not sloping, it is increasing. On December 11, the COVID-19 Task Force recorded an additional 175 deaths in a day. This number is the highest record during the pandemic that hit Indonesia. Spokesman for the COVID-19 Task Force Wiku Adi Sasmito said the weekly national death rate increased by 15.5 percent (Tirto.id, 2020).

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The role of the family in the Covid-19 pandemic situation is to replace the social function of society in fulfilling human social needs as social beings, the family is the frontline which is the fundamental subsystem that the Government considers most in breaking the chain of transmission of Covid-19. Optimizing the role of the family in dealing with personal Covid-19 can be seen from the ability to discipline all the behavior of its members, educate or educate other family members to comply with the health protocols set by the government, instill habits in their family members to always comply with the health protocol discipline and practice a healthy lifestyle by exercising. regularly and regularly and maintain the mental health of its members (Rosmalawati, 2016).

The head of the family actually has the highest authority or power to ask for the obedience of all family members to always comply with the health protocols set by the Government regarding Covid-19. In order to complement, support and accelerate the achievement of that goal, the example of the head of the family in healthy behavior is the key to success for the adaptive efforts of family members to it. Through his actions, the head of the family must set an example of a clean and healthy lifestyle. With his
example, the head of the family does not need to bother explaining to his family members about the importance of clean and healthy living behavior (Kurnianto, 2015).

Some simple examples of healthy and clean living behavior that can be shown by the head of the family, for example after finishing activities, both inside and outside the house, always get used to wearing masks when leaving the house, always washing hands with soap with running water and keeping a distance at least 1 meter by avoiding crowds (Rakhmawati, 2015).

Based on these reasons, we intend to carry out this activity counseling on the Role of Patient Families in Implementing Health Protocol Discipline as a form of Lecturer service to the community at Otanaha Hospital, Gorontalo City.

RESULTS AND DISCUSSION

The material used in providing this counseling is the role of the patient’s family in implementing the discipline of health protocols using Benner and leafled and as a speaker for our team (Lecturer of the Nursing Study Program, Faculty of Health Sciences) Muhammadiyah University of Gorontalo. In this extension, a questionnaire is also used to see how far the level of knowledge and understanding of the community before and after the extension. So that the team can measure differences in the level of community knowledge. The design used in this study was a pre-test and post-test to review the level of public knowledge about the discipline of health protocols (Riyanto, 2011).

The target in this counseling is the community in the poly room of the Otanaha Hospital, Gorontalo City, the implementation starts on April 23, 2021 until it is finished, the initial stage is preparing tools and materials, the second stage is conducting a pre-test, the third stage is providing material in the form of counseling using a banner and leaflet, the fourth stage conducted a post-test to review the level of community knowledge after the counseling.

Characteristics of respondents based on age can be grouped into 3 parts, namely 26-35 years, 35-45 years and 45-55 years. Gender is male 8 people and female 12 people, Elementary Education 5 people, SMP 5 people, and SMA 10 people.

Table 1. Distribution by Age Group

| No. | Respondent’s Age | Frequency | Percent (%) |
|-----|------------------|-----------|-------------|
| 1   | 26-35 Yrs        | 4         | 20          |
| 2   | 35-45 Yrs        | 10        | 50          |
| 3   | 45-55 Yrs        | 6         | 30          |
|     | sum              | 20        | 100         |

Source: Primary Data 2021

Table 1 shows that the respondents based on the age group were 20 people, the highest percentage of respondents aged 35-45 years was 10 (50%) while the percentage of respondents aged 26-35 years was 4 (20%) people.

Table 2. Distribution of Respondents by Gender

| No. | Respondent’s Gender | Frequency | Percent (%) |
|-----|---------------------|-----------|-------------|
| 1   | man                 | 8         | 40          |

Table 2.
Table 2 shows that there are 20 respondents based on gender, the percentage of male respondents is 8 (40%) and 12 (60%) are female.

Table 3. Distribution of Respondents Based on Education

| No. | Respondent Education | Frequency | Percent (%) |
|-----|----------------------|-----------|-------------|
| 1   | Elementary School    | 5         | 25          |
| 2   | Junior School        | 5         | 25          |
| 3   | High School          | 10        | 50          |
| sum |                      | 20        | 100         |

Source: Primary Data 2021

Table 3 shows that respondents based on education are 20 people, the percentage of respondents is SD 5 (25%) people, SMP 5 (25%) people and SMA 10 (50%) people.

Table 4. Distribution of Respondents Based on Knowledge Level

|               | Pretest |          | Post    |          |
|---------------|---------|----------|---------|----------|
|               | n       | (%)      | n       | (%)      |
| good          | 4       | 20.0     | 11      | 55.0     |
| enough        | 3       | 15.0     | 9       | 45.0     |
| less          | 13      | 65.0     | 0       | 0        |
| Total         | 20      | 100.0    | 20      | 100.0    |

Source: Primary Data 2021

Table 4 shows that the pre-test scores of knowledge about health protocol disciplines before counseling were obtained were Good 20%, Enough 15% and Less 65%, while the post-test scores after counseling were obtained were Good 55%, Enough 45%. Based on the results obtained that public knowledge about the role of the patient’s family in implementing the discipline of health protocols has increased after being given counseling in the Poli room of the Otanaha Hospital, Gorontalo City.

Knowledge is the result of human sensing or the result of someone knowing about objects through their senses (eyes, nose, ears and so on), but most of this knowledge is obtained through the senses of hearing and sight (Annisa, 2019).

Public knowledge about the application of complying with health protocols during the pandemic is still lacking, for this reason, in dealing with the spread of Covid-19, it is necessary to make preventive efforts to the community, namely educational efforts for the community regarding Covid-19 prevention, including through the habit of using masks, washing hands with soap with running water. One of the preventive ways is to carry out health promotion activities which are carried out through socialization,
education, and the use of various information media to provide understanding regarding the dangers and transmission of Covid-19 (Kemenkes RI, 2020).

Various information media used for health promotion cannot be separated from the media because through the media, the messages conveyed can be more interesting and understood. Benner is an extension media in the form of printed media images and delivered by the lecture method. Benner has often been used as an extension media and was able to increase the target’s knowledge from not knowing to knowing and finally willing to change healthy living behavior by complying with the 3M health protocol (Notoadmodjo, 2012). This activity is an effort to build community or family support in terms of implementing healthy living behaviors as a new habit during the Covid-19 pandemic (Maywati, 2021).

As during this pandemic, people can also easily access information online. This is an opportunity to disseminate information about the dangers of Covid-19 and its prevention. Online-based health promotion regarding the Covid-19 protocol can provide knowledge and raise awareness for the community, especially in the family sphere to implement health protocols as an effort to prevent COVID-19 (Suhadi, et al, 2020).

Some simple examples of healthy and clean living behavior that can be shown by the head of the family, for example after finishing activities, both inside and outside the house, always get used to wearing masks when leaving the house, always washing hands with soap with running water and keeping a distance at least 1 meter by avoiding crowds (Rakhmawati, 2015). This behavior must be based on family or community awareness because many people actually already know various knowledge related to health protocols or the COVID-19 pandemic but do not implement it well in everyday life (Tentama, 2018).

CONCLUSION

From a series of community service activities carried out by lecturers and students of the Faculty of Health Sciences, Muhammadiyah University of Gorontalo, it can be concluded that there is an increase in public knowledge about the role of the family in implementing health protocol discipline. Efforts to improve public health status through increasing public knowledge about health protocol disciplines during the COVID-19 pandemic. Lecturer and student service is an activity that can benefit both the community and the campus

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