



SOCIALIZATION OF HEALTHY LIFE DURING SELF-ISOLATION IN THE ERA OF THE COVID-19 PANDEMIC

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Abstract. Background: Covid-19 is a pandemic that has caused mortality in various parts of the world. At this time, efforts to overcome COVID-19 require guidance for the community in efforts to prevent the spread of COVID-19 both for themselves, their families and the environment. One of the efforts made by the government is to socialize the protocol for self-isolation in handling Coronavirus Disease (COVID-19).

Methods : the Community Service Activity with the title "Socialization of Healthy Living During Independent Isolation in the Era of the COVID-19 Pandemic" which was carried out at the Sakura Bumi Indah Cluster Residence, Pasar Kemis, Tangerang, Banten, Indonesia, could help the government's efforts in the spread of COVID-19. This activity was carried out through a Zoom meeting and was attended by 20 participants. This activity uses a discussion lecture method with participants and a pre-test of participants' knowledge about COVID-19. This service was attended by 100% of participants and test participants' knowledge with question sheets via google form, the question obtained was an increase in participants' knowledge about COVID-19, modes of transmission, prevention and healthy living during self-isolation.

Results : Participants can find out about the purpose of implementing healthy living socialization during independent isolation in the COVID-19 pandemic era and can carry out independently and this activity can be used as one of the activity programs in the region in order to decide the chain of transmission of COVID-19.

Keywords: Healthy Life, Covid-19

Introduction

Coronaviruses are a large family of viruses that cause illness ranging from mild to severe symptoms. There are at least two types of coronavirus that are known to cause illness that can cause severe symptoms. On December 31, 2019, the WHO China Country Office reported a case of pneumonia of unknown etiology in Wuhan City, China. On January 30, 2020, WHO has declared it a Public Health Emergency of International Concern (PHEIC)¹.

The COVID-19 pandemic in Indonesia is part of the ongoing Coronavirus disease 2019 (COVID-19) pandemic worldwide. The disease is caused by severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2). The first positive case of COVID-19 in Indonesia was detected on March 2, 2020, when two people were confirmed to have

contracted it from a Japanese citizen². On April 9, the pandemic had spread to 34 provinces with DKI Jakarta, West Java and Central Java as the provinces most exposed to the corona virus in Indonesia.

As of April 8, 2021, Indonesia has reported 1,552,880 positive cases, ranking first in the most in Southeast Asia. In terms of mortality, Indonesia ranks third in Asia with 42,227 deaths³. However, the death rate is estimated to be much higher than the reported data because there are no cases of death with acute COVID-19 symptoms that have not been confirmed or tested⁴. Meanwhile, it was announced that 1,399,382 people had recovered, leaving 111,271 cases being treated⁵. Cases found in Banten Province in particular where Banten Province was confirmed were 43,299 cases, spread across Tangerang Regency as

many as 9,7736. confirmed cases and Tangerang City with 8,226 positive confirmed cases⁶.

At this time efforts to contain COVID-19 are needed for residents in an effort to prevent the spread of COVID-19. One of the efforts made by the government is to socialize the protocol for self-isolation in handling COVID-19⁷. However, the behavior of citizens in responding to and preventing the virus has not been fully in accordance with government programs in breaking the chain of this virus. Currently, residents do not realize the importance of maintaining a healthy lifestyle during self-isolation during the COVID-19 pandemic era.

Based on the results of a preliminary study of COVID-19 survivors in the Sakura Cluster Residence, Bumi Indah Pasar Kemis, Tangerang, it was found that, based on the information provided, there were 28 residents who became COVID-19 survivors, and the residents did not know how to live a healthy lifestyle during self-isolation. From this data, it can be seen that COVID-19 survivors in the Sakura Cluster, Bumi Indah Residence, Pasar Kemis, Tangerang, have never received health education about healthy living during self-isolation during the COVID-19 pandemic era.

Based on these problems, the STIKes Yatsi community service team tried to solve the problem, namely holding outreach activities and output targets that were expected to increase the knowledge of COVID-19 survivors and increase knowledge about healthy lifestyles in an effort to prevent COVID-19 transmission.

Methods

The activity implementation method consists of several activities, namely:

- a. Conduct a pre-test to determine the knowledge of the residents before the counseling is carried out
<https://bit.ly/Pretes-Pengmas-STIKESYATSI-2021>
- b. Counseling
 - Provide counseling about:
 - Definition, signs and symptoms of COVID-19
 - COVID-19 and its transmission
 - Definition of self-isolation
 - Socialization of healthy living with family health protocols
- c. Implementation of effective breathing and coughing exercises:
 - Teach breathing exercises in accordance with standard operating procedures.
 - Breathing exercises are done by watching a 30 second video.

<https://drive.google.com/file/d/1eO4NfL-N1G9rng9wzZ0WOGxEfHDuoC7U/view?usp=sharing>

- d. Conduct a post test to evaluate the results of the material that has been delivered
 1. Evaluation is carried out to find out whether the activities carried out are appropriate and can be achieved properly according to the objectives of the activity. The evaluation carried out is
 - a. Measuring cognitive aspects:
 - 1) COVID-19 survivors and residents know the definition of COVID-19
 - 2) COVID-19 survivors and residents know a healthy lifestyle during self-isolation
 - 3) COVID-19 survivors and residents know how to carry out effective breathing and coughing exercises.
- e. Measuring affective aspects:
 - 1) COVID-19 survivors and residents said they were happy to get material about COVID-19
 - 2) People with DM state that they are willing and interested in applying when themselves and or their family become COVID-19 survivors.
 - 3) COVID-19 survivors and residents expressed their willingness and will carry out a healthy lifestyle during the COVID-19 pandemic era
 - 4) COVID-19 survivors and residents realize the importance of implementing a healthy lifestyle to prevent the transmission of the COVID-19 virus.
- f. Measuring psychomotor/action aspects:
 - 1) COVID-19 survivors and residents are able to discuss about COVID-19 and its prevention
 - 2) COVID-19 survivors and residents are enthusiastic, attentive and active during activities
 - 3) COVID-19 survivors and residents are able to do effective breathing and coughing exercises.

Result & Discussion

The Socialization of Healthy Living Patterns During Independent Isolation in the Era of the COVID-19 Pandemic in an effort to prevent the transmission of COVID-19 was carried out on Saturday, July 17, 2021, via Zoom Meeting at the Sakura Cluster, Bumi Indah Residence, Pasar Kemis, Tangerang at 10.00-12.00 WIB. Prior to the counseling activity, participants who attended were asked to fill in attendance at the following

link: https://forms.zohopublic.com/zahrahmaulidia85/form/ABSENSIPESSERTAPENGMASTAHUN2021DIPERUMAHANCLUSTERSA/formperma/rxFqot5fkM28jqXAZGxazZzvtj1nRBeCxZ_I5zETWZs, and perform pretest. Participants fill in the following link: <https://bit.ly/Pretes-Pengmas-STIKESYATSI-2021>

Results of Activity Implementation

The implementation of community service activities carried out virtually on the zoom application with participants from the Sakura RW 19 Cluster residents had the following demographic data results:

Table 1. Frequency Distribution of Participants Age

Age (years)	n	%
≥30	18	90
<30	2	10
Total	20	100

Table 2. Frequency Distribution of Participants Gender

Gender	n	%
Male	3	15
Female	17	85
Total	20	100

The results of the frequency distribution from demographic data show that the majority of residents are 30 years old (90%), with the majority of residents being women (85%).

The results of the calculation on understanding about COVID-19, modes of transmission, prevention and healthy living during self-isolation by using a tool in the form of a questionnaire with a google form which was distributed to the Whatsapp group one day before the provision of health education / pretest, while the post test carried out after the health education is completed, the results obtained are as follows:

Table 3. Frequency distribution of Citizen's Knowledge about COVID-19 and Independent Isolation during the COVID-19 pandemic

Knowledge	Pre test	%	Post test	%
High	15	75	18	90
Low	5	25	2	10
Total	20	100	20	100

The table above shows that the knowledge of the Sakura Cluster RW19 residents before being given health education regarding COVID-19 and Independent Isolation, there were 15 people who had high knowledge and 5 students who had a positive attitude had low knowledge. After being given health education, people's knowledge increased, namely 18 people (90%) while the low experienced a decrease to 2 people (10%)

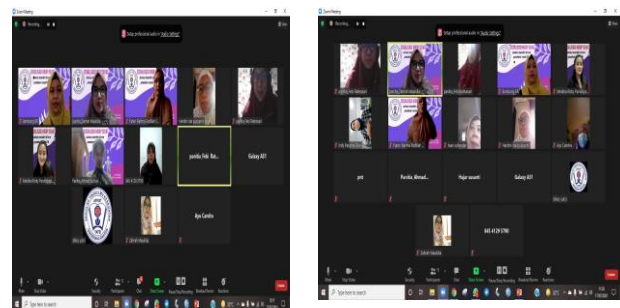


Fig 1. Participants fill out the link for 10 minutes

After all participants filled out the pretest, the counseling activity began. To open the counseling activity, the team asked the head of the RW (citizens Association) to give a speech, then the team leader also gave a speech.



Fig 2. Message from the Chairperson of RW 19, Sakura cluster, Bumi Indah Residence

After that, counseling was carried out. The team immediately worked according to their respective responsibilities. The team that served as extension workers took their place at the front ready for presentations, while those who served as facilitators. Members are divided into moderators and facilitators.

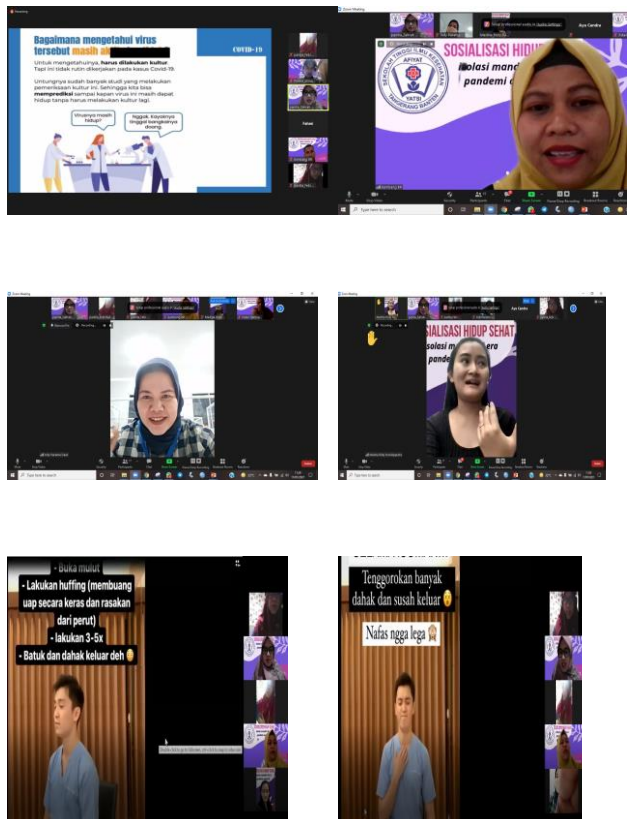


Fig 3. Counseling and training

Counseling activities are divided into several stages:

1. Orientation stage for ten minutes, which contains introducing yourself and explaining the purpose of this activity and not forgetting to thank the participants for attending the counseling
2. The presentation stage is 45 minutes, starting by asking open-ended questions whether the participants already know about COVID-19. It turned out that none of the participants knew about COVID-19 and the protocol on self-isolation. This is followed by showing videos of effective breathing and coughing exercises. Participants actively follow the movements instructed by the presenter. Here's a video of effective breathing and coughing exercises:

<https://drive.google.com/file/d/1eO4NfL-N1G9rng9wzZ0WOGxEfHDuoC7U/view?usp=sharing>

3. After the material has been given, the next question and answer session is about 45 minutes. And at the end of the event, before closing, participants fill out the post test at the following link <https://bit.ly/POSTEST-PENGMAS-STIKESYATSI-2021>
4. Participants who actively ask questions and can demonstrate practice will get a reward from the committee.

To reduce the spread of COVID-19, the World Health Organization and most governments have recommended that the entire human population should 'stay at home'⁷. A significant proportion of population live alone or are vulnerable to mental health problems, but in the majority of cases, individuals in social isolation do not have access to mental health care. The only resource is the human itself using self-help, self-medication and self-care. During the prolonged COVID-19 isolation, the built-in system of Homeostasis can help balance activities, thoughts and feelings. Increased physical activity allows reset physical and mental well-being. During the lockdown period, it is recommended that sports such as vigorously promoted as social distancing itself⁸.

Observing the practice affect self-esteem through self-efficacy or mastery, and mood, distract individuals from negative and worrying thoughts and reflections⁹, increase positive thinking and give time away from negativity or stress aspects of everyday life, and especially, The COVID-19 pandemic itself¹⁰.

Conclusion

Based on the results of this community service activity, it can be concluded that participants can find out about the purpose of implementing healthy living socialization during independent isolation in the COVID-19 pandemic era and can carry out independently and this activity can be used as one of the activity programs in the region in order to decide the chain of transmission of COVID-19.

Acknowledgement

The author thanks the study participants who took time from their busy schedules to take a part in this community empowerment activities. We also thank the Institute for community empowerment activities STIKes Yatsi who provided funding for this activities.

REFERENCES

1. WHO. (2020). Anjuran mengenai penggunaan masker dalam konteks COVID-19. *World Health Organization, Juni*, 1–17. https://www.who.int/docs/default-source/searo/indonesia/covid19/anjuran-mengenai-penggunaan-masker-dalam-konteks-covid-19-june-20.pdf?sfvrsn=d1327a85_2
2. Ratcliffe, Rebecca (2020). First coronavirus cases confirmed in Indonesia amid fears nation is ill-prepared for an outbreak. Diakses tanggal 2 Maret 2020. <https://www.theguardian.com/world/2020/mar/02/first-coronavirus-cases-confirmed-in-indonesia-amid-fears-nation-is-ill-prepared-for-outbreak>
3. Coronavirus Update Worldwide . (2021). Worldometer. Diakses tanggal 8 April 2021. <https://www.worldometers.info/coronavirus/#countries>
4. *Kompas.id*. (30 April, 2020). Kematian Akibat Covid-19 Bisa Jauh Lebih Tinggi. Diakses tanggal 25 Mei 2020. <https://www-beta.kompas.id/baca/ilmu-pengetahuan-teknologi/2020/04/30/kematian-akibat-covid-19-bisa-jauh-lebih-tinggi/>
5. Covid.go.id. (2021). Komite Penanganan COVID-19 dan Pemulihan Ekonomi Nasional. Diakses pada tanggal 8 April 2021. <https://covid19.go.id/peta-sebaran>
6. Covid19.tangerangkab.go.id. (2021). Peta Sebaran Coronavirus COVID-19 Kabupaten Tangerang. Diakses pada tanggal 8 April 2021. <https://covid19.tangerangkab.go.id/>
7. Covid19.tangerangkota.go.id. (2021). Peta Sebaran Coronavirus COVID-19 Kota Tangerang. Diakses pada tanggal 8 April 2021 <https://covid19.tangerangkota.go.id>
8. Backer, J. A., Klinkenberg, D., & Wallinga, J. (2020). Incubation period of 2019 novel coronavirus (2019-nCoV) infections among travellers from Wuhan, China, 20–28 January 2020. *Eurosurveillance*, 25(5), doi: 2020.2000062
9. Matias, Thiago, Dominski Fabio H. Marks David F. (2020). Human Needs in COVID-19 Isolation. <https://journals.sagepub.com/doi/pdf/10.1177/1359105320925149>
10. Mikkelsen K, Stojanovska L, Polenakovic M, et al. (2017) Exercise and mental health. *Maturitas* 106: 48–56.
11. Chen P, Mao L, Nassis GP, et al. (2020) Wuhan coronavirus (2019-nCoV): The need to maintain regular physical activity while taking precautions. *Journal of Sport and Health Science* 9: 103.