

Phenomenological Study of Knowledge, Public Perception in Kendal During The Pandemic and The Implementation of A New Normal in 2020

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Abstract. COVID-19 is a disease that has infected people in more than 190 countries in a period of 3 months and has infected more than 8,745,570 confirmed cases in the world. The Indonesian government applies a new normal life health protocol to prevent transmission of COVID-19. Objective: to find out and explore deeply how the level of knowledge, public perception to face Pandemic and preparation in implementing the new normal. Method: This research is a qualitative research with a descriptive phenomenological approach. The population in this study is a representation of Kendal, Jetak Village, Getasan District, Semarang Regency, Central Java. Results : There are six types of occupations, namely: farmers, teachers, factory workers, traders, drivers, and casual daily construction workers; most of the respondents or 90 % did not know the cause and mode of transmission of COVID-19 correctly; the respondent does not understand the terms People Under Surveillance, Patients Under Surveillance and People Without Symptoms; All respondents always update information about COVID-19 due to fear of being infected; COVID-19 disease cannot be controlled because of community disobedience; This outbreak has affected their income; All respondents were aware of various policies in disease management; The community has carried out various prevention activities; 90 % of respondents lack understanding about the concept of new life; The economic issue and following the rules of a normal life ia a new challenge; Socialization of new life practices are still limited; people expect the government to socialize and support in facilities. Conclusion: the level of public knowledge about COVID-19 is still lacking, but the community has practiced ways to prevent the disease; Most people speculated that the transmission and spread of the disease cannot be controlled because the community's disobedience factor in following the health protocol in their activities to fulfill economic needs; The community's preparation in implementing the new normal life still cannot be carried out due to the lack of socialization from the government and the massive hoaxes about COVID-19 disease; a systematic and concrete policy from the government is needed for the implementation of a new normal life.

Keywords. COVID-19, New Normal, Pandemic, Knowledge, Public Perception

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1 Introduction

COVID-19 is a disease caused by a single-stranded RNA virus that belongs to the Coronavirus family [1]. Since the first findings in Wuhan China at the end of December 2019, the disease has infected people in more than 190 countries over a period of 3 months [2]. In response to the situation, WHO has declared that COVID-19 disease was a pandemic [3]. Up to June 20, 2020 there are 8.74 5,570 confirmed positive cases globally, in which 4,619,373 positive patients deemed recovered [4]. Meanwhile, in Indonesia as of June 20, 2020 there are 45,029 cases of positive, as many as 2,429 patients died and 17,883 declared recovered [5].

Knowledge is the result of someone sensing an object of the five senses. Public knowledge about health can be improved by knowing how to care for health, knowing how to avoid disease [6]. Meanwhile, according to Moda (2020) COVID-19 patient knowledge is the result of patients knowing about the disease, knowing how to prevent it, knowing the treatment and its complications [7]. Perception is the brain ability to translate stimuli that enter the human senses [8]. Perception between a single individual can be different to other individuals. The perception difference can be caused by differences in the angle of view in perceiving things and also the differences in the sensory comprehension of the individual. The difference can be influenced by many factors such as: knowledge, experience, and point of view.

New normal life is a change in behavior to continue to carry out norm activities by implementing health protocols to prevent the transmission of COVID-19 [9]. The concept was conveyed by President Jokowi in response to the widespread infection of COVID-19 disease which has infected millions of people in the World. It is yet unknown how the knowledge, public perception of Kendal people during the pandemic and how the community preparations in implementing *new normal* in living their daily lives. The research objective was to find out and explore deeply how the level of knowledge, the public perception of Kendal village in facing the Pandemic and preparations in implementing *New Normal*.

2 Method

This study is a qualitative research with a descriptive phenomenological approach. The population in this study is the representative community in Kendal, Jetak village, Getasan district, Semarang Regency, Central Java. The research sample has inclusion criteria: is a Kendal resident, has a job that has been occupied for at least 1 year (which then the researcher took a sample of each of 2 respondents), willing to be interviewed. Data was collected by researchers through in-depth interviews using a list of questions arranged in the interview guidelines. The researcher uses a recording device to record the in-depth interview process. The results of the recording are then transcribed, analyzed and then triangulated from some of the participant interview transcript.

3 Results

Based on observations and interviews in Kendal, there are six types of occupations, namely: farmers, teachers, factory workers, traders, drivers, and casual daily construction workers, see the Table 1.

Table 1. Types of Respondents' Occupation

Occupations	n	%
Teacher	2	1
Factory worker	3	0

Trader	4	1
Driver	3	5
Farmers	4	2
Construction workers	4	0
		1
		5
		2
		0
		2
		0

Based on the table above, 35% of the respondents are high school or vocational school educational level, see the Table 2.

Table 2. Level of education

Education	n	%
Bachelor	2	1
High School	7	0
Middle School	5	3
Elementary School	6	5
		2
		5
		3
		0

The majority of respondents or 90 % were unable to correctly state the causes, signs, and modes of transmission of COVID-19. They also lack of understanding about the terms People Under Surveillance (ODP), Patients Under Surveillance (PDP) and People Without Symptoms (OTG).

"... we have no idea what the terms ODP, PDP or OTG are "

Meanwhile, 10 % of respondents who work as teachers and some traders already know the terms ODP, PDP and OTG.

"ODP is a person under surveillance for example after traveling from endemic areas or out of town, whereas PDP is a person who is hospitalized because of Corona and OTG patients are asymptomatic people it means that the person is positively affected by Corona but symptoms such as cough fever and others do not appear".

Some respondents said they were always looking for information about the development of cases around them because they were very worried about being infected by this virus.

"We got information from social media such as the Facebook and news on TV that contained news about the development of the disease".

In addition there are also respondents working as drivers who do not update information about COVID-19 because they are bored with the development of a disease that does not stop causing their loss of income.

"We're not updating for a while because it's boring ... "

All respondents stated that COVID-19 could not be controlled because the people were not being honest about the history of their activities to health workers, unable to control the desires for a vacation and community disobedience to comply with health protocols due to demands to fulfill their family needs.

"Because they do not comply with the health protocol and dishonesty of the community ... people are unable to control themselves to go on a holiday..."

All respondents were aware of various government policies to help the community such as economic policies and social restriction policies to prevent transmission of the disease. However, the sustainability of the policy is still not fully able to help the community as a whole and can prevent disease. In economic assistance, for example, it is still not evenly distributed, only addressed to the poor, but some respondents who work as drivers currently unable to get income, unfortunately they also do not get help from the government because they are not included in the target group of recipients of government assistance.

"Those who have received assistance from the government have been helped, but like us, the drivers, we are still having difficulties, we have no income, we have to switch professions to become construction workers, for example"

On the other hand, policies such as social restrictions for termination of transmission chain cannot be sustained such as in the market in Salatiga that regulates the distance between traders now that they have not returned to normal, meaning that the policies that have been made by the city government are not consistent in implementation in the field.

"There is a policy but it is not consistent in its implementation, for example the management of the morning market in Salatiga, now it has returned to before the spread of this corona disease."

Most respondents stated that they could not follow the entire health protocol, for example reducing activities outside the home, reducing gathering and holiday activities. Their main reasons are because: 1) the existence of household needs, 2) the diseases that have lasted a long time so they feel bored. They stated that they could follow the health protocol continuously for a maximum of one month, while the COVID-19 has been going on for the last four months since it was declared a pandemic in Indonesia (March 2020).

"(We can follow the protocol) At most one month, because there are household needs ... we are bored with the handling this disease being so long"

Most of the respondents worried about being infected by the disease. Meanwhile, the respondents who work as teachers said they were not too worried as long as they continued to follow the health protocol recommended by the government.

"Everyone will be worried and try to anticipate it. We became Anxious when meeting other people ... now we are not afraid, the important thing is to still follow the health protocol"

To prevent transmission of this disease, Kendal community has carried out various prevention activities such as: 1) mass spraying once a week; 2) every house is recommended to provide water and soap in front of the house; 3) using a mask everytime they go out of the village, 4) any residents who are traveling out of town shall report to the chairman of RT or Kadus or local midwife; 5) delay the vacation.

"The group of youths in the village held mass spraying once every week. There is an appeal from the village government for every house it is recommended to provide water and soap in front of the house; ... use masks faithfully when going out of the village, ... every residents are traveling from out of town shall report to the RT or Kadus or local midwife, always reminded to live a clean and healthy life in order to improve the immune against the virus, ... regular exercise, ... Sunbathing, ... refrain traveling or vacation for the time being"

Most 90 % of respondents lack understanding about the concept of new normal. According

to them, new normal life is a term that is overwhelming for most respondents.

" (We) have heard about it but do not exactly know how to do it"

Some respondents who work as teachers perceive that new normal life is a new lifestyle where people must follow and familiarize themselves with health protocols in order to prevent the disease.

"The new life is the same as the previous life but we must pay attention and get used to health protocols in daily activities"

Especially for respondents who have understood the concept of implementing a new normal life, they mentioned there are no challenges in their daily practice - as it has become a new habit in daily life.

"If it becomes a habit and lifestyle, it is no longer a challenge"

However, for those respondents who work as traders, drivers, factory workers and farmers the biggest challenge in the practice of new life is how the people can carry out and follow the health protocol in their activity to fulfill economic needs. So far the socialization of new life practices is also still minimal, so the respondents are lack understanding of what the government has prepared for the implementation of this new normal life.

" we are still doubtful whether we can continue to follow the health protooco, because our environment is not fully able to comply with these rules, we are bored ... also the socialization about new normal life is minimal so we are confused."

To be able to follow the new normal life, the respondents still have not figured out what course they should prepare for the implementation, but they will try to follow the advice and the rules set by the government.

"Even though we do not know what normal life is, we will follow the advice as much as we can."

At the moment, the government has not maximized in informing and supporting the implementing a new normal life. Only a few locations have received support to carry out a new normal life such as in schools, while it has still not felt and know by the general public. All respondents expect the socialization and facilities from the government that will support the implementation of a new normal life.

"Government should conduct a counsel and material support for the implementation of a new normal life ... government has set up a support of the implementation of new normal especially in schools .. less is known in community, ... the government should conduct counseling and material support for the implementation of a new normal life,. .. there should be support of budget in preparation for new normal "

4 Discussion

The level of knowledge of the Kendal community, Jetak Village, Getasan district is still lacking about the transmission of COVID-19, but they have practiced various activities to prevent COVID-19. This phenomenon is different from the results of research by Devi et al. which states that there is a relationship between community knowledge and adherence to using masks as an effort to prevent COVID-19 [10]. Whereas in this study, respondents' concerns about the infection of the disease became the main drive for the community to perform various disease prevention behaviors that they got from social media.

Most of the perception of the respondents conclude that the factor of public dishonesty,

society boredom and economic needs are the main factor why this disease has not been controlled yet.

The various policies from the government in the economic field such as cash aid, basic foods are only allocated to people who are included in the poor category. Meanwhile, the impact of this disease is felt by all layers of society. The success of breaking the chain of COVID-19 transmission is highly related to the socio-economic life of the community and government policies. One of the choices of adaptation patterns with the presence of this virus is the new normal life. However, this implementation will be constrained in the field because the concept is not yet known to most people.

Although there are several good policies of the government but the support from the community to follow the policy is still minimal so the purpose of the policy to break the chain of disease transmission has not been achieved. In line with the results of research from Nadif and colleagues, to be able to prevent the transmission of COVID-19, cooperation between the community and the government is needed [11]. In addition, the government must also build a good and consistent communication system in policy monitoring and controlling to ensure that the new prominence becomes a habit in the community. It is similar with the results of research from Heri et al., the government must systematically and consistently implement concrete allocation, distribution and stabilization policies in the community in accordance with its empirical conditions [12].

The lack of relevant socialization, information and poor communication from the elites in debating this concept makes people less understanding the concept and practice of this new normal life. Currently, there are various social media such as: television, mainstream media (Facebook, Whatsapp) as sources of information and as a reference for the public to be able to avoid this disease. Unfortunately, the lack of supervision and filters from the government creates confusion and indecision in the community. The social media has mixed valid information with hoax news which sometimes becomes confusing for the public. On the other hand, the government and the task force unit team are also involved in the vortex of misinformation.

There are at least thousands of incorrect information or Hoaxes about COVID-19. 1,096 has been identified as the issue of hoax COVID -19 spread through various digital media *platforms* [13].

Such incorrect information can lead to potential damage and disruption to the economic, social, political order in society [14].

5 Conclusions

From the result of this study, we can conclude that the level of knowledge in Kendal about COVID-19 is still lacking, but the people of Kendal has practiced ways to prevent the disease in which they received the information from social media such as: television, Facebook, Whatsapp. Most people of Kendal perceive that the transmission and spread of the disease can not be controlled because of these factors, such as lack of information about the disease, unfulfilled demand for psychological social needs and holidays as well as their non-compliance in following the health protocol in order to fulfill the economic needs of their family.

The readiness of the Kendal community in the implementing the new normal life cannot be seen yet due to the lack of socialization from the government and the massive hoaxes about COVID-19. However, they have practiced several health protocol guidelines according to their abilities.

A systematic and concrete government policy is necessary to be made for the implementation of a new normal life for the people in Kendal particularly and for the general public.

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